



ORDINANCE NO. 14183-2021

AN ORDINANCE ESTABLISHING THE HUMAN MILK BANK AND LACTATION SUPPORT CENTER IN CAGAYAN DE ORO CITY GOVERNMENT-OWNED HOSPITALS, APPROPRIATING FUNDS THEREFOR, AND FOR OTHER PURPOSES

Whereas, local government units, pursuant to the powers given under Republic Act No. 7160, otherwise known as the Local Government Code of 1991, should provide for and respond to the basic needs and necessities of its inhabitants, as well as defend the rights of children to have access to proper care and nutrition in all forms;

Whereas, breastmilk is the healthiest, cheapest, most accessible form of milk, the most efficient way of providing adequate nutrition to babies and helps in the treatment of conditions associated with prematurity and other neonatal illnesses, the same being proven through numerous scientific publications;

Whereas, in its 2002 paper entitled "Infant and Young Child Nutrition: Global Strategy on Infant Young Child Feeding," the World Health Assembly lists donor milk as the first alternative source for infants whose mothers are unable to provide their own milk;

Whereas, the following legislation encourages health facilities to set up milk banks for the collection, storage and utilization of breastmilk donated by mothers and which have undergone pasteurization: Section 5 of Republic Act 10028, otherwise known as the "Expanded Breastfeeding Promotion Act of 2009," Section 10 of Republic Act 7600 or the "Rooming-In and Breastfeeding Act of 1992," and Section 8 (d) (8) of Republic Act 11148 or the "Kalusugan at Nutrisyon ng Magnanay Act";

Whereas, this ordinance seeks to establish a Human Milk Bank and Lactation Support Center (HMB-LSC), that will provide a sufficient supply of breastmilk to vulnerable infants and make skilled lactation support accessible for mothers to meet optimal breastfeeding goals.

NOW, THEREFORE:

BE IT ORDAINED by the 19th City Council (*Sangguniang Panlungsod*) of Cagayan de Oro in a session duly assembled that:

SECTION 1. Title – This ordinance shall be known as the "**Cagayan de Oro City Human Milk Bank and Lactation Support Center Ordinance**".

SECTION 2. Declaration of Policy – It is the policy of the City to promote and advance the right to health of women, as well as their children, by providing for their basic needs and necessities. All mothers can breastfeed and all infants have access to breastmilk, provided they have accurate information, and the support of their family, the health care system, and society. The establishment of a Human Milk Bank and Lactation Support Center contributes to the reduction of preventable mortalities among newborn and infants who lack access to breastmilk and its unique nutritious qualities.

SECTION 3. Definition of Terms:

- a) **Breastmilk** – is a complex fluid, rich in nutrients and non-nutritional bioactive components that cannot be replicated by artificial formula so that for infants who do not have access to their own mother's milk, donor milk can be life-saving. It is the best feeding option for both full term and preterm infants.



- b) **Pasteurized donor milk (PDM)** – expressed breastmilk brought to a Human Milk Bank for treatment to make it safer for later consumption by newborns and infants in need. PDM is a temporary source of safe milk for newborns and infants unable to breastfeed from their mothers.
- c) **Breastmilk Donor/Donor** – a healthy lactating mother who donates breastmilk without remuneration for the benefit infants in need of breastmilk.
- d) **Recipients** – Neonates and infants, represented by their mothers and caregivers, from whom PDM is prescribed and where it is culturally acceptable.
- e) **Health Personnel** – are professionals and workers who manage and/or administer the entire operations of health institutions and/or who are involved in providing maternal and child health services.
- f) **Human Milk Bank** – a service established for the purpose of collecting, screening, processing, storing, and distributing donated breastmilk to meet the specific needs of infants for whom human milk is prescribed by licensed health care providers.
- g) **Prematurity** – neonate born before 37 weeks' age of gestation counting from the first day of the last menstrual period (LMP)
- h) **Low birth weight** - refers to weight at birth of an infant, whether born full term or preterm, of less than 2,500 grams
- i) **Malabsorption** – a disorder in which the small intestine cannot absorb enough of certain nutrients and fluids
- j) **Feeding intolerance** – inability to digest enteral feedings associated with increased gastric remains, abdominal distention and/or emesis, this condition is frequently encountered in the very preterm infant and often leads to a disruption of feeding
- k) **Immunologic deficiency** – disease or condition in which there is a loss or defect in a component of the immune system. Patients with this condition have an increased susceptibility to infections
- l) **Congenital abnormalities** – also known as defects, congenital disorders or congenital malformations that can be defined as structural or functional anomalies that occur during intrauterine life and can be identified prenatally, at birth, or later in life
- m) **Post-operative surgical conditions** – cases where there is a need for supportive care and adequate nutrition for neonates and/or infants to be provided after a surgical procedure
- n) **Lactation Management** - the general care of a mother-infant nursing couple during the mother's prenatal, immediate postpartum and postnatal periods. It deals with educating and providing knowledge and information to pregnant and lactating mothers on the advantages of breastfeeding, the physiology of lactation, the establishment and maintenance of lactation, the proper care of the breasts and nipples, and such other matters that would contribute to successful breastfeeding

SECTION 4. Creation of a Human Milk Bank and Lactation Support Center (HMB-LSC) – There shall be created within the City-owned hospitals the "Human Milk Bank and Lactation Support Center", which shall have the following functions:

- a) To collect, screen, process, store, and distribute donated human milk;



PAGE 3 OF 10 OF ORDINANCE NO. 14183-2021

- b) To implement guidelines issued by the HMB-LSC Advisory Board together with the HMB-LSC Committee with respect to the donation, collection, screening, processing, storing and distribution of donated breastmilk; and
- c) To coordinate with breastfeeding support groups and barangay health workers in Cagayan de Oro City for the creation of enabling breastfeeding programs thereby encouraging optimal breastfeeding practices and regular breastmilk donations;
- d) To provide skilled lactation management support for mothers admitted at the City-owned Hospitals; and
- e) To serve as a referral center for infants requiring nutritional and breastfeeding support

The milk bank shall be operated on a non-profit basis among Kagay-anons, but a minimal processing fee may be charged to cover for the screening, processing and administrative costs. However, inability to pay for the said fee shall not be a reason for non-availment of the milk for patients in need but would be referred to the City Social Welfare and Development Department for financial assistance.

SECTION 5. HMB-LSC Composition – The Human Milk Bank and Lactation Support Center (HMB-LSC) shall be composed of trained and dedicated health personnel in human milk banking and lactation management. Staffing of the HMB-LSC shall be guided by the recommendations set forth in the Philippine Human Milk Banking Manual of Operations.

- a) MILK BANK HEAD (consultant pediatrician from the city-owned hospital) who shall:
 - i. Lead the planning, development, implementation and evaluation of the administrative, medical and educational services of the Human Milk Bank and Lactation Support Center;
 - ii. Assist in preparing the Milk Bank's policies and procedures;
 - iii. Network with other hospitals with milk banks, to augment the supply of human milk and exchange information and ideas;
 - iv. Establish linkages and coordination with other government agencies;
 - v. Develop research protocols and facilitate/encourage research related to human milk banking and lactation support;
 - vi. Facilitate capacity building of all Milk Bank and Lactation Support Center Staff;
 - vii. Facilitate conduction of conferences to discuss problems/issues related to milk bank operations;
 - viii. Receive and reply to requests, endorsements and correspondence from various government agencies.
- b) HUMAN MILK BANK COORDINATOR (Nurse), who shall;
 - i. Be responsible for and oversee the efficient operation of the Human Milk Bank, breastfeeding education, advocacy-information campaign on breastfeeding and milk donation, including making information and education materials like flyers, leaflets, booklets and other reading materials;
 - ii. Monitor constant availability of donor milk;
 - iii. Be responsible in handling finances, supplies and equipment inventory as well as the staff;
 - iv. Ensure that staff are trained in milk banking and lactation management principles, protocols and procedures;



- v. Implement guidelines issued by the Advisory Board on proper donation, collection, screening, processing, storing and distribution of donated breast milk;
 - vi. Regularly monitor milk bank equipment function and report for maintenance checkups and calibration;
 - vii. Act as custodian of learning materials and resources;
 - viii. Network for donor recruitment and support.
- c) TWO (2) LACTATION MANAGERS (Nurse), who shall share in the following responsibilities:
- i. Perform initial screening on individuals who volunteer to become milk donors;
 - ii. Instruct donors in the proper methods and protocols in milk expression, collection, handling, storage and transportation of human milk;
 - iii. Counsel mothers regarding the importance of breastfeeding and assist in the process of re-lactation whether in the community, at the wards of the city-owned hospital, or at the Human Milk Bank and Lactation Support Center;
 - iv. Keep and file milk bank records such as donor records, administrative records, and recipient records for tracking and recall of donor milk purposes;
 - v. Coordinate with and assist both private and government institutions, and agencies for information dissemination and advocacy campaigns;
 - vi. Conduct milk letting and milk collection activities in health centers and lying in centers in coordination with the City Nutrition Office;
 - vii. Coordinate transportation for picking up milk from donors, and distributing/delivering milk to end-users with proper instructions;
 - viii. Responsible for the release of donated breast milk to recipients;
 - ix. Refer mothers and infants who need medical or surgical support in order to breastfeed successfully to the appropriate physicians; and
 - x. Be responsible for the training and teaching of physicians, nurses, paramedical staff, mothers, milk bank volunteers, and communities on lactation management.
- d) NURSING ATTENDANT who shall:
- i. Perform secretarial assignments in support of the ongoing activities of the Center
 - ii. Be responsible for handling and labeling of breastmilk upon acceptance and arrival from different milk collecting stations;
 - iii. Be responsible for the pasteurization process of the breastmilk;
 - iv. Report problems in the functioning of the breastmilk equipment to the breastmilk coordinator;
 - v. Assist the Medical Technologist;
 - vi. Responsible for washing and sterilization of supplies (breastmilk container, etc.);
 - vii. Assist in information and advocacy campaigns.
- e) MEDICAL TECHNOLOGIST, who shall:
- i. Carry out all laboratory tests after initial screening interview and physical examination;



PAGE 5 OF 10 OF ORDINANCE NO. 14183-2021

- ii. Conduct routine bacteriologic evaluation of all pooled raw human milk and all batches of pasteurized donor milk;
 - iii. Be responsible for documenting, labelling and segregating the breast milks collected and tested.
- f) HIV AND AIDS COUNSELOR, who shall:
- i. Be responsible for managing and counseling those donors who are identified as high risk for HIV during initial screening
- g) UTILITY WORKER, who shall:
- i. Perform various tasks relative to his/her work such as but not limited to cleaning and preparations of materials and washing and sterilizing bottles
 - ii. Be responsible for maintaining the cleanliness of the Center
 - iii. Assist the Nursing Attendant and Lactation Specialist in various tasks
- h) DRIVER, who shall:
- i. Receive daily work instruction from the administrator or duty officer of the day especially in the collection and delivery of human milk.

The Credentials and Evaluation Committee of the City-owned hospital shall be directly responsible for the screening of HMB-LSC personnel for hiring purposes, with the involvement of the City Human Resource Management Office in its usual procedure.

SECTION 6. HMB-LSC Advisory Board – There is hereby created the Cagayan de Oro City Human Milk Bank and Lactation Support Center Milk Bank Advisory Board, which shall be composed of the following:

- A. Chairperson - Chief of City – Owned Hospital
- B. Vice Chairperson - Chairperson, Committee on Women and Family relations
- C. Members:
 - i. City Health Officer from City Health Office
 - ii. Chairperson, Committee on Social Services
 - iii. Committee on Health, Sanitation and Health Insurance
 - iv. HMB-LSC Head
 - v. Human Milk Bank Specialist
 - vi. Infant and Young Child Feeding Specialist from Accredited Non-Government Organization with advocacy/programs in breastfeeding
 - vii. Head of Barangay Health Operations Center
 - viii. Representative from the Cagayan de Oro Breastfeeding Support Groups

SECTION 7. HMB-LSC Advisory Board Duties and Responsibilities – The Cagayan de Oro City HMB-LSC Advisory Board shall have the following duties and functions:

- a) Formulate and submit a comprehensive program to ensure, monitor and evaluate the implementation of the HMB-LSC Ordinance and its Implementing Rules and Regulations;



- b) Ensure that the policy and guidelines in its Manual of Operations are in accordance with the Philippine National Committee on Human Milk Banking (PNCHMB), as well as of the Department of Health Administrative Orders relevant to Human Milk Banking and Lactation Support, and the Minimum Standards for the Establishment and Operations of a Human Milk Bank in Southeast Asia by the Southeast Asian Human Milk Bank Network.
- c) Spearhead the application of a License to Operate
- d) Ensure maintenance of the facility and its sustainability;
- e) Consult regularly with HMB-LSC personnel on quality improvement measures and other issues;
- f) Spearhead public education, awareness, campaign and promotion of breastfeeding support and breastmilk donation drives;
- g) Collaborate with international and national agencies, non-government organizations and private sector for the improvement of the program and expansion of its services.

SECTION 8. Cagayan de Oro City HMB-LSC Committee – There is hereby created the Cagayan de Oro City Human Milk Bank and Lactation Support Center Committee, which shall be composed of the following:

- A. Human Milk Bank Head - Pediatric Consultant from City-Owned Hospital
- B. Human Milk Bank Coordinator - Lactation Specialist from Accredited Non-Government Organization with advocacy/programs in breastfeeding
- C. Technical Working Group -
 - i. Lactation Specialist from City-Owned Hospital
 - ii. Representative from the Department of Pediatrics of City-Owned Hospital
 - iii. Representative from the Department of OB-Gynecology of City-Owned Hospital
 - iv. Representative from the Infection Prevention and Control Office of City owned Hospital
 - v. Head of the Department of Laboratories of City owned Hospital
 - vi. HIV and AIDS trained counsellor from City owned Hospital
 - vii. City Legal Officer
 - viii. Representative from the City Health Office
 - ix. Representative from the Department of Health

SECTION 9. Duties and Responsibilities of the HMB-LSC Committee – The Cagayan de Oro City Human Milk Bank and Lactation Support Center Committee shall have the following duties and functions:

- a) Assist in the formulation of guidelines related to milk bank operation
- b) Monitor the efficiency of the HMB-LSC operations and submit reports to the Advisory Board



- c) Monitor proper implementation of milk bank procedures and ensure continuous quality improvement protocols using assessment tools
- d) Recommend solutions identified problems in consultation with the Milk Bank Head and Coordinator
- e) In coordination with the Advisory Board, develop promotional activities that will uplift public knowledge on the value of human milk, increase the milk bank's donor pool, and incite interest of private individuals and organizations to support the milk bank
- f) Act as consultant for laboratory screening procedures
- g) Conduct research related to Human Milk Banking operations

SECTION 10. Breastmilk Donor Criteria – The HMB-LSC Committee shall draft the necessary rules and regulations providing for the qualification, disqualification and benefits of a prospective milk donor, to be duly approved by the Advisory Board.

SECTION 11. Donor Milk Processing and Storage – The HMB-LSC Committee shall maintain, review and regularly update the Manual of Procedures providing the rules and guidelines to be observed in the donation, collection, screening, processing, storing and distribution of donor milk, yearly and as necessary, which document to be duly approved by the Advisory Board.

SECTION 12. Selection of Recipients and Dispensing for Sick Infants Admitted to Hospitals – Pasteurized donor milk shall be dispensed by prescription or by hospital purchase order to newborns or infants at the NICU, pediatric wards and emergency rooms with the following conditions:

- a) Prematurity
- b) Low birth weight
- c) Malabsorption
- d) Feeding intolerance
- e) Immunologic deficiencies
- f) Congenital abnormalities
- g) Post-operative surgical conditions

No person, including hospital employees, other than the health personnel stationed in the human milk bank shall be allowed to allocate the breastmilk collected, unless otherwise sanctioned by this Ordinance.

SECTION 13. Prioritizing Recipients – Distribution of donated pasteurized breastmilk shall be done under the following conditions, at maximum volume not exceeding 24 ounces per day per infant, and with the following hierarchy of priorities:

A. Level I

Pasteurized donor milk shall be given for free to infants with the following conditions:

- i. Sick preterms or low birth weight newborns admitted at the Neonatal Care Unit of the City owned Hospitals.
- ii. Well preterms or low birth weight newborns admitted at the wards of the City owned Hospitals.
- iii. Sick term newborns and infants admitted at the wards of the City owned Hospitals.



- iv. Well newborns and infants whose mothers are admitted at the City owned Hospitals who are too ill to do direct breastfeeding.

B. Level II

Pasteurized donor milk shall be taken from an emergency and disaster pasteurized donor milk pool set aside for the purpose and given for free to infants with the following conditions:

- i. Sick preterm or low birth weight newborns admitted at the Neonatal Care Unit of other government owned Hospitals.
- ii. Well preterm or low birth weight newborns admitted at the wards of other government owned Hospitals.
- iii. Well newborns and infants whose mothers are admitted at other government owned Hospitals who are too ill to do direct breastfeeding.
- iv. Infants who are the victims of calamity-stricken areas.

C. Level III

Pasteurized donor milk shall be given subject to a processing fee to sustain Milk Bank operations, such as fee to be determined by the Advisory Board and under the following conditions as long as extra supplies are available:

- i. Infants in the community with conditions where short term use of donated breast milk (less than 3 weeks) is needed, even without medical indications.
- ii. For research purposes in well-designed studies, subject to availability and upon the discretion of the Advisory Board.
- iii. Other conditions where Level I and II criteria are not fulfilled, subject to availability of supplies, and upon the discretion of the Advisory Board and in alignment with the Philippine National Committee on Human Milk banking in determining qualified recipients of donor milk.

All other conditions not covered under this Section shall be considered by the HMB-LSC Committee and submitted for the approval of the Advisory Board.

SECTION 14. Emergency Breastmilk Pool for Donations and Disasters or Calamities – Ten percent (10%) of each pasteurization batch shall be set apart and serve as a dedicated “pool” for donations in case of emergencies or disasters, with the breakdown as follows:

- a) Emergency Pool (5%) shall be the source of donations to newborns and infants admitted at other government or private hospitals in immediate need of pasteurized donor milk, as determined by a physician.
- b) Disaster or Calamity Pool (5%) shall be the source of donations to infants during disaster or calamities and shall be dedicated for evacuation centers.

In such cases, to further augment Milk Bank supplies, members of the Committee shall actively organize breastfeeding missions in coordination with the appropriate government and non-government breastfeeding support groups.

SECTION 15. Incentives for Regular Breastmilk Donors – There shall be an incentivized scheme for regular breastmilk donors. The scheme shall be formulated by the HMB-LSC Committee and shall be subject to the approval of the Advisory Board.



SECTION 16. Donors Who Wish to Avail of the Pasteurization Process of the Human Milk Bank

– Human breastmilk donors and/or physicians with patients needing pasteurized donor milk may request the use of the pasteurization equipment of the Milk Bank subject to a processing fee which shall be determined and set by the HMB-LSC Advisory Board in accordance with the guidelines set in the Philippine Human Milk Banking Manual of Operations.

SECTION 17. Public Education, Awareness Campaign and Promotion on Breastfeeding and Breastmilk Donation – The month of August of every year is hereby declared as “Breastfeeding Awareness Month” in Cagayan de Oro City. For this purpose, the City Government shall conduct activities that will achieve the following objectives:

- a) To protect, promote and support breastfeeding in the Philippines as the normal, natural and preferred method of feeding infants and young children;
- b) To guarantee the rightful place of breastfeeding in society as a time-honored tradition and nurturing value as well as national health policy that must be enforced; and
- c) To provide information about the benefits and superiority of breastfeeding and the high risks and costs of bottle-feeding.

SECTION 18. Fees and Payments – All fees and payments generated from the operations of the Human Milk Bank and Lactation Support Center shall be remitted to the City-owned Hospital Cashier for accounting purposes. Processing/Service Fees shall also be duly furnished to the City Finance Department for review and upon approval, shall be subsequently included in the Cagayan de Oro City Revenue Code.

SECTION 19. Implementing Rules and Regulations – The HMB-LSC Advisory Board together with the HMB-LSC Committee shall issue guidelines for the successful and safe establishment and implementation of the Cagayan de Oro City Milk Bank and Lactation Support Center. This will be in accordance with the IRR of Republic Act 10028 and the national guidelines set forth by the Philippine National Committee on Human Milk Banking (PNCHMB).

SECTION 20. Appropriation – The sum of ₱8,202,035.76 taken from the J.R. Borja General Hospital Annual Budget CY 2022 Special Program/Project shall be allotted for the establishment of the HMB-LSC to cover for the Maintenance and Other Operating Expenses (MOOE) and Capital Outlay (CO) for procurement of equipment. The budget shall be submitted to the Local Finance Committee for review before approval by the Local Chief Executive. Thereafter, an annual budget shall be allocated for its continuous operation and preventive maintenance of the equipment.

SECTION 21. Severability – If any portion or provision of this ordinance is declared as void or unconstitutional, the remaining portions thereof shall not be affected thereby and shall remain in full force and effect.

SECTION 22. Repealing Clause – Any provision of law or regulation inconsistent herewith is hereby repealed, revoked or modified accordingly.

SECTION 23. Effectivity – This Ordinance shall take after effect ten (10) days following its posting at the entrance of the City Hall, and in two (2) other conspicuous places in the city.

UNANIMOUSLY APPROVED.

AUTHOR: COUNCILOR EDNA M. DAHINO
CO-AUTHOR: COUNCILOR JOYLEEN MERCEDES L. BALABA



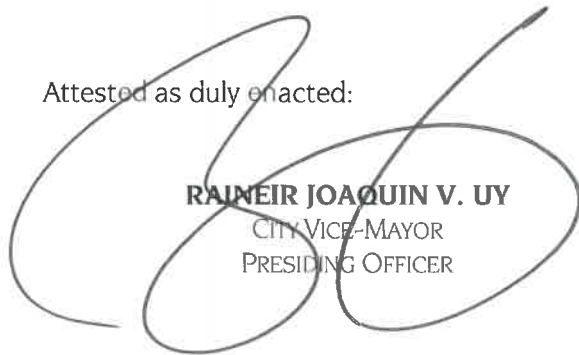
PAGE 10 OF 10 OF ORDINANCE NO. 14183-2021

- Present:**
- 1st District: - Councilor Edna M. Dahino
 - Councilor Jay R. Pascual
 - Councilor Reuben R. Daba
 - Councilor Zaldy O. Ocon
 - 2nd District: - Councilor Joyleen Mercedes L. Balaba
 - Councilor Ian Mark Q. Nacaya
 - Councilor Enrico D. Salcedo
 - Councilor Edgar S. Cabanlas
 - Ex-Officio: - Councilor Yan Lam S. Lim
 - Councilor Romeo V. Calizo
- Councilor Roger G. Abaday
 - Councilor George S. Goking
 - Councilor Lordan G. Suan
 - Councilor Maria Lourdes S. Gaane
 - Councilor Suzette G. Magtajas-Daba
 - Councilor Teodulfo E. Lao, Jr.
 - Councilor Jocelyn B. Rodriguez
 - Councilor John Michael L. Seno
- Absent:**

ENACTED this 25th day of October 2021 in the City of Cagayan de Oro.

I hereby certify to the correctness of the foregoing Ordinance.

Attested as duly enacted:



RAINEIR JOAQUIN V. UY
CITY VICE-MAYOR
PRESIDING OFFICER



ARTURO S. DE SAN MIGUEL
CITY COUNCIL SECRETARY

Approved:



OSCAR S. MORENO
CITY MAYOR

Attested:



TEODORO A. SABUGA-A, JR.
ACTING CITY ADMINISTRATOR