Administrative Order No. 07
Series of 2007

SUBJECT: Amendment to Guidelines on the Medical Mission Services for Children or A.O. 36 Series of 2004

The Guidelines on Medical Mission Services for Children is hereby amended to ensure more effective and efficient operations.

1. Under Section I - Rationale:

The 2nd paragraph shall read as:

While good medical care is available in the Philippines, some severe medical conditions cannot be treated, managed or responded to in the Philippines or if they can be, will entail huge costs that many families will be hard pressed to shoulder.

The 4th paragraph shall read as:

Medical mission for children was pioneered by a volunteer of CRIBS Philippines in 1982 and was carried on by Bahay Hand in Hand and Chosen Children in cooperation with an accredited foreign adoption agency for children legally cleared for adoption. The mission was able to help numerous children under the care of child caring agencies (CCAs) for them to have a new lease in life and an opportunity to have a permanent family.

2. Under Section II - Legal Bases:

Section II.4 - shall read as follows:

Article 3

State Parties shall ensure that the institutions, services and facilities responsible for the care or protection of children shall conform with the standards established by competent authorities, particularly in the areas of safety, health in the number and sustainability of their staff, as well as competent supervision. In all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative or legislative bodies, the best interests of the children shall be the primary consideration.

Section II.2 - The Child and Youth Welfare Code or Presidential Decree (PD) 603 provision is corrected as follows:
Title 1, Article 8 - Child’s Welfare Paramount – In all questions regarding the care, custody, education and property of the child, his/her welfare shall be the paramount consideration.

3. Under Section III - Description:

The first paragraph is revised to read as:

Medical Mission Services shall refer to the provision of medical/surgical care/therapy/psychiatric intervention to children nationwide whose medical conditions cannot be treated, managed or responded to in the Philippines. This service shall provide for the physical transfer of the child to another country where a sponsor or agency/hospital has committed to provide free medical care and treatment as well as transportation to and from the Philippines for the child and accompanying person(s) and accommodations during their stay in the host country. The child is to be cared for by a host family during the child’s pre-operative, operative, and post operative stages.

4. In Section IV - Definition of Terms:

Include the definition of a child and child placing agency:

4. Child – refers to a person below eighteen (18) years of age or those over this age who are unable to fully protect themselves from abuse, neglect, cruelty, exploitation or discrimination because of physical or mental disability or condition.

5. Child Placing Agency – refers to an institution or person assuming the care, custody, protection and maintenance of children for placement in any child-caring institution or home or under the care and custody of any person for purposes of adoption, guardianship or foster care. The relatives of such child or children within the sixth degree of consanguinity or affinity are excluded from this definition (Article 117 (9) P.D. 603).

5. In Section VI - Policies

Include the following policies

14. All children for medical mission services to include those cleared for inter-country placement shall be processed by DSWD.

15. A quarterly progress report on the condition of the child should be submitted by the sponsoring agency to the DSWD. In case of unexpected complications or any other emergency situation of the child a report should be sent immediately.
16. A certificate should be secured from the attending physician/pediatrician that the minor's medical conditions cannot be treated, managed or responded to in the Philippines at a cost that can be reasonably borne by the family or the Child Caring Agency.

17. A Travel Clearance for the child for medical mission shall be secured from DSWD. The travel arrangement and approximate number of days that the child will stay in the host country, if determined, should be indicated in the clearance. The issuance of the travel clearance shall be supported with the certificate indicated in item #15.

18. The sponsoring agency/organization and host family shall ensure that the child identified for medical mission shall not in any way be used for personal or financial gains of the former.

19. In case the treatment/rehabilitation abroad is unsuccessful resulting in the death of the child, the sponsoring agency/organization shall report the incident to the DSWD and the Philippine Foreign Service Post, which has jurisdiction over the case, within 24 hours indicating the circumstances of the child’s death. A complete report and the pertinent documents, as required by the concerned Philippine Foreign Service Post shall follow as soon as possible.

In the event there is doubt or lack of relevant information regarding the circumstances involving the death of the child, an autopsy may be required from the government doctor to be facilitated by the sponsoring agency/organization and the Philippine Foreign Service Post may conduct an investigation, when deemed necessary.

If the burial of the deceased child is to be done in the Philippines, the sponsoring agency/organization shall take full responsibility for the travel cost and arrangements of the body and of the accompanying person if any in coordination with the concerned Philippine Foreign Service Post as well as in fulfilling legal requirements in accordance with the laws of the host country.

The Child Caring Agency where the child came from will be responsible for the child’s remains once brought back to the Philippines.

In case the immediate burial of the deceased child is deemed necessary as certified by the attending physician and fulfilling the legal requirements of the host country, the sponsoring agency shall facilitate the interment of the child in the host country. Such undertaking shall be
reported to the Philippine Foreign Service Post and the DSWD within 24 hours.

20. In case the host family decides to adopt the child, rules and regulations pertinent to RA 8043 “The Intercountry Adoption Law” shall apply.

6. In Section IX - Documentary Requirements:

Number 9 of Section IX.A - Child in Residential/Foster Homes shall read as:

9. Affidavit of Consent by the Parent/s or the legal guardian/s. For cases of abandoned or surrendered children, the DSWD will execute the affidavit of consent to travel.

Numbers 1 and 2 of Section IX.B - Child in Community shall read as:

1. In cases where the parents/guardian are incapable to escort, a Special Power of Attorney executed by the parents or legal guardian of the child in favor of the DSWD and the Sponsoring Agency allowing them to bring the child abroad to exercise custody over the child including the right to make a decision for the purpose of medical treatment abroad.

2. Affidavit of Consent by the parents or the legal guardian/s.

In Section IX C.1 - Sponsoring Agency/ Organization

- To include profile of host families
- Report on child’s progress shall include pictures which shall be submitted on a quarterly basis.

7. In the Implementing Procedures, under the Return to the Philippines, it shall read as:

1. The return of the child to the Philippines shall be coordinated by the sponsoring agency with the Program Management Bureau of the DSWD regardless of whether for adoption or return to the family.

8. In the Role Delineation and Responsibilities:

To include the following functions:
Program Management Bureau

- Coordinate with the Standards Bureau on the status of operation of the local sponsoring/child caring agency having custody of the child.

DSWD – Field Office

1. Identify/nominate/refer to PMB children from its facilities and other licensed/ accredited CCAs who are in need of, and are eligible for, medical mission services abroad.

2. Facilitate medical assessment of the child and submit a medical assessment certificate indicating the need for urgent medical intervention.

3. Facilitate/provide after-care services once the child comes back from treatment abroad.

4. Review all reports on the child abroad submitted by the local/foreign sponsor and note concerns needing action.

The GO/NGO Child Caring Agency (CCA) shall be changed as Government Agencies/Local Government Units and Non Government Organizations.

All those stated as Social Technology Bureau shall be changed to Program Management Bureau.

All previous memoranda/directives/issuances inconsistent with this Administrative Order are hereby repealed or modified accordingly.

Issued in Quezon City this day 7th of March, 2007.

ESPERANZA I. CABRAL
Secretary