WHEREAS, tuberculosis remains to be a major public health problem;

WHEREAS, tuberculosis is the ninth cause of morbidity in the City of Mandaluyong;

WHEREAS, tuberculosis affects the productive age group of our citizens thereby affecting them economically;

WHEREAS, the stigma of tuberculosis remains to be a deterrent to its elimination;

WHEREAS, the incidents of tuberculosis as an opportunistic infection, increases with HIV/AIDS;

NOW, THEREFORE, The Sangguniang Panlungsod of the City of Mandaluyong, do ordain as follows:

SECTION 1. The City of Mandaluyong joins the National Government's effort to institute an effective program for Tuberculosis Control through the National Tuberculosis Control Program (NTP), and the Directly Observed Treatment Short Course (DOTS) strategy (Executive Order No. 187, 21 March 2003) shall be the main strategy for tuberculosis control in the City and that it shall be fully and strictly be put into practice to ensure patients' compliance. The four components of DOTS strategy include the following:

a. Direct Sputum Smear Examination shall be the initial diagnostic tool in case finding.

b. Standardized Chemotherapy in accordance with the National TB Program.

c. Recording and reporting of cases shall be on the standardized National TB Program forms to be implemented in all health centers.

d. Political commitment to ensure sustained, comprehensive implementation of National TB Program activities.

SECTION 2. There shall be an annual fund allocation for the City Health Department of THREE MILLION PESOS (Php3,000,000.00) to ensure program development and sustainable approaches in the efficient and effective delivery of the City TB Control Program. The funding will be prioritized in the following aspects;

2.1 To ensure that the allocation for the budget requirements for the TB program of the City is sufficient;

2.2 To ensure that efforts and resources are geared towards achieving the goal of having a community where TB is no longer a public health problem;
2.3 To ensure that the NTP policies and the DOTS strategies are implemented, thereby ensuring a case detection of at least 90% and a treatment success rate of at least 90%.

2.4 To advocate for the continuous investment for quality improvement and certification and accreditation of the LGU health facilities as DOTS centers. To strengthen and capacitate local community health volunteers on TB DOTS program;

2.5 To ensure that the LGU regularly supports the monitoring, supervision, evaluation, training requirements, and NTP drug supplies.

SECTION 3. The City Government shall initially appropriate in the General Fund the amount of at least THREE MILLION PESOS (PhP3,000,000.00) annually, subject to increase as complementary to the need of sustainable program implementation. Fund disbursements shall be in accordance to the usual accounting and auditing procedures. The said funds will be released to the City Health Department and will be allocated as follows:

a. Monitoring and supervisory visit;
b. Contingency for medicines and laboratory reagents;
c. Quality assurance for sputum microscopy;
d. Capability Building;
e. Advocacy, Communication, and Social Mobilization activities;
f. Incidental expenses of TB Task Force.

SECTION 4. PhilHealth payments for TB DOTS Package shall be deposited in a separate Trust Fund Account of the LGU for City Health Department and shall be disbursed in accordance with the PhilHealth policies and guidelines.

4.1 DISPOSITION SCHEME. The disposition and allocation of PhilHealth TB DOTS Package at PhP4,000.00 per case shall follow the rate and allocation scheme recommended by the Department of Health as follows:

- 25% for consultation service of the referring physician during the course of treatment;
- 35% for the health staff including the treatment partner;
- 40% for the operational costs involve in providing quality care of TB patients;
- Payments for TB Diagnostic Committee and quality assurance for sputum microscopy, expenses for training of staff, cost of additional laboratory supplies and drugs will be included in the operation costs;
- If in case there is no referring physician, the 25% shall be allotted to operational cost.

SECTION 5. The City Health Department shall be the lead agency of the City Government of Mandaluyong for the implementation of TB Control Program to ensure strengthened and sustained:

1. Advocacy;
2. Case finding and Case holding (treatment);
3. Recording and Reporting;
4. Monitoring and Evaluation;
5. Human resource capability; and
6. Other administrative concerns of the program
SECTION 6. The City of Mandaluyong shall create the Mandaluyong City TB Council as a vehicle for consolidation and unification of efforts on TB and consistent with existing mandates in the Local Government Code, which will be composed of the following:

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<tr>
<td>a.</td>
<td>City Mayor</td>
<td>Chairperson</td>
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<tr>
<td>b.</td>
<td>City Health Officer</td>
<td>Co-Chairperson</td>
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<td>c.</td>
<td>SP Chairman on Committee on Health</td>
<td>Member</td>
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<td>d.</td>
<td>NTP Coordinator</td>
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<td>e.</td>
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<td>g.</td>
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<td>i.</td>
<td>MSA Representative</td>
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<td>j.</td>
<td>TB Task Force Federation President</td>
<td>Member</td>
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<td>k.</td>
<td>CSWD Representative</td>
<td>Member</td>
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<td>l.</td>
<td>Business and Labor Sector representative</td>
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<td>m.</td>
<td>Local Health Profession Group</td>
<td>Member</td>
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6.1 The roles and functions of the Mandaluyong City TB Council include:

6.1.1 To identify and establish the roles and responsibilities of the partners in the organization and delivery of TB care as per NTP guidelines.

   a. To establish a secretarial for the TB Council;
   b. To ensure the socio-economic development policies and program and include consideration of the impact of TB infection to the community;
   c. To work for the prioritization in the allocation of resources for the TB Program.

6.1.2 To coordinate with the different sectors involved in the NTP implementation and ensure that the NTP policies and the DOTS strategy are implemented thereby ensuring case detection rate of at least 90% and treatment success rate of 90%.

   a. To strengthen partnership with other government agencies, NGOs and private entities and international agencies for a more comprehensive NTP implementation;
   b. To support local community health volunteers and TB Diagnostic Committee activities to sustain private sector interest and participation in the NTP.

6.1.3 To ensure that efforts and resources are generated and geared towards achieving the goal of having a community where TB is no longer a public health problem.

   a. To ensure that the collection for the budget requirements for the TB Program for the City is sufficient;
   b. To ensure that the LGU regularly support the monitoring supervision, evaluation, training requirements, NTP drug and supplies;
   c. To advocate the continuous investment for quality improvement and certification and accreditation of the LGU health facilities as DOTS centers.
SECTION 7. A multi-sectoral alliance shall be organized to initiate other measures necessary to establish networks, inter-agency links and partnership with key stakeholders. This will strengthen partnership with different sectors involved in the program such as government agencies, NGOs, civil society, private sector, donor institutions and other cooperating agencies for a more comprehensive NTP implementation.

SECTION 8. All physicians practicing in Mandaluyong City shall have an orientation and update on TB to ensure key participation in TB Control.

SECTION 9. A TB referral process from one health care facility to another shall be in place using a standard referral form. Feedback or response to referral is strongly encouraged to account for all TB cases. The referral shall be based on patient’s choice or convenience.

SECTION 10. All hospitals, health facilities, including laboratories, work places, transport groups and school in the City shall be engaged in TB control and prevention.

SECTION 11. TB Surveillance System shall be organized and instituted into the TB Control Program.

SECTION 12. A positive environment for TB disease shall be created in the City to counter the stigma attached to it, thereby promoting health seeking behavior of the population at large.

SECTION 13. A continuous promotion of TB awareness and knowledge shall be conducted in the City, among all walks of life, particularly during World TB Day (March 21) and the Lung Month (August 19) annually.

SECTION 14. The TB Task Force Federation and Multi-sectoral Alliance shall be the support group of TB Control in the City.

SECTION 15. Infection Control in all facilities and environment shall be encouraged and implementing to prevent transmission among populations.

SECTION 16. Pharmacies in the City shall be enjoined to enforce “No prescription; No dispensing” policy of TB Control for their implementation and compliance.

SECTION 17. HIV/AIDS awareness and knowledge shall be promoted with TB in cooperation with the Social Hygiene clinic of the City.

SECTION 18. If any provision of this Ordinance is declared void or invalid, the remainder or other provision shall not be affected.

SECTION 19. All Ordinances, local rules and regulations or parts thereof, inconsistent with this Ordinance are hereby repealed, modified or amended accordingly.

SECTION 20. This Ordinance shall be in force and effect immediately upon its approval in accordance with law.

ENACTED on this 12th day of December, 2014 in the City of Mandaluyong.
I HEREBY CERTIFY THAT THE FOREGOING ORDINANCE WAS ENACTED AND APPROVED BY THE SANGGUNIANG PANLUNGSOD OF MANDALUYONG IN SPECIAL SESSION HELD ON THE DATE AND PLACE FIRST ABOVE GIVEN.

PRESIDED BY:

EDWARD G. BARTOLOME
Vice Mayor & Presiding Officer

APPROVED:

BENJAMIN DC. ABALOS, JR.
City Mayor

Date: DEC 16 2014

Sanggunian Secretary