

## Self-Assessment/Survey Tool for Z Benefit Package Providers for Colon and Rectum Cancers

Name of Health Facility (HF): \_\_\_\_\_

Date of Survey: \_\_\_\_\_ Time started: \_\_\_\_\_ Time ended: \_\_\_\_\_  
*\*For Survey Team Use Only (mm/dd/yyyy)*

**Directions for the HF:**

1. Put a check (✓) in the “Yes” column if the service is available or an (X) in the “No” column if the same is not available in the HF.
2. For outsourced services, put (X) in the “No” column and state in the remarks that the service is outsourced and write the name of the outsourced service provider.

REQUIREMENTS		HF		PHIC		REMARKS
		Yes	No	Yes	No	
<b>1.0</b>	<b>Hospital License and Accreditation</b>					
a.	The HF has an updated DOH License (Tertiary Level)					
b.	The HF has an updated PhilHealth Accreditation					
<b>2.0 Minimum Service Capability/ Technical Standards</b>						
a.	General Infrastructure/ Physical Facilities					
b.	Major Operating Room					
c.	Surgery ward					
d.	Facilities for in and out-patient chemotherapy infusion					
f.	Conference room for multidisciplinary meeting					
g.	Multi-Disciplinary out-patient clinics					
h.	Pathology and Laboratory Service/s for mandatory tests					
i.	Histopathology					
j.	Fasting Blood Sugar					
k.	Carcinoembryonic Antigen (CEA)					
l.	Complete Blood Count					
m.	Blood Typing					
n.	Albumin					
o.	Creatinine					
p.	SGPT					
q.	Prothrombin time					
r.	Alkaline phosphatase					
s.	Bilirubin					
t.	Endoscopy Facility					

u.	Colonoscopy					
v.	Proctoscopy					
w.	Radiology/ Radiotherapy Facility					
x.	CT scan (whole abdomen preferably with triple contrast)					
y.	Chest X-ray (PA-L)					
z.	Pelvic MRI					
a.1	LINAC - Linear accelerator					
b.2	Other diagnostic services					
c.3	ECG					
d.4	2D echocardiogram					
f.5	Endorectal ultrasound					
g.6	Pharmacy with the following drugs:					
h.7	Capecitabine-Oxaliplatin (CapeOX)					
i.8	Capecitabine					
j.9	Fluorouracil–Folinic acid-Oxiplatin (FOLFOX4)					
k.10	Fluorouracil–Folinic acid-Oxiplatin (mFOLFOX6)					
l.11	Fluorouracil–Folinic acid (FU-FA)					
m.12	Anti-emetics					
n.13	Antibiotics					
o.14	Pain relievers					
p.15	Adequate signage (entrance, exit and smoking prohibition)					
<b>3.0</b>	<b>Human Resource</b>					
<b>3.1</b>	<b>The HF shall have a functional Multi-disciplinary Team (MDT)</b>					
a.	Composition / List of healthcare professionals with <i>conforme</i>					
b.	Minutes of Meeting					
<b>3.2</b>	<b>Medical Oncology</b>					
a.	Training program accredited by the Philippine Society of Medical Oncology or the Philippine Society of Oncologists, <b>OR</b>					
b.	With at least 1 Medical Oncology consultant who is a Fellow of the Philippine Society of Medical Oncology or the Philippine Society of Oncologists					
c.	Valid PRC License					
d.	Valid PhilHealth Accreditation					
<b>3.3</b>	<b>Radiation Oncology</b>					
a.	Training program accredited by the Philippine Radiation Oncology Society; <b>OR</b>					
b.	With at least 1 Radiation Oncology Consultant who is a Fellow of the Philippine Radiation Oncology Society					
c.	Valid PRC License					
d.	Valid PhilHealth Accreditation					

3.4	<b>Surgeon</b>					
a.	<b>For Colon Cancer</b>					
b.	Training program in General Surgery accredited by the Philippine Society of General Surgery; <b>OR</b>					
c.	With at least 3 General Surgeons consultants who are Fellows of the Philippine Society of General Surgeons					
d.	Valid PRC License					
f.	Valid PhilHealth Accreditation					
<b>3.5 For Rectal Cancer:</b>						
a.	Training program in Colorectal Surgery accredited by the Philippine Society of Colorectal Surgeons; <b>OR</b>					
b.	With at least 1 Colorectal Surgeon consultant who is a Fellow of the Philippine Society of Colorectal Surgeons; <b>OR</b>					
c.	With at least 1 General Surgeon consultant who is BOTH a Fellow of the Philippine Society of General Surgeons AND certified to have officially completed the didactics and hand-on course on Total Mesorectal Excision Course given by the Philippine Society of Colorectal Surgery					
d.	Valid PRC License					
e.	Valid PhilHealth Accreditation					
3.6	<b>Pathology Consultants</b>					
a.	Diplomate or Fellow of the Philippine Pathology Society					
b.	Valid PRC License					
c.	Valid PhilHealth Accreditation					
3.7	<b>Oncology Nurse</b>					
a.	i. Certified member of the Philippine Oncology Nurses Association					
b.	ii. Trained and certified in oncology nursing (minimum requirements: IV therapy, basic oncology, anti-cancer chemotherapy administration) by the Multidisciplinary Oncology team of the hospital					
c.	iii. Valid PRC License					
3.8	<b>Stoma Nurse</b>					
a.	i. Certified member of the Enterostomal Nursing Association of the Philippines					
b.	ii. Valid PRC License					
3.9	<b>Z Benefit Coordinator</b> (At least 1) ( <i>handles maximum of 3 Z Benefit packages</i> )					
4.0	Clinical Pathway Implementation					
	Presence of policy adopting the clinical pathway for Colon and Rectum Cancer					

<b>5.0</b>	<b>Z Benefit Program Implementation</b>					
a.	Full awareness of the PhilHealth Z Benefit program including No Balance Billing (NBB) and maximum co-payments					
b.	Action plan/ commitment of the HF to abide with the NBB Policy					
c.	Conduct advocacy programs/seminars at least annually					
d.	Provides patient navigation for availment of Z Benefit Package.					
e.	Patient education and family support activities					
f.	1. Educational materials available for patients and their family/caregivers					
g.	2. Conducts of Z Benefit patient education forum annually					
h.	Submit outcomes evaluation, such as, but not limited to the following, during renewal of contract:					
i.	Mortality rate					
j.	Morbidity rate					
k.	Length of Hospital Stay					
l.	Recurrence rate					
m.	Cancer detection rate					
n.	2, 3, and 5 year survival rates					
o.	Compliance rate (%) (Completed, deferred due adverse effect, lost to follow-up/abandonment)					

**PhilHealth Survey Team**

<b>Surveyors' Names</b>	<b>Designation</b>	<b>Signature</b>

**HF Management Team**

<b>Names of Management Team</b>	<b>Designation</b>	<b>Signature</b>

**Agreements with HF / Notes of PhilHealth after Pre-contracting survey (PCS)**

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