

PHILIPPINE HEALTH INSURANCE CORPORATION

Citystate Centre, 709 Shaw Boulevard, Pasig City Healthline 637-9999 www.philhealth.gov.ph

June 22, 2009

PHILHEALTH CIRCULAR

No. 30 s. 2009

TO

All PhilHealth Regional and Service Offices, Non-hospital

Facilities for the Maternity Care Package, Rural Health Units/ Health Centers, Physicians, Midwives and all others

concerned

SUBJECT

Amendment to PhilHealth Circular No. 15 s. 2001

(Guidelines for Accreditation of Providers for the Maternity and

Newborn Care Package)

The following are the amendments to the standards for accreditation of non-hospital facilities and professionals as providers for the maternity and newborn care package:

A. STANDARDS FOR ACCREDITATION OF NON-HOSPITAL FACILITIES

1. Service Capabilities

The non-hospital facility for the Maternity Care Package (MCP) shall provide the following services:

- 1. Prenatal care
- 2. Normal birth
- Newborn Care, including newborn screening (as required by RA 9288), covered as Newborn Care Package (NCP)
 - The health facility shall be certified by the DOH or by the National Institute for Health (NIH) as a Newborn Screening Facility (NSF) within two years from initial accreditation.
- 4. Health education:
 - 4.1. Provision of materials and posters related to maternal and newborn care
 - 4.2. Family planning
 - a. Natural method
 - b. Artificial method
 - 4.3. Breastfeeding
- 5. Post partum care

2. Technical Standards

The non-hospital clinic for the MCP shall comply with all of the following:

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Administrative Officer IV Chief - RELIME
Date:

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2.1 General Infrastructure:

- 2.1.1. Clear sign bearing the name of the provider for the MCP health facility
- 2.1.2. Sign enumerating the service components of the MCP, NCP
- 2.1.3. Generally clean environment, with prohibition for smoking
- 2.1.4. Sufficient seating for clients in a well ventilated area
- 2.1.5. Adequate lighting
- 2.1.6. Adequate clean water supply
- 2.1.7. Private consultation/ examination room/ cubicle
- 2.1.8. Delivery room which includes the following:

Birthing area

Area for cleaning baby/ instruments

- 2.1.9. Adequate signage (entrance and exit)
- 2.1.10. Patient room/s
- 2.1.11. Toilet (Minimum of 1 for 1 to 6 beds and additional 1 toilet for every 6 additional beds)

2.2. Basic Consultation and Delivery Room Equipment

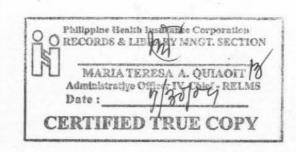
- 2.2.1. Neonatal or Pediatric ambubag with neonatal mask
- 2.2.2. Adult ambubag
- 2.2.3. Non-mercurial BP apparatus
- 2.2.4. Stethoscope
- 2.2.5. Delivery table with stirrups
- 2.2.6. Kelly pad
- 2.2.7. IV stand or its equivalent
- 2.2.8. Footstool
- 2.2.9. Gooseneck lamp (2)
- 2.2.10. Oxygen tank (min. of 5lbs.) with regulator and humidifier
- 2.2.11. Pail
- 2.2.12. Portable emergency light or flashlight
- 2.2.13. Suction apparatus
- 2.2.14. Rubber bulb suction (min of 2)
- 2.2.15. Instrument tray with cover
- 2.2.16. Instrument cabinet
- 2.2.17. Instrument table or its equivalent
- 2.2.18. Wall clock with second hand
- 2.2.19 2 Weighing scales (adult and infant)
- 2.2.20. Storage containers with cover (minimum of 3), for the following:

Dry cotton

Cotton balls with povidone-iodine

Cotton balls with alcohol

- 2.2.21. Receptacles for used cotton balls and gauze
- 2.2.22. Containers (minimum of 2) for cotton balls with iodine, one for cord dressing and one for perineal prep
- 2.2.23. Sponge holding forceps
- 2.2.24. Vaginal speculum
- 2.2.25. NSD set (minimum of 2 sets) consisting of:
 - 2 Haemostatic forceps
 - 1 Needle holder
 - 1 Pick up forceps
 - 1Tissue forceps



1 surgical scissors

2.2.26. Cord dressing set (minimum 2 sets) consisting of:

1 surgical scissors

Cord clamp or its equivalent

2.2.27 Other Requirements:

Fire safety provision

Bassinet or newborn resuscitation table

Properly labeled, colored garbage containers

Separate receptacle for disposing pointed or sharp objects

Sterilizer or its equivalent

Patient's bed

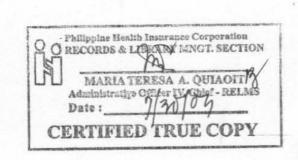
Examining table

2.3 Standard Supplies

- 2.3.1 70% isopropyl alcohol
- 2.3.2. IV set (Gauge 20 IV cannula or Gauge 19 butterfly)
- 2.3.3. IV tubing
- 2.3.4. D5LR
- 2.3.5. Disposable syringe with needles
- 2.3.5. Plaster
- 2.3.6. Sterile absorbable suture with needle or sterile cutting and round needle and absorbable suture
- 2.3.7. Sterile cotton balls
- 2.3.9. Sterile gauze
- 2.3.10. Sterile gloves
- 2.3.11. Surgical caps
- 2.3.12. Surgical mask
- 2.3.13. Sterile drapes
- 2.3.14. Nasal cannula
- 2.3.15. Cone mask for baby (maybe improvised)
- 2.3.16. Non-mercurial thermometer
- 2.3.17. Tape measure
- 2.3.18. Soaking Solution (for instruments)
- 2.3.19. Xylocaine/ Lidocaine
- 2.3.20. Erythromycin or oxytetracycline ophthalmic ointment
- 2.3.21. Vitamin K ampoule
- 2.3.22. Tetanus toxoid
- 2.3.23. Methylergonovine maleate ampoule
- 2.3.24. Cleaning supplies for the facility and clinical instrument
- 2.3.25. Slippers for use in the DR

2.4 Records Management

- 2.4.1. Admission Register with monthly summary
- 2.4.2. Patients Clinical Record which include the following:
 - 2.4.2.1. Maternal clinical charts with properly accomplished informed consent and ICD-10 coded medical diagnosis and procedure/s performed
 - 2.4.2.2. Completely and properly filled out records of newborn/s
 - 2.4.2.3. Properly and completely filled out birth certificate forms
- 2.4.3. Referral forms



2.5 Available transport vehicle for emergency cases (Facility- owned or contracted out)

2.6. Human Resource

-all personnel must be PhilHealth members with updated premium contributions

- 2.6.1. At least one (1) PhilHealth accredited professional provider
- 2.6.2. Clinic Aide (full time or on-call)
- 2.6.3. On-call partner physicians of professional provider

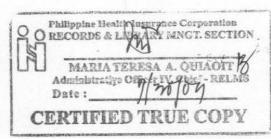
Provider	Partner MD/s
Obstetrician-gynecologist	Physician for Pediatric cases
Pediatrician	Physician for obstetric cases
Others (midwife, general practitioner, internist, Family Physician)	Physician/s for obstetric cases and Pediatric cases

The partner physician for Obstetric cases shall be:

- A Diplomate or Fellow of the Phil. Obstetrical & Gynecological Society (POGS); or
- 2. In areas where there are no POGS diplomate / fellow, as certified by POGS, partner MD may be any of the following:
 - A graduate of POGS accredited Ob-Gyne residency training program; or
 - b. A Diplomate/ Fellow of the Philippine Academy of Family Physician (PAFP)or;
 - c. A graduate of Philippine Academy of Family Physician (PAFP) accredited Family Medicine Training Program; or
 - d. A physician who completed at least a six months in-service training in OB-GYNE for government physician or Training on Basic Emergency Obstetric and Newborn Care (BEmONC) or Comprehensive Emergency Obstetric and Newborn Care (CEmONC)

The partner physician for Pediatric cases shall be:

- A Diplomate or Fellow of the Phil. Pediatric Society (PPS).
- In areas where there are no PPS diplomate/ fellow, as certified by PPS, partner MD shall be any of the following:
 - A graduate of PPS accredited Pediatric residency training program;
 or
 - A Diplomate/ Fellow of the Philippine Academy of Family Physician (PAFP); or
 - c. A Graduate of Philippine Academy of Family Physician (PAFP) accredited Family Medicine Training Program; or
 - d. A physician who has completed at least a six months in-service training in Pediatrics for government physician or Training on Basic Emergency Obstetric and Newborn Care (BEMONC) or Comprehensive Emergency Obstetric and Newborn Care (CEMONC)



3. Quality Assurance Activities

The non-hospital facility for the MCP shall conduct quality assurance/ improvement activities:

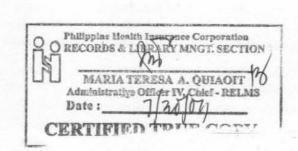
Initial/ Re-Accreditation	Renewal
Mission/ Vision	Satisfaction survey for staff and patients
Operations manual / Clinical standards operating procedures (including prenatal, postnatal and newborn care, normal spontaneous delivery and referral system)	Human resource development
	Compliance to monitoring and evaluation activities of PHIC
	Submission of annual morbidity and mortality data
	Report on referrals done

B. STANDARDS FOR ACCREDITATION OF PROFESSIONAL PROVIDERS FOR THE MATERNITY CARE PACKAGE

- The PROVIDER for the MCP shall be MIDWIFE or PHYSICIAN duly accredited by PhilHealth
- The said provider shall render the MC Package Services in a non-hospital facility accredited by PhilHealth
- The PROVIDER shall be allowed affiliation to a maximum of three (3) accredited facilities for the Maternity Care Package

1. Standards for Accreditation of MIDWIFE as Provider of the MCP

- 1.2 The midwife shall be a licensed practitioner.
- 1.3 The midwife shall be a member in good standing of a PHIC recognized national association of midwives.
- 1.4 The midwife shall have competency on the expanded functions of midwives.
 - 1.4.1 Graduates from school year 1995 and onwards need not submit a certificate of training (skills training are incorporated in the curriculum from 1995).
 - 1.4.2 Graduates before 1995 shall submit any of the following:
 - Certificate from a training program accredited by the Continuing Professional Education (CPE) Council of the Board of Midwifery of the Professional Regulation Commission (PRC); or
 - Certificate from DOH-recognized training program; or
 - Certification of apprenticeship for one or more years with a PHIC accredited Obstetrician-Gynecologist/ OB DOH Specialist or an accredited midwife done in an accredited facility
- 1.5. The midwife shall have two (2) PARTNER PHYSICIANS, one for obstetric cases and one for newborn cases, as discussed in 2.6 of Section A.



2. Standards for PhilHealth Accreditation of PHYSICIANS as Providers of the MC Package

2.1 The physician shall be a licensed practitioner

2.3 The physician for OB cases shall have a partner MD for Pediatric cases with the same requirements with the partner physician of the midwife.

2.4 The physician for Pediatric cases shall have a partner MD for OB cases with the same requirements with the partner physician of the midwife.

2.5 The physician who is non-OB and non-Pedia shall have two partner physicians for OB and Pedia cases.

This circular shall take effect after fifteen days from publication in an official gazette or any newspaper of general circulation.

All other rules and guidelines not contrary to this circular shall remain in full force and effect.

Dr. Rey B. Aquino President and CEO

Philippine Health Lampynee Corporation
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MARIA TERESA A. QUIAOIT O
Administrative Officer D. Chief - RELMS
Date:

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