

reformation of health care services in our present health care system;

WHEREAS, among the most important tool in equalizing this endless quest for plans to achieve a better care service in Section 33 of RA 7160 otherwise known as the Local Government Code of 1991 provides, to wit:

Section 33. Operatives principles of decentralization.
Local Government Units may group themselves, consolidate or coordinate efforts, services and resources for purposes commonly beneficial to them.

WHEREAS, the sharing of resources of Local Government Units not only provides for an avenue of renewed hope of a better delivery of health service in participating local government units but also a symbol of a continuous commitment of our government to provide the best health care to our constituents;

WHEREAS, on the basis of the aforementioned provision of the Law and the spirit of public service, it is the best interest of the Local Government of Bulan, Irosin, Matnog and Sta. Magdalena to enter into and institutionalize an Inter-Local Health Zone where proportionate share in terms of efforts, services and resources shall be contributed by each participating Local Government Unit for the mutual benefit of their respective constituents;

WHEREAS, taking into account the nobility of purpose for which the Inter-Local Health Zone between the Local Government of Matnog as well as the Local Government of Bulan, Irosin and Sta. Magdalena was conceived, on motion of Honorable Edward Ruel T. Barlin duly seconded by Honorable Ardelito S. Dejaño which was unanimously approved by the members present, be it

RESOLVED, as it is hereby resolved, to enact an ordinance for the institutionalization of the BIMS Inter-Local Health Zone.

Municipal Ordinance No. 06-2004

"AN ORDINANCE INSTITUTIONALIZING THE INTER-LOCAL HEALTH ZONE OF THE LOCAL GOVERNMENT UNIT OF BULAN, IROSIN, MATNOG, AND STA. MAGDALENA, SORSOGON"

Article 1. General Provision

Section 1. Short Title

This ordinance entitled **"AN ORDINANCE INSTITUTIONALIZING THE INTER-LOCAL HEALTH ZONE OF THE LOCAL GOVERNMENT UNIT OF BULAN, IROSIN, MATNOG, AND STA. MAGDALENA, SORSOGON"**

Section 2. Rationale/Purpose/Objectives

- a. to ensure that health is available to everyone, carefully planned and adequately delivered.
- b. To set-up a care delivery system wherein the Local Government Unit and the Community actively participate.
- c. To ensure the unification of municipalities and sharing of resources, a more concrete and stable health care delivery system may be established which could understand constantly changing internal and external government.

Section 3. Rules of Interpretation

Section 4. Rules of Interpretation. These Implementing Rules and Regulations (IRR) shall be construed liberally in order to promote the objective of securing a committed cooperation for health and other health-related matters among participating LGU's and other stakeholders

Definition of Terms as used in these rules and regulations, the following jargons shall be construed



OFFICE OF THE SANGGUNIANG BAYAN

EXCERPTS FROM THE MINUTES OF THE REGULAR SESSION OF THE SANGGUNIANG BAYAN HELD AT THE SB SESSION HALL, MUNICIPAL BUILDING ON SEPTEMBER 1, 2004 AT 1:00 O'CLOCK IN THE AFTERNOON.

Present:

Hon. Carlos G. Estrelon, Jr.	Municipal Vice Mayor (Presiding Officer)
Hon. Jaime G. Gata, Jr.	Sangguniang Bayan Member
Hon. Edward Ruel T. Barlin	-do-
Hon. Romeo G. Garalde	-do-
Hon. Ardelito S. Dejaño	-do-
Hon. Melchor G. Garcera	-do-
Hon. Romeo G. Garrido	-do-
Hon. Julio E. Garduque	-do- (ABC President)

Excused:

Hon. Marc Ace C. Gacis	Sangguniang Bayan Member SK Municipal Federation President
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Absent:

Hon. Noel T. San Pablo	Sangguniang Bayan Member
Hon. Ubaldo M. Ubaldo	-do-

Resolution No. 22 s. 2004

A RESOLUTION ENACTING AN ORDINANCE FOR THE INSTITUTIONALIZATION OF BULAN-IROSIN-MATNOG-STA. MAGDALENA INTER LOCAL HEALTH ZONE

Author: Hon. Edward Ruel T. Barlin

WHEREAS, Supplemental Memorandum of Agreement declares that all participating Local Government Unit shall create the Inter-Local Health Zone through Inter-LGU Cooperation in the aforesaid municipalities, the Inter-Local Health Zone Board as the policy and governing body that provides complementary policy advice to the health units of the area;

WHEREAS, adopting the Technical Management Committee as the Secretariat on the Inter-Local Health Zone Board that provides technical recommendations and advices to the Board and the catchment faculties;

WHEREAS, Establishing an Inter-Local Health Zone common Health Funds derived from the contributions or grants from participating LGUs, DOH and NGOs, the disbursement of which shall be authorized by the Board and under supervision of the Technical Management Committee; and

WHEREAS, adoption of the Board approved management systems for sustainability of the health System, as detailed under the BIMS Inter-Local Health Zone Implementing Rules and Guidelines;

WHEREAS, the inadequacy to much needed funds to support all the social services program of the Local Government Unit possess as the greatest challenge on how to address effectively and efficiently health-related programs and projects of the government;

WHEREAS, in as much as the health of our constituents is a non negotiable issue, each Local Government Unit must be vigorous, relentless and vigilant in its search for feasible health programs notwithstanding its meager resources;

- system in which individuals, communities and all other health care providers in a well-defined geographic area participate together in providing quality, equitable and accessible health care premised on the Inter-LGU partnership as the basic framework;
- b. Zone or Health Zone. Refers to the Inter-Local Health Zone herein created;
 - c. Inter-Local Health Zone (ILHZ) Board. A body established through the collective efforts of all the participating Local Government Units and other identified health stakeholders;
 - d. Local Government Unit. This refers to the political subdivision of the government created under the Local Government Code of 1991, vested with corporate and governmental powers and enjoying autonomy from the national government in the administration of their local affairs;
 - e. Local Chief Executive (LCE) Refers to the Mayor or Governor of a Province, City or a Municipality, respectively
 - f. Local Health Board. A structure mandated by the Local Government Code of 1991 and established at the Municipal, City or Provincial, this advisory body is granted by law to recommend policies and measures for the operation and maintenance of health facilities and services in their respective scope.
 - g. Barangay Health Station (BHS). The smallest health unit under the Philippine Health System administered by a Rural Health Midwife and assisted by the Barangay Health Workers (BHWs) and other health volunteers;
 - h. Municipal Health Office (MHO). A health unit which provides primary health care related services, its operation is headed by a Physician, along with Nurses, Midwives, Rural Sanitation Inspectors, Medical Technologist, Dentist and other support personnel. With a level of health care service higher than that of a BHS but lower than that of a District Hospital;
 - i. Core Referral Hospital. A secondary level health facility which is capable of dealing with referrals from the community, private medical practitioner, and public health care services such as the Rural Health Unit (RHU). Providing a minimum health services that includes: outpatient services, obstetrics and trauma cases;
 - j. Exigency of Service. Is a situation where service is urgently needed and where any delay in its execution and delivery will adversely affect the outcome of the service as well as pose a threat to the life of a person, community and/or to the condition of a facility or property;
 - k. Fund. Refers to the common trust fund intended for the establishment and maintenance of the Inter-Local Health System in a Health Zone;
 - l. Supplies. Includes materials and equipment necessary in the fulfillment of an activity, a project or a program.

Article II. Creation of BIMS – ILHZ

For the BIMS-ILHZ to have life and sustainability, a resolution shall be passed by the respective Sangguniang Bayan of Bulan-Irosin-Matnog and Sta. Magdalena embodying therein grant of authority to its respective Local Executive to enter into a Memorandum of Agreement (MOA) to institutionalize BIMS-ILHZ, to the end that their respective LGU, health services may be integrated.

By virtue of such resolution, the Local Government Unit of Irosin and the Local Government Unit of Bulan, Matnog, and Sta. Magdalena through its Local Chief Executive, shall enter into a Memorandum of Agreement for purposes of integrating health service, pooling human, technical, financial, material and other essential resources by adopting and maintaining an inter-Local Health Zone of Bulan, Irosin, Matnog, and Sta. Magdalena.

Article III. Adoption of Rules and Regulations

In the implementation of this ordinance, BIMS-ILHZ shall be guided by the rules and regulations as herein below set forth, to wit:

Sec. 3. Guiding Principles for Cooperation of the Inter-Local Health Zone

- a. The guiding principles of cooperation between and among the participating LGUs are the provisions of the 1987 Philippine Constitution and the Local Government Code of

"Local Government Units may group themselves, consolidate or coordinate their efforts, services and resources for purposes commonly beneficial to them."
(Article X, Section 13, of the 1987 Constitution)

"Local Government Units through appropriate ordinances group themselves, consolidate and coordinate their efforts, services and resources for the purpose beneficial to them. In support of such undertaking the local government involved may, upon approval of the Sangguniang Concerned after a public hearing conducted for the purposes, contribute funds, real estate, equipment and other kinds of property and appoint or assign personnel under terms and conditions as may be agreed upon by the participating local units through Memoranda of Agreement." (Article III, Section 3 of RA 7160)

- b. The general objective of this cooperation is to ensure and strengthen collaborative linkages between and among LGUs, DOH, NGO, Pos, Private Sectors, and other National Agencies through the generation, mobilization and allocation for the attainment of "Health in the hands of the People by year 2020."

In particular, this cooperation shall organize an Inter-Local Health Zone and the Technical Management Committee, who shall oversee the following:

- i. Assess health situation in the ILHZ and identify prevailing health problems that need to be addressed;
- ii. Review in preparatory manner the management service output and extent of coordination provided by all BHS, Rural Health Units, Primary Community Hospitals and District Hospital;
- iii. Assess and monitor existing human resource and its capabilities to include the Barangay Health Workers, Hilots and other traditional healers and implement a continuous training activities that would upgrade the technical as well the institutionalize competence;
- iv. Ensure that all ILHZ member Municipalities are implementing a formulated Municipal Health Operational Plan;
- v. Review the implementation of the essential drugs procurement system, as to price, quality, and ensure its conformity with the National Drug Formulary of the Generics Law;
- vi. Strengthen health care delivery by utilizing a functional two-way referral system;
- vii. Establish an Integrated Information and Management System at the ILHZ level through setting-up of a computer network and Community-Based Health Data Boards.
- viii. Prepare the development of a Health Zone Insurance Scheme biased for the low-income population through the indigency component of the National Health Insurance and Community-Based Health Program;
- ix. Adopt and implement the "Sentrong Sigla" or "Center of Wellness" of the Department of Health focusing and working towards Improved Quality of Services;
- x. Encourage partnership among Local Government Units and networking between line agencies, the communities and the non-Government Organizations (NGOs) and People Organizations working within the Inter-Local Health Zone.

Section 5. Composition of the BIMS Inter-Local Health Zone

- a. the BIMS Inter-Local Health Zone consists of the municipalities of Bulan, Irosin, Matnog, Sta. Magdalena, all in the Province of Sorsogon, under which the following health care units and facilities are covered, to wit:

- Rural Health Units (RHUs);
- Matnog and Bulan Municipal Hospitals;
- Irosin District Hospital; and,
- Including health facilities that may be established therein.

Section 6. Board Composition of the BIMS Inter-Local Health Zone

- a. The BIMS Inter-Local Health Zone shall be the unifying and coordinating authority composed of, but not limited to the following:
- Local Chief Executive (LCEs) of covered Municipalities;
 - All Municipal Health Officers and Chief of Municipal Hospitals;
 - Chief of the Irosin District Hospital;
 - DOH Representatives
 - Health Chairman of the Sangguniang Panlalawigan and Sangguniang Bayan;
 - Representative of the Sorsogon Provincial Health Office;
 - Representatives of the Non-Government Organizations; and
 - President of Municipal Barangay Health Workers Association (On Rotation Basis).
- b. The Chairman of the Board shall come from the Local Chief Executives covering the BIMS-ILHZ. The Chairman of the Board will be rotated among LCEs on a quarterly basis, and shall assume the following responsibilities:
- Acts as Presiding Officer in all Board Meetings;
 - Sign all approved documents for the BIMS Inter-Local Health Zone; and,
 - Assume such other tasks upon the instruction of the Board.
- c. The Chief of the Irosin District Hospital shall act as the Ex-Officio Vice-Chairman of the BIMS ILHZ Board.
- d. In case of membership expansion to the BIMS-ILHZ Board, the approval of the majority of the Board members present in the deliberation may pass a resolution admitting an individual, official or representative of an agency.

Section 7. Functions of the BIMS Inter-Local Health Zone Board

- a. the BIMS-ILHZ Board shall provide for a complementary advisory, technical, supervisory and administrative support to health units in the health zone. It shall:
1. Serve as technical and advisory committee to individual Sangguniang Bayan and health offices of the component municipalities within the BIMS-ILHZ;
 2. Oversee and approve the holding of joint health planning and budgeting activities and other inter-LGU resource sharing;
 3. Advocate for municipal and provincial annual budgeting, particularly for health services allocations;
 4. Determine additional funding requirements for efficiency in health care service management and delivery;
 5. Identify other funding sources;
 6. Provide venues for recognizing innovative health practices within the BIMS Health Zone;
 7. Oversee the implementation of approved ILHZ policies.
 8. Oversee the monitoring and evaluation of public health and hospital services within the BIMS Health Zone; and
 9. Oversee the Technical management Committee operations.

consolidated as the BIMS Health Zone Plan, which will be subject for approval of the Provincial Health Board, while, the respective Local Health Board of each Municipalities shall endorse all Municipal Health Plans to respective Sangguniang Bayan.

Section 8. Meetings of the Board

- a. The BIMS ILHZ Board shall meet at least twice every quarter. The Chairman may however call for a special meeting to address urgent health concerns that may arise. As far as practicable, the order of the business in its meetings shall be:
 - a. Roll call;
 - b. Proof of due notice;
 - c. Consideration of the Minutes of the last meeting;
 - d. Reports of the RHUs, the Municipal Hospitals and the Irosin District Hospital;
 - e. Unfinished business;
 - f. New business; and
 - g. Adjournment.
- b. Notice of meeting shall be served to the members at least one (1) week prior to its schedule.
- c. Actual transportation expenses incurred by all members in attending the meetings shall be charged to the respective LGU and or Hospital budgets, while, the food served during the meeting shall be charged against the ILHZ trust fund, subject to the usual accounting and auditing rules and regulations.
- d. Majority of the members of the BIMS ILHS board shall constitute the quorum. Its acts shall be made effective after the approval by at least the majority of the members present in the meeting.

Section 9. Composition of the Technical Management Committ(TMC)

The technical Management Committee shall be the technical arm Of the BIMS ILHZ board. They shall be selected by the board And its composition shall include but not be limited to the following:

- Chief of the Irosin District Hospital
- 4 Municipal Health Offices
- 4 Public Health Nurses
- 2 Municipal Hospital Nurses
- 1 Rural Health Midwife
- 1 rural Sanitary Inspector
- Representatives coming from the following:
 - 1 Medical Technologist (Matnog Municipal Hospital)
 - 1 Pharmacist (Irosin District Hospital)
 - 1 Public Health Dentist (Irosin Disrict Hospital)
 - 1 Administrative Staff Representative (Irosin District Hospital).
- 1 NGO Representative
- 1 Peoples Organization Representative (BHWs)
- 1 Representative of the Provincial Health Office
- 1 Provincial Health Team
- 2 DOH Representatives

Section 10. Functions of the Technical Management Committee (TMC) the TMC shall be formed to assume the secretariat task for the BIMS ILHZ Board, and as such, shall

- b. Initiate integrated health planning
- c. Develop appropriate policies and systems and recommend for the approval of the BIMS ILHZ Board on such concerns such as :
 - Regular financial planning indicating identified priority areas for funding,
 - Health insurance scheme for the low- income population which is in conformity with the indigence component of the PhilHealth,
 - Minimum and complementary package of services for hospitals, RHUs and BHSSs,
 - Disease surveillance sentinel site,
 - Health Human Resource Development,

 - Implementing guidelines for the referral system, human resource sharing, health care financing, collective procurement system, and quality assurance standards, and
 - Lobbying with the provincial Government for retaining of hospital income.
- d. Initiate periodic assessment of all health programs and hospital performance

Section 11. Meetings of the technical Management Committee

- a. The TMC shall meet at least once every two (2) months. The designated TMC coordinator, the chief of the Irosin District Hospital, may however call for special meeting for urgent health concerns that may arise at the health zone.
- b. Actual transportation expenses and per diems incurred by all TMC members in attending the meeting shall be charged against the trust fund of the BIMS ILHZ, subject to the usual accounting and auditing rules and regulations.

Section 12. Relationship of the ILHZ with the local Health Boards at the Municipal and Provincial level

- a. In Relation to the Municipal Local Health Boards. The Municipal local health boards shall maintain their regular functions. Discussion in their regular meetings shall focus on internal affairs of the respective municipality, however, they may include zonal issues and proposals previously discussed at the ILHZ Board or TMC. The municipal LHB shall likewise observe the adoption of ILHZ approved policies and systems.
- b. In Relation to the Provincial Local Health Board. The Provincial Local Health Board shall maintain its regular functions. The official representatives of the PHO and the sangguniang panlalawigan at the BIMS ILHZ shall present the annual health zone work and financial plan to the provincial local health board for its approval
- c. In Relation to the Program Review initiated by the PHO. This conference becomes progressively the inter zonal conference, broadening the participating members from hospitals staff to public health staff and other stakeholders. Issues and problems common to the local health zone within the province of Sorsogon shall be discussed. The following shall be taken into consideration:
 - i. Issues and concerns that requires for policy legislations shall be brought to the provincial local health board for deliberation and shall be covered by a Sangguniang Panlalawigan Resolution.
 - ii. The frequency and content of the meetings shall be defined in

1. The Municipal Local Government Units, with the assistance from its local Health Board will be responsible for the following:
 - a. Formulate and implement an Integrated Municipal health Plan within the framework of the Inter-Local Health Plan, and anchored on its existing local health situation, supported with an analysis of collected relevant information.
 - b. Implement BIMS-ILHZ approved programs and projects under the Integrated Inter-Local Health Plan that are applicable to the locality;
 - c. Implement existing regulatory measures formulated at the national and provincial level, likewise, propose and institute additional necessary regulatory measures for the municipality;
 - d. Maintain the operations of the Municipal Health Office, including hospitals owned by them, and institute construction, repair, and renovation of these facilities if necessary;
 - e. Provide venues for coordination among health and other health-related public and private sectors/groups for the promotion of preventive health at the municipal level; and
 - f. Implement or support the conduct of research activities for effective health care delivery;
- 1.1. The Municipal Local Government Units shall likewise assume the following roles and responsibilities.
 - a. Accept as a goal the existence of one totally functioning RHU per 10,000 to 20,000 population, while, 1 BHS for every 3,000 to 5,000 population;
 - b. Improve and maintain the road networks to facilitate access/referral to/from the BHS, RHU, nearest hospital, or Sorsogon Provincial Health Office. And, whenever necessary, provide transport and communication facilities for medical and surgical emergencies.
 - c. Provide financial and technical support to vital community health workers and,
 - d. Ensure the provision of financial and technical support for programs and projects essential to health.

2. The Provincial Government will be responsible for the following:
 - a. Initiate for the formulation and implementation of provincial/ district health policies and plans in line with the national health framework and situated with the health condition existing in the province;
 - b. Provide administrative and technical assistance to the hospitals and extend technical supervision through coordination with the BIMS ILHZ;
 - c. Maintain the operations of the provincial/district and community hospitals in order for them to meet standards for hospital licensing and accreditation requirement of the PhilHealth;
 - d. Collection, collation and analysis of the health information obtained from municipal and component city levels, and, submission of reports on such to the Department of Health;
 - e. Implement or support the conduct of research activities for effective health care delivery;
 - f. Provide venues for coordination among health and other health – related public and private sectors/groups for the promotion of preventive health at the provincial level;
 - g. Provide financial assistance for the development and strengthening of the BIMS ILHZ;

- h. Initiate the regular conduct of semi – annual assessment of health programs and hospital service output among Inter – Local Health Zone; and,
 - i. Reinforce through policy legislations the compliance to the standard and regulations of the Sanitation Code of the Philippines and other devolved functions related to health.
 - 2.1 The Provincial Government through the Provincial Engineer's Office shall improve the geographical accessibility of the Zonal Health Facilities, improving the road conditions and eventually providing transport and communication facilities for medical and surgical emergencies;
 - 2.2 Provide and assist the municipalities with resources to fulfill their obligations in the health sectors and communities
3. The DOH – Center for Health Development for Bicol and its DOH Representatives in the field will be responsible for the following:
- a. Management of specified tertiary medical care facilities and specified health facilities intended to serve for proper referral system;
 - b. Technical Supervision of local health services and coordination with the Provincial/Municipal Local Health Boards and the other ILHZ Boards;
 - c. Extension to LGUs of technical, logistics and financial advisory support services;
 - d. Oversee the implementation of health regulatory measures;
 - e. Collaborate with concerned sectors in the formulation and implementation of human resource policies and plans;
 - f. Mobilize sources of funds and technical cooperation for health development purposes, both internal and external; and,
 - g. Promote and conduct research activities for effective health care delivery.
- 3.1 The DOH directly or through its Center for Health Development for Bicol and its DOH representatives in the field shall:
- a. Be in constant dialogue and coordination with the Inter – Local Health Technical Management Committee, play the lead role in the technical coordination of the health program;
 - b. Participating LGUs shall prepare their respective Annual Municipal Health Plan (AMHP). Thereafter, this AMHP shall be consolidated at the district level in order to present an Integrated Inter – Local Health Zone Plan to the DOH for regulation of inputs for effective and efficient implementation of the LGU project;
 - c. Establish a trust fund for grants from DOH Center Office and other related agencies, with specific guidelines for community – based health development project;
 - d. Assist the LGUs in their efforts to generate, mobilize and allocate resources, and likewise find a sufficient number of qualified personnel for the Inter – Local Health Zone; and,
 - e. Participate in the LGUs Training Needs Assessment (TNA) and make suggestions through the TMC for the selection of health staff and personnel to be trained.

hereby with the Local Government Unit of Irosin as Fund Trustee.

- b. All funds shall be deposited as " Trust Fund " to be utilized exclusively by the BIMS Inter – Local Health Trustee
- c. The BIMS Inter – Local Health Zone " Trust Fund " must be disbursed based on the Inter – Local Health Zone Work and Financial Plan.
- d. The Common Health Fund Shall be managed by the Inter – Local Health Zone Technical Management Committee. Designated and established by the BIMS ILHZ Board, its utilization shall be within the approved ILHZ Work and Financial Plan.
- e. The individual LGU shall appropriate funds from their respective budget as contribution to the Common Health Fund of the BIMS ILHZ. The Board shall determine the amount proportionate to the financial capacity of the individual LGU.

Section 15. Human Resource Development

- a. In the exigency of the service, the Board may detail health personnel anywhere within the Health Zone, subject to the provisions of the Revised Implementing Rules and Regulations of RA 7305.
- b. To ensure competence and integrity in the health service, the Board may adopt a uniform policy for the Health Zone on hiring and training of health personnel. And in the case of hiring, priority shall be afforded to residents in the municipality where vacancy occurs. Provided, he/she is willing to reside in the area of deployment. In the case of training of health personnel, the Board may request the Department of Health to conduct trainings or authorize the personnel to undergo such, in a Training Institution duly accredited by the government.

Section 16. Information System. The Board shall adopt a district – wide health information system, which consist to routine and weekly health surveillance, data collection as per the prescribed standards of the Department of Health. It shall also strive to train a physician or a nurse as District Epidemiologist.

Section 17. Referral System and Minimum Package of Services

- a. A Minimum Package of activity for primary Health Care, Complementary Package of activity for the Core Referral Hospital and Tertiary Package of activity for the Provincial Government referral hospital shall be developed and adopted in the health zone.
- b. A "two – way" referral system shall also be adopted at the health zone where the hierarchy levels of care would be from the BHW – Midwives at the BHS to the physician or nurse at the RHUs to the District Hospital and eventually to the highest level of health care if needed and vice – versa is observed. A prescribed referral from shall be utilized in the health zone.

Section 18. Planning and Budgeting

- a. The Planning and budgeting period for health shall comply with the schedule of activities issued by the National Health Committee, which was created under EO 205. The annual planning and budgeting cycle starts in the month of January and up to the submission of the executive budget to its respective Sanggunians. Each municipality shall prepare an Annual Municipal Health Plan, which ensures that the needs and aspirations of the people are considered in the plan and harmonized with the national priorities, pursuant to section 305, paragraphs (k) and (h) of RA 7160.

b. The Technical Management committee of the Health Zone shall conduct

Municipal Health Plans where the Integrated Health Plan for the ILHZ shall be derived.

- d. The Local Government Units shall commit themselves to support progressively their individuals LGU Health Budget every year. The LGU shall also seek to increase the percentage of funds allocated for the MOOE, this shall however be commensurate to the individual LGUs financial situation and exiting distribution patterns.

Section 19. Monitoring and Evaluation

- a. An Annual Health Program Review shall be conducted by the ILHZ Board through the TMC. This activity shall require the presence of concerned local planning officers, health personnel and other stakeholders as identified by the Board.
- b. In assessing the health trends and status of the Health Zone, the Board through the TMC may conduct quarterly evaluation of its health activities, project and program. It may device tools for monitoring and evaluation.
- c. Baseline data gathering and other surveys particular dealing with establishing a socio – economic profile for the Health Zone and reflecting the achievements of the Inter – Local Health System's goals and objectives.
- d. The BIMS ILHZ shall initiate the conduct of monitoring and periodic evaluation of the Integrated health zone Plan, which is independent from that the Provincial Health Office and the DOH activity.
- e. The monitoring functions of the PHO, DOH and the BIMS ILHZ shall be maintained at all levels of the Inter – LGU Health System.

Section 20. Accounting and Financial Monitoring and Evaluation

- a. The BIMS Inter – Local Health Zone through its Board and the TMC shall maintain a separate system for recording of the Common Trust Fund.
- b. The BIMS Inter – Local Health Zone through its Board and TMC shall keep the financial records from the date of signing of contracts for the purpose of auditing.
- c. The BIMS Inter – Local Health Zone through its Board and the TMC, shall make available all the financial records at any time for monitoring and auditing purposes by any legally authorized agencies.
- d. The TMC shall submit a Financial Statement, including a narrative report, every meeting of the board. These reports shall indicate the utilization of the revolving fund, commencing from the date of its implementation. Such report shall be furnished to the respective LGUs within the Health Zone and to the Provincial Health Board not later than two (2) weeks after then end of every reporting period.

Section 21. General Provisions

- a. Within one year after the signing of the memorandum of agreement between the participating LGUs and the Department of Health, concerned Sanggunian shall pass a joint ordinance constituting thr BIMS Inter – Local Health Zone.
- b. A Municipality applying for membership in the Inter – Local Health Zone may be admitted upon approval by the Board and ratification by all Sanggunian concerned.

Section 22. Amendments

- a. Any amendment in these rules and regulations may be proposed by at least majority members of the Board and shall take effect only after ratification by all concerned Sanggunian


must be ratification by all Sanggunian concerned.

Section 23. Effectivity. These rules and regulation shall take effect upon ratification by all concerned Sanggunian.


I hereby certify to the correctness of the foregoing.


JOSEPHINE G. BAUTISTA
SB Secretary

ATTESTED BY:


Hon. CARLOS G. ESTRELON, JR.
Municipal Vice Mayor
Presiding Officer

APPROVED BY:


GUILLERMO G. SO
Municipal Mayor