



Republic of the Philippines
Department of Health
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A.O. No. 2012-0012

LICENSING REQUIREMENTS FOR BIRTHING HOMES

I. SERVICE CAPABILITY

A. There shall be documentation of, but not limited to, the following:

1. Standard Operating Procedures (SOP) / Manual of Operations – a compilation of written policies and detailed instructions required to perform the defined activities of the facility.
2. Certificate (from UPNIH) as a Newborn Screening Facility pursuant to R.A. No. 9288 and A.O. No. 2008 – 0026.
3. Birthing facilities shall strengthen its Service Delivery Network (SDN) such as, but not limited to, blood services and referral to health facilities with higher capabilities.
4. Assurance and notarized certification (from a Notary Public) that the birthing facility does not perform Dilatation and Curettage (D and C).
5. Assurance and notarized certification (from a Notary Public) that the birthing facility does not perform permanent sterilization procedures such as Bilateral Tubal Ligation (BTL) and Vasectomy unless it has a license to operate as an Ambulatory Surgical Clinic (ASC).
6. Documentary requirements for new applicants:
 - a. Valid Mayor's or Business Permit (for private)
 - b. Valid Certificate of Business Name Registration:
 1. Department of Trade and Industry (DTI) for single proprietorship (for private);
 2. Securities and Exchange Commission (SEC) with Articles of Incorporation for Corporation (for private);
 3. Resolution from Provincial/Municipal/City Council (for government).
 - c. Documentation of collection, treatment and disposal of solid and liquid wastes in compliance with existing local ordinance.

B. CLINICAL SERVICE

1. Antenatal and Postpartum care
2. Spontaneous vaginal delivery including essential intrapartum care and immediate postpartum care for low risk pregnant women
3. Care of Newborn Baby - Essential Newborn Care (ENC, A.O. 2009-0025)
4. Detection of high risk pregnancies and early referral
5. Family Planning
 - a. Natural Family Planning Methods pursuant to A.O. No. 132 s. 2004
 - b. Artificial Family Planning Methods



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6. Health Education – information on the following shall be provided:
 - a. Birth planning and preparedness:
 1. Each midwife shall assist the mother in monitoring pregnancy.
 2. The facility shall have a WHO Mother and Child Book, including Unang Yakap video clip and other information, education and communication materials for health education and promotion.
 - b. Infant and Young Child Feeding and Lactation Management (Breastfeeding TSEk)
 - c. Hygiene
7. Birthing facilities are required to operate 24/7. Nevertheless, it is acceptable for birthing facilities located in Geographically Isolated and Disadvantaged Areas (GIDA) to operate at least on an ‘on call or as needed basis’ depending on the data from pregnancy tracking.
8. Life-saving medications such as magnesium sulphate, oxytocin, steroids and oral antibiotics shall be verified against doctor’s written orders prior to its administration. (Refer to A.O. No. 2010-0014).

II. PERSONNEL

A. GENERAL ADMINISTRATIVE SERVICE

	MINIMUM Number of Personnel
1. Administrator	1
2. Clerk	1
3. Utility Worker	1/5 beds/shift
4. Driver (on call 24/7) or MOA with a transport provider	1

B. CLINICAL SERVICE

1. GENERAL GUIDELINES

- a. A birthing facility shall be managed and supervised by any of the following healthcare professional(s) who have complied with the minimum and valid licensing requirements.
 1. Physician – Obstetrician-Gynecologist, Pediatrician, Family Medicine Physician, MHO or GP
 2. Nurse
 3. Midwife



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- b. Every birth must be attended by skilled birth attendants pursuant to A.O. No. 2008 – 0029 Section III, 3.
- c. Every staff of the birthing home, including its affiliate specialists shall advocate and adhere to DOH policies and standards on maternal and child health care.

2. SPECIFIC GUIDELINES

a. PHYSICIAN

1. SPECIALIST FOR THE MOTHER

The specialist shall possess, but not limited to, the following requirements:

- a. A valid Professional Regulation Commission (PRC) license;
- b. A Certificate of Completed Training from an institution with an Accredited Residency Training Program in Obstetrics and Gynecology;
- c. If the primary provider and/or owner, must have a MOA with a paediatrician; or
- d. Medical practitioners and/or local government physicians trained on Basic Emergency Obstetric and Newborn Care (BEmONC).

2. SPECIALIST FOR THE BABY

The specialist shall possess, but not limited to, the following requirements:

- a. A valid PRC license;
- b. A Certificate of Completed Training from an institution with an Accredited Residency Training Program in Pediatrics;
- c. If the primary provider and/or owner, must have a MOA with an obstetrician; or
- d. Medical practitioners and/or local government physicians trained on Basic Emergency Obstetric and Newborn Care (BEmONC).

3. FAMILY MEDICINE PHYSICIAN, MUNICIPAL HEALTH OFFICER (MHO), GENERAL PRACTITIONER (GP)

Family Medicine Physician, MHO or GP shall possess, but not limited to, the following requirements:

- a. A valid PRC license;
- b. A valid Certificate of Good Standing from the Accredited Professional Organization (APO) of Physicians of PRC and/or any DOH recognized association of physicians;



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- c. A valid certificate of training on Basic Emergency Obstetric and Newborn Care (BEmONC).

b. NURSE

The nurse shall possess, but not limited to, the following requirements:

1. A valid PRC license;
2. A Certificate of Good Standing from the Accredited Professional Organization (APO) of Nurses of PRC and/or any DOH recognized association of nurses.
3. Whenever the health facility is manned by a nurse, the management of the birthing home shall show proof of a valid MOA with an Obstetrician and a Pediatrician or a general physician trained on Basic Emergency Obstetric and Newborn Care (BEmONC).

c. MIDWIFE

The midwife shall possess, but not limited to, the following requirements:

1. A valid PRC license;
2. A valid Certificate of Good Standing from the Accredited Professional Organization (APO) of Midwives of PRC and/or any DOH recognized association of midwives
3. A certificate of Training on BEmONC for midwives from a DOH recognized training provider; midwives who finished the four (4) year midwifery course shall be exempted from this requirement.
4. Whenever the health facility is manned by a midwife, the management of the birthing home shall show proof of a valid MOA with an Obstetrician and a Pediatrician or a general physician trained on Basic Emergency Obstetric and Newborn Care (BEmONC).
5. A valid Certificate of Training in BLS from an authorized training provider.

III. EQUIPMENT/INSTRUMENT

A. GENERAL ADMINISTRATIVE SERVICE

	MINIMUM Number of Equipment
1. Bench	1
2. Cabinet	1
3. Calculator	1



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4. Chair	1/staff
5. Desk	1/staff
6. Electric fan	1
7. Fire Extinguisher	1
8. Open shelf	1
9. Standby Generator or (battery operated rechargeable emergency light)	1
10. Transport vehicle or MOA with a service provider	1
11. Typewriter/ Computer	1
12. Refrigerator/ cooler (for breast milk, medications and vaccines such as Hepatitis B and BCG)	1

B. CLINICAL SERVICE

1. CONTENTS OF AN EMERGENCY KIT (E-KIT)

	MINIMUM Requirement
a. Basic Medicines	
1. Epinephrine 1 mg/ml ampoule	1
2. Diphenhydramine 50 mg/ ampoule	1
3. Calcium gluconate 10 mg/ ampoule	1
4. Tranexamic Acid ampoule	1
5. Magnesium Sulfate ampoule	1
6. Oxytocin 10 units per ampoule or Oxytocin in pre-filled, single dose, non-reusable injection	2
7. Betamethasone 7mg per ampoule (preferred) or Dexamethasone 5mg/mL per ampoule (alternative)	1
8. IV Fluids (stand by) such as:	
a. D5 LR or Plain LR 1 L per bottle	3 bottles
b. Plain NSS 1 L per bottle	2 bottles
9. Erythromycin ophthalmic ointment or Oxytetracycline ophthalmic ointment	
10. Local anesthetic such as Lidocaine 2 % solution, 50 ml vial or 5 ml. carpule.	1 if vial, 5 if carpule
11. Tetanus Toxoid vaccines	2
12. Vitamin K ampules	2
13. Hepatitis B vaccines (stored inside ref at temp between 2-8 degrees Celsius)	
14. BCG vaccines (stored inside ref at temp between 2-8 degrees Celsius)	



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b. Basic Equipment

1. Self-inflating bag-valve-mask devices (one for adult, one for newborn) or masks for adult and masks for the newborn (one size 1 for term and one size 0 for preterm)
2. Stethoscope (adult and pediatric)
3. Sphygmomanometer (non-mercurial) with adult cuff and neonatal cuff
4. Thermometer (non-mercurial)

c. Basic Supplies

1. Intravenous catheter set (for adults and newborns)
2. 70% Isopropyl alcohol
3. Disposable syringes (1 cc, 3 cc, 5 cc, 10 cc) with needles
4. IV tubings (macro and microdrip sets)
5. Nasal cannulas or plastic face masks
6. Plaster
7. Povidone-iodine solution
8. Sterile absorbable sutures
9. Sterile cotton balls
10. Sterile gauzes
11. Sterile gloves
12. Surgical caps
13. Surgical masks
14. Sharps containers
15. Suction catheters (adult and newborn sizes)

2. CLINICAL INSTRUMENTS/ EQUIPMENT

MINIMUM Number of Equipment

a. General Service Area (Non Treatment Area)

1. Sterilization Area

- a. Autoclave/ Steam sterilizer or its equivalent 1
- b. Soaking or decontaminating solution
(in accordance with DOH guidelines on sterilization
– Annex B of A.O. No. 2012 – 0012 on
“Rules and Regulations Governing the New
Classification of Hospitals and Other Health Facilities
in the Philippines”).

3. Clinical Service Area with Sink for Handwashing

1. Treatment Room (same as Outpatient Area)

- a. Clinical weighing scale (adult) 1
- b. Examining table 1



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c. Footstool	1
d. Gooseneck/ examining light	1
e. Stethoscope	1
f. Tape measure	1
g. Vaginal Speculum	2
1. Ward (includes Labor Room and Recovery Room)	
a. Lubricant (water-bal	
b. Partograph form	1
c. Sphygmomanometer (non-mercurial)	1
d. Sterile gloves	2
e. Stethoscope	1
f. Thermometer (non-mercurial)	1
g. Wall clock with second hand	1
2. Birthing Room	
a. Delivery set	1 per 2 beds
1. Hemostatic/Kelly Forceps, curve or straight	2
2. Kidney Basin	1
3. Needle Holder, 8 inches	1
4. Surgical Scissors (Straight Mayo)	1
5. Bandage Scissors	1
6. Thumb Forceps	1
7. Tissue Forceps (with teeth)	1
8. Sterile plastic umbilical cord clamp(s) or ties	1
9. Umbilical cord scissors	1
b. Delivery table with stirrups and with provision for semi-upright position of the birthing mother	1
c. Emergency light/ flashlight	1
d. Footstool	1
e. Gooseneck/ examining lamp	1
f. Instrument table	1
g. Instrument cabinet	1
h. IV stand	1
i. Kelly pad	1
j. Oxygen unit (with humidifier and regulator; min. 5 lbs.)	1
k. Pail	1
l. Stool	1
m. Suction apparatus (not for routine suctioning, may be used for newborns whose airway may be blocked)	1



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- n. Pair(s) of slippers (exclusive for Birthing Room use) 2 pairs
- o. Room thermometer (non-mercurial), maintain room temperature between 25-28 degrees Celsius 1

3. Newborn Resuscitation Area

- a. Emergency kit

4. RECORDS/FILES

- a. Registers for Consultations, Admissions, Deliveries and Discharges
- b. Logbook of Sentinel Events
- c. Annual Birthing Home Statistical Report (Annex F of A.O. No. 2012-0012)
- d. Patients' Clinical Records
 - 1. Maternal Clinical Charts including duly accomplished partograph
 - 2. Newborn Clinical Charts
 - 3. Properly and completely filled out Birth Certificates
 - 4. Properly and completely filled out Death Certificates (including Fetal Death)
- e. Referral Forms

5. LINENS

- a. Bed sheets
- b. Gowns or patient's gowns (exclusive for Birthing Room use)
- c. Linen for drying the newborns
- d. Sterile drapes
- e. Scrub suits

IV. PHYSICAL FACILITY

A. GENERAL ADMINISTRATIVE SERVICE

- 1. Waiting Area
- 2. Admitting, Records and Business Office
- 3. Toilet

B. CLINICAL SERVICE

- 1. Outpatient Service Area with lavatory or sink
- 2. Ward with \geq six (6) beds: Provision of 1 toilet for every 6 beds.
Ward with $<$ six (6) beds: access to a common toilet.



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3. Birthing Room
 - a. Birthing Area
 - b. Newborn Resuscitation Area
 - c. Equipment and Storage Area
4. Scrub-up Area
5. Sterilization Room
6. Equipment and Supply Storage Area
7. Janitor's closet with slop sink

V. Healthcare Waste Management

The management of the birthing facility shall ensure that its healthcare waste management collection, treatment and disposal is being implemented in accordance with local ordinance(s), the Joint Circular of DOH-DENR and the Health Care Waste Management Manual of DOH 2012.

DEFINITION OF TERMS:

Basic Emergency Obstetric and Newborn Care (BEmONC) – network of facilities and providers that can perform the six signal obstetric function: (i) parenteral administration of oxytocin in the third stage of labor; (ii) parenteral administration of loading dose of anti-convulsants; (iii) parenteral administration of initial dose of antibiotics; (iv) performance of assisted deliveries (imminent breech delivery); (v) removal of retained products of conception; and (vi) manual removal of retained placenta. BEmONC facilities are also capable of providing neonatal emergency interventions which include at the minimum: (i) Newborn resuscitation; (ii) treatment of neonatal sepsis/infection; (iii) Oxygen support. It shall also be capable of providing blood transfusion on top of its standard function. (AO 2011-0014)

Breastfeeding – the method of feeding an infant directly from the human breast. (IRR of RA 10028, RA 7600)

Birthing Home – a health facility that provides maternity service on pre-natal and post-natal care, normal spontaneous delivery and care of newborn babies. (AO 2005-0029) It may be hospital based or non-hospital based. It also offers Newborn Screening services for heritable diseases and Newborn Hearing Screening. Family Planning and Health Education are also included in its services.

Heritable Conditions – any condition that can result in mental retardation, physical deformity or death if left undetected and untreated and which is usually inherited from the genes of either or both biological parents of the newborn. (RA 9288)

Newborn – a child from the time of complete delivery to 30 days old. (RA 9288)



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Resuscitation – a series of actions taken to establish nasal breathing in a newborn with depressed vital signs. (AO 2009-0025)

Newborn Screening (for metabolic disorders) – refers to the process of collecting a few drops of blood from the newborn onto an appropriate collection card and performing biochemical testing for determining if the newborn has a heritable condition. It is usually done 24 hours to 3 days after delivery, or 7 days after delivery if in intensive care. (RA 9288)

Skilled Birth Attendant – refers to professional health workers such as doctor, nurse, midwife with the training or educational background to perform safe and clean deliveries. (AO 2007-0026)

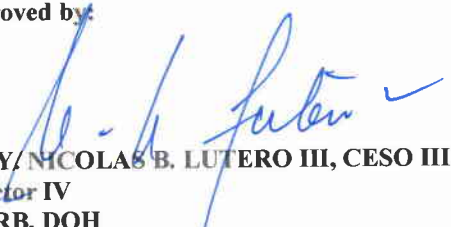
Small Baby – a newborn weighing from between 1500 grams to 2499 grams. (AO 2009-0025)

Skin to Skin Contact – the act of placing the naked newborn prone on the mother’s chest. It is considered a critical component for successful breastfeeding initiation. (AO 2009-0025)

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