



Republic of the Philippines

**PHILIPPINE HEALTH INSURANCE CORPORATION**

Citystate Centre 709 Shaw Blvd., Pasig City

Healthline 637-9999 [www.philhealth.gov.ph](http://www.philhealth.gov.ph)

March 18, 2003

**PhilHealth Circular**

No. 17, s. - 2003

TO : ALL HEALTH CARE PROVIDERS,  
ACCREDITATION DEPARTMENTS – NATIONAL  
CAPITAL REGION AND PHILHEALTH REGIONAL  
OFFICES AND ALL OTHERS CONCERNED

SUBJECT : ACCREDITATION OF DIRECTLY OBSERVED  
TREATMENT SHORTCOURSE (DOTS) FACILITIES

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The Philippine Health Insurance Corporation (PhilHealth) in pursuit of its commitment to expand benefit to its members and dependents shall accredit Directly Observed Treatment Shortcourse (DOTS) facilities as providers of the outpatient DOTS package. The following are the guidelines for the accreditation of these facilities:

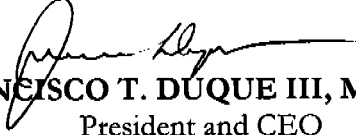
1. DOTS facilities may be, but not limited to, the following: hospital-based clinics, HMO, LGU Health Units, factory clinics, church-based clinics, and school clinics.
2. Accreditation shall be based on standards developed by the Corporation in consultation with stakeholders. *(Please refer to the annexes for the Standards for Accreditation, Application Form & Checklist).*
3. A center that has no capability to provide diagnostic laboratory services should have an affiliated microscopy center that has acquired quality assurance certification from the National Tuberculosis Program (NTP) of the Department of Health. The facility shall ensure quality from the affiliated microscopy center. If the affiliated microscopy center is found to be substandard, the DOTS center counterpart shall lose its accreditation.
4. The DOTS Center should also be able to refer patients needing radiologic services to a PhilHealth accredited facility.
5. Likewise, PhilHealth should duly accredit physicians rendering consultation services in a DOTS Center.
6. The Philippine Coalition Against Tuberculosis (PhilCAT) shall certify the capability of a facility as a provider of TB-DOTS services. A PhilCAT

Certification shall ensure that the training and technical capabilities of a DOTS Center are appropriate.

7. Currently accredited health care facilities (Hospitals, Rural Health Units and Ambulatory Surgical Clinics) shall also be allowed to provide DOTS care; provided, that they apply for a separate accreditation for this service and fulfill all the requirements stated in this Circular. However, no additional fee shall be imposed on such facilities for their accreditation as providers of the DOTS package.

This Circular shall take effect immediately.

Please be guided accordingly.

  
**FRANCISCO T. DUQUE III, MD, MSc.**  
President and CEO

# STANDARDS FOR ACCREDITATION OF TB-DOTS CENTERS

- A. Service Capability
- B. Technical Standards
- C. Quality Assurance Activities

## A SERVICE CAPABILITY

### A.1 Medical Services

The outpatient clinic is capable of delivering DOTS (Direct Observation Treatment, Short-course) and the operation of the clinic based on the Manual of Procedures for the National Tuberculosis Control Program, 2001 by the Department of Health.

The DOTS Center/Clinic is able to:

- A.1.1 Assure the availability of drugs and other supplies through
  - 1. Systematic drug procurement to sustain the program
  - 2. Regular monitoring and inventory of anti-TB drugs and other supplies
- A.1.2 Ensure quality program management through
  - 1. Accredited training of their program implementers certified by the National Tuberculosis Control Program (NTP)
  - 2. Compliance with monitoring and evaluation by PhilHealth
- A.1.3 Ensure the quality of sputum smear examination through
  - 1. Training of accredited medical technologist
  - 2. Quality assurance by the NTBRL
- A.1.4 Improve the treatment compliance of TB patients through
  - 1. DOT (Direct Observation Treatment)
  - 2. Health education to all patients
  - 3. An effective retrieval system of defaulters
- A.1.5 Provide a comprehensive information system through
  - 1. Standardized recording and reporting system according to NTP
  - 2. Timely submission of reports to the NTP
  - 3. Regular data analysis
- A.1.6 Ensure that any individual who does not qualify, as a member of PhilHealth is referred/ managed accordingly

### A.2 Diagnostic Services

- A.2.1 Laboratory Services
  - Sputum AFB smear
  - Referral to a microscopy center that has acquired quality assurance certification from the NTP
- A.2.2 Chest X-ray
  - The DOTS center should be able to identify a PhilHealth accredited center with x-ray services nearest to them.

## B TECHNICAL STANDARDS:

Each facility must have the basic infrastructure/conditions, equipment, and supplies necessary for the services offered by PhilHealth.

### B.1 General Infrastructure:

- B.1.1 A large and clear sign bearing the name of the clinic with an additional sign indicating it as a "PhilHealth Accredited DOTS Center"
- B.1.2 Generally clean and attractive environment both inside and outside
- B.1.3 Sufficient seating for patients in a well ventilated area with an industrial exhaust fan
- B.1.4 Adequate lighting

# STANDARDS FOR ACCREDITATION OF TB-DOTS CENTERS

- B.1.5 Sputum collection area with appropriate ventilation to prevent transmission
- B.1.6 Covered water supply – sufficient for hand-washing and for comfort rooms or toilets
- B.1.7 Covered garbage containers with color-coded segregation and proper disinfections before disposal
- B.1.8 Examination room with privacy
- B.1.9 Examination table with clean linen
- B.1.10 Cleaning supplies for the facility and clinical instruments

## **B.2 Equipment and Supplies**

- B.2.1 TB Drugs as recommended by the NTP sufficient for the registered TB patients
- B.2.2 Microscope [optional] for DOTS center providing on-site microscopy services
- B.2.3 AFB Reagents [optional] for DOTS center providing on-site microscopy services
- B.2.4 Glass slides [optional] for DOTS center providing on-site microscopy services
- B.2.5 Cover slips [optional] for DOTS center providing on-site microscopy services
- B.2.6 Sputum collecting containers
- B.2.7 Stethoscopes
- B.2.8 Weighing scales
- B.2.9 Disposable gloves in examining rooms
- B.2.10 Disposable needles and syringes
- B.2.11 Sharps containers
- B.2.12 Sterile cotton swabs
- B.2.13 Patient record forms
- B.2.14 Decontamination solutions
- B.2.15 All NTP forms and logbook
- B.2.16 Patient education materials for TB

## **B.3 Clinic Staff**

Outpatient clinics must have at least:

- DOTS Center administrator (can be any one of the full time staff)
- Physician (part-time)
- (1) Medical Technologist (full-time if with microscopy service)
- (1) Nurse /Midwife (full-time)
- Diagnostic committee

- B.3.1 Physician  
Duly licensed by PRC certified by PhilCAT or trained by NTP in DOTS.
- B.3.2 Nurse Or Midwife  
Registered Nurse/Midwife trained to deliver competent care in a DOTS center.
- B.3.3 Medical Technologist (for DOTS center providing on-site microscopy services)  
Registered and PRC licensed Medical Technologist trained under the NTP training program for medical technologists.

## **B.4 Diagnostic Committee**

A group of specialists composed of Radiologist, Pulmonologist and/or Infectious Disease Consultant who will decide on asymptomatic cases whose diagnosis is doubtful (result shows only one positive out of three sputum specimens examined)

# STANDARDS FOR ACCREDITATION OF TB-DOTS CENTERS

## C QUALITY ASSURANCE ACTIVITIES

### I. PATIENT RIGHTS AND ORGANIZATIONAL ETHICS

Based on the new PhilHealth Accreditation Standards For Health Provider Organizations (Benchbook)

**Goal:** to improve patient outcomes by respecting patients' rights and ethically relating with patients and other organizations.

**Standards:**

1. Patients' right to quality care and their responsibilities in that care are respected and supported by organizational policies and procedures.

**Criteria:**

a. Informed consent is obtained from patients prior to initiation of care.

**Indicator:**

Contract of Agreement/Patient's Consent Form for TB Treatment

b. Policies and procedures to identify and address patients' rights and responsibilities are documented and followed

c. Patients receive written statements of their rights and responsibilities.

**Indicator:**

Contract of Agreement/Patient's Consent Form for TB Treatment

d. The clinic: protects patients and respects their rights during research involving human subjects.

2. The organization encourages and promotes opportunities to involve patients and their families in their care.

**Criteria:**

a. Policies and programs to educate patients and families on how to take a more pro active role in health care decision making are documented, followed and evaluated for their effectiveness.

**Indicators:**

Educational Seminar/Class on TB

Attendance Sheets

Reporting of Adverse Effects in Forms or Logbooks

b. Patients and their families are involved in resolving dilemmas involving care decisions such as withholding resuscitation, foregoing life-sustaining treatment, end of life care, etc.

**Indicators:**

Educational Seminar/Class on TB

Attendance Sheets

Reporting of Adverse Effects in Forms or Logbooks

3. The organization documents and follows policies and procedures for addressing the patients' needs for confidentiality, privacy, security, pastoral counseling and communication.

**Criteria:**

a. Clinic staff is aware of and follows policies and procedures in addressing patient's needs for confidentiality, privacy, security, counseling and communication.

**Indicator:**

Contract of Agreement/Patient's Consent Form for TB Treatment

b. The clinic systematically determines, monitors and improves the extent to which patient's needs for confidentiality, privacy, security, counseling and communication are addressed.

**Indicator:**

TB Clinics written policy

4. The organization systematically elicits, monitors and acts upon feedback from patients, their families, visitors and communities.

**Criteria:**

a. Policies and procedures for routinely determining and improving the level of patient satisfaction with all relevant aspects of care are documented and followed.

**Indicator:**

Patient Satisfaction Form

b. Policies and procedures for addressing and resolving patients' complaints are documented and followed.

**Indicators:**

Suggestion box

Weekly Meetings with TB partners

Actions on issues raised during the meeting

5. The organization's personnel discharge their functions according to codes of ethical behavior and other relevant professional and statutory standards.

# STANDARDS FOR ACCREDITATION OF TB-DOTS CENTERS

## **Criteria:**

a. The organization identifies and monitors the compliance of its personnel with the code of ethics relevant to their respective disciplines.

### **Indicator:**

Policy or Administrative Handbook

b. Procedures for resolving ethical issues related to professional practice or to conflicts of interest are based on the relevant code of ethics and other professional and legal standards.

### **Indicator:**

Policy or Administrative Handbook

c. The organization identifies relevant codes of professional conduct and other statutory standards; and promulgates them to its personnel.

### **Indicator:**

Policy or Administrative Handbook

6. The clinic documents and follows procedures for resolving ethical dilemmas as they arise from patient care.

## **Criteria:**

a. Procedures for resolving ethical issues that arise in the course of providing care are followed and monitored for their effectiveness.

## **II. PATIENT CARE STANDARDS**

## **III. LEADERSHIP AND MANAGEMENT**

## **IV. HUMAN RESOURCES MANAGEMENT**

## **V. INFORMATION MANAGEMENT**

## **VI. SAFE PRACTICE AND ENVIRONMENT**

## **VII. IMPROVING PERFORMANCE**

- Based on PhilCAT's Certification Standards of DOTS Centers

### **General Infrastructure**

**Goal:** The TB DOTS Center provides a safe and effective physical environment to its staff and patients.

### **Standards:**

1. Patients have safe and convenient access to and from the TB DOTS Center.

#### **Criteria:**

- a. There is a large and clear sign outside the TB DOTS Center bearing its name.
- b. Entrances and exits are clearly marked and free of obstruction and other hazardous conditions.
- c. There are resources to inform patients of the daily and hourly schedule of clinic activities.

#### **Indicators:**

Signages, leaflets and / or public lectures detailing clinic days and times

d. There are resources to ensure the quality of patient waiting.

#### **Indicators:**

Waiting area has space and seats that are adequate to usual patient load; well ventilated and illuminated waiting area.

2. The TB DOTS Center provides facilities for the comfort and privacy of its patients and staff:

#### **Criteria:**

a. The TB DOTS Center maintains a generally clean and wholesome environment within and immediately outside its premises.

#### **Indicators:**

Rooms, corridors, toilets, office and clinic spaces, laboratories and pharmacy are clean and free of clutter; examination beds have clean linen, etc.

b. There are resources to ensure adequate lighting.

#### **Indicators:**

Interiors have lighting adequate for clerical activities and physical examination.

c. There are resources to maintain adequate and clean water for personal hygiene and sanitation purposes.

## STANDARDS FOR ACCREDITATION OF TB-DOTS CENTERS

### Indicators:

Covered water supply for handwashing and for handwashing and for cleaning/flushing toilets.

d. There are resources to ensure the privacy of the staff-patient encounter.

3. The TB DOTS Center provides facilities for the safety of its patients, staff and facilities.

### Criteria:

a. There are resources to maintain general cleanliness of the clinic and provide antiseptics of clinical and laboratory instruments and equipment.

### Indicators:

Cleaning implements; disinfectants and soaking trays, etc.

b. There are resources for safe and segregated disposal of biological and hazardous wastes and of general trash.

### Indicators:

Garbage segregation scheme in place; ecologically safe and legally approved waste disposal system, etc.

c. There are resources for secure storage of TB drugs.

### Indicators:

Drug cabinets, pharmacies, have functional doors, locks, staff members clearly responsible for securing drug storage areas, etc.

d. There are documented, disseminated and implemented procedures to identify and address the risks of contamination of the staff and patients from sources of infectious diseases.

### Indicators:

Prominently displayed guidelines for infection control, minimizing TB contagion, needle stick injuries, etc.

### Equipment and Supplies

**Goal:** Clients receive adequate and effective diagnostic and therapeutic services at every phase of their management from screening for TB to rehabilitation.

### **Standards:**

4. The TB DOTS Center clients have continuous access to accurate and reliable TB diagnostic tests.

### Criteria:

a. All clients undergo sputum microscopy.

### Indicators:

NTP cards are reviewed for performance of sputum microscopy.

b. If sputum microscopy facilities are not available in the TB DOTS Center, policies and procedures for referring clients to accessible centers are in place and implemented.

### Indicators:

List of TB DOTS Center-identified microscopy centers; referral guidelines accessible to staff.

c. The TB DOTS Center plans and implements policies and procedures for assuring the quality of sputum microscopy results.

### Indicators:

Documented quality control procedures and results of quality control testing.

d. External providers of sputum microscopy are contracted based on policies and procedures that include accreditation status and the presence of quality control systems.

### Indicators:

Filed copies of accreditation status and quality control testing results of TB-DOTS Center-identified microscopy centers.

5. The TB DOTS Center clients have continuous access to safe and effective anti-TB medications throughout the duration of their treatment.

### Criteria:

a. The TB DOTS Center has developed and implemented policies and procedures for assuring continuous supply of TB drugs to all its clients for the entire six months duration of therapy.

### Indicators:

TB drugs with buffer stock adequate for its registered and targeted patients; procedures for conducting drug inventory requisition, purchasing, replenishing of stocks, etc.

## STANDARDS FOR ACCREDITATION OF TB-DOTS CENTERS

b. The TB DOTS Center has developed and implemented policies and procedures for assuring the quality and safety of its TB drugs.

**Indicators:**

Documented procedures for gross testing of drug quality

### Management and Information Systems

**Goals:** The management, staff and patients adhere to clear and collaboratively developed policies and procedures for the efficient operation of the TB DOTS Center.

**Standards:**

6. Policies and procedures for providing care to clients are developed, disseminated to patients and implemented.

**Criteria:**

a. Flow charts of patient processing from entry to separation are accessible to patients and staff.

**Indicators:**

Prominently displayed patient flow-charts, directional signages etc.; easily accessible DOTS manuals; patient defaulter tracing guidelines.

b. Criteria and procedures for patient referral are accessible to patients and staff.

**Indicators:**

Easily accessible referral guidelines; referral map

c. Criteria and procedures for selecting and assigning DOTS partners are accessible to patients and staff.

**Indicators:**

Written procedures for assigning DOTS partners

d. Policies and procedures for identifying and working with external groups in providing DOTS services are developed and implemented.

**Indicators:**

Memorandum of Understanding with external groups or partners with clear delineation of roles; policies and procedures for liaising with designated PPM coordinating body.

7. Policies and procedures for managing patient information are developed, disseminated and implemented.

**Criteria:**

a. Each patient is uniquely identified from entry and throughout the course of management.

b. The TB DOTS Center maintains a database of patient records and related registries and enables the staff access these databases.

**Indicators:**

NTP forms, TB lab registry, TB patients registry

c. Policies and procedures for ensuring the security and confidentiality of patient information are disseminated and followed.

**Indicators:**

Written procedures for accessing any information related to the TB DOTS Center operations; written procedures for releasing patient information.

### Human Resources

**Goal:** The TB DOTS Center staff provides efficient and competent DOTS services.

**Standards:**

8. The TB DOTS Center has an adequate number of qualified personnel skilled in providing DOTS services.

**Criteria:**

a. The following constitute the minimum TB DOTS Center personnel.

1. TB DOTS Center administrators
2. Physician
3. Full-time medical technologist
4. Full time nurse or midwife
5. Diagnostic Committee
6. Part time accountant



## STANDARDS FOR ACCREDITATION OF TB-DOTS CENTERS

- b. Personnel follow clear job descriptions, responsibilities and accountabilities.

**Indicators:**

Administrative manual with duties, responsibilities and accountabilities of all personnel; contracts of employment whenever appropriate.

- c. Personnel receive up to date training based on training from DOTS providers; certificate of TB microscopy training from NTP.

**Indicators:**

Certificates of DOTS training from DOTS providers; certificate of TB microscopy training from NTP

## APPLICATION FOR ACCREDITATION DOTS CLINIC

2nd draft  
3/17/03

\_\_\_\_\_  
(Date)

**THE PRESIDENT**  
 Philippine Health Insurance Corporation  
 Pasig City, Philippines

**SIR:**

I, \_\_\_\_\_, Filipino, of legal age, \_\_\_\_\_ with address at \_\_\_\_\_  
(Position/Designation)  
 and the duly authorized representative to act for and in behalf of \_\_\_\_\_,  
(Health Care Institution)  
 hereby applies for accreditation under Sec. 16 L of R.A. 7875 and its Implementing Rules and Regulations thereto. For this purpose, I hereby submit the following pertinent information and documentary requirements.

Name of TB-DOTS Clinic: _____			
Complete Address: _____			
Telephone No. _____		Fax No. _____	
		Zip Code _____	
E-mail Address: _____			
Director/Chief: _____			
Nature of Ownership:		<input type="checkbox"/> Government <input type="checkbox"/> Private	
Type of Application:		<input type="checkbox"/> Initial <input type="checkbox"/> Renewal <input type="checkbox"/> Re-accreditation	
<b>I. SERVICE CAPABILITY:</b>			
<input type="checkbox"/> Medical Consultation	<input type="checkbox"/> Diagnostic Services	In house	Referred to:
	Sputum Microscopy	<input type="checkbox"/>	<input type="checkbox"/>
	Chest X-ray	<input type="checkbox"/>	<input type="checkbox"/>
Address: _____			
<b>III. CLINIC STAFF (Please attach separate sheet if space is not adequate)</b>			
<b>1. Administrative Service</b>			
Administrative Officer: _____			
<b>2. Clinical Service</b>			
Physician:		Accreditation No.	Expiry Date:
PHICAT Cert. No.	NTP Trained in DOTS	PRC Lic. No.	Expiry Date:
Medical Technologist:			
	NTP Trained in DOTS	PRC Lic. No.	Expiry Date:
Nurse:		PRC Lic. No.	Expiry Date:
Midwife:		PRC Lic. No.	Expiry Date:
<b>3. Diagnostic Committee</b>		<b>Name of Consultant</b>	
Radiologist		_____	
Pulmonologist		_____	
Infectious Disease		_____	

I hereby declare under penalties of perjury that the answers given are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Date Accomplished

\_\_\_\_\_  
Owner

Res. Cert. No. \_\_\_\_\_  
 Issued at: \_\_\_\_\_  
 Issued on: \_\_\_\_\_

**Checklist of Requirements**

- |  |   |
|--|---|
| <input type="checkbox"/> PhilHealth application form properly accomplished and notarized<br><input type="checkbox"/> Certification from PhilCAT<br><input type="checkbox"/> Certification from NTP as TB Microscopy Center<br><input type="checkbox"/> Mayor's Permit<br><input type="checkbox"/> Complete list of staff with respective designations<br><input type="checkbox"/> List of equipments and supplies<br><input type="checkbox"/> List of available drugs in the DOTS Center<br><input type="checkbox"/> Accreditation Fee (P1000.00) by postal money order payable only to Philippine Health Insurance Corporation or cash paid direct to the cashier. The Accreditation fee is non-refundable. | <input type="checkbox"/> Current photographs of DOTS Clinic façade and other facilities (optional)<br><input type="checkbox"/> Current photographs of complete Clinic Staff<br><input type="checkbox"/> Current standard operating procedures<br><input type="checkbox"/> MOA with an x-ray facility, if without an x-ray facility<br><input type="checkbox"/> MOA with a microscopy center, if without a laboratory facility<br><input type="checkbox"/> Remittance Form I (RF-I)<br><input type="checkbox"/> Quality Assurance activities |
|--|---|

**Status of Application:**       Approved                       Deferred                       Denied  
 Date: \_\_\_\_\_                      Date: \_\_\_\_\_                      Date: \_\_\_\_\_

Date Received at CO: \_\_\_\_\_

Date Received at PRO: \_\_\_\_\_