

**Republic of the Philippines** PHILIPPINE HEALTH INSURANCE CORPORATION Citystate Centre, 709 Shaw Boulevard, Pasig City Call Center (02) 441-7442 Trunkline (02) 441-7444 www.philhealth.gov.ph



## PHILHEALTH - SAT - F16

## Self- Assessment/Survey Tool for Z Benefit Package Providers for Children with Disabilities **Mobility Impairment**

Name of HCI:

Date of Survey: \_\_\_\_\_ Time started: \_\_\_\_\_ Time ended: \_\_\_\_\_

**Directions for the HCI:** 

- 1. Put a check ( $\checkmark$ ) in the box if the service is available or an ( $\bigstar$ ) if the same is not available in the HCI.
- 2. For outsourced services, put an (\*) in the "no" box and state in the remarks that the service is outsourced and write the name of the outsourced service provider.

	DECHIDEMENTS		H	CI	PHIC		DEMADKS
		REQUIREMENTS	Yes	No	Yes	No	REMARKS
1	Hospital	License and Accreditation					
1.1	The HCI	has an updated DOH License to Operate					
1.2	The HCI	has an updated PhilHealth Accreditation					
2	Minimun	n Service Capability					
	Mandator	y Services as stated in PhilHealth Circular 2017-					
2.1	0031 OR •	with formal referral process to a licensed referral					
	facility:						
2.1.1	General						
	i.	Outpatient consultation for mobility disabilities					
	 11.	Physical examination and neurologic					
		examination for mobility					
	 111.	Pre- and post-prosthetic evaluation for limb					
		loss and deficiency					
	iv.	Provision of prosthesis, orthosis, seating					
		device, and wheelchair					
2.1.2	Rehabilita	tion Medicine Unit with service areas for:					
	1.	Pediatric area for mobility & seating assessment					
	ii.	Therapy area for Physical Therapy and					
		Occupational therapy management					
	 111.	Prosthetic/orthotic wheelchair and seating					
		devices workshop for casting, fabrication,					
		assembly, fitting & repairs					
	1V.	Mobility training area with even/uneven					
		surface, ramp and stairs.					
	V.	Accessible toilet and bath compliant to BP 344					



	DEALIDEMENTS	H	CI	PHIC		DEMADKS
	REQUIREMENTS	Yes	No	Yes	No	REMARKS
	vi. Referral system in place for other rehabilitation					
	needs					
	vii. Patient and caregiver's waiting area					
2.1.3	Diagnostics					
	i. Musculoskeletal x-ray for hip, extremities and					
	spine (or referral for x-ray services)					
	ii. EMGNCV, CT-Scan, MRI (or with existing MOA for referral for these)					
2.1.4	Workshop and Storage Area					
	i. For prosthetic/orthotic workshop for					
	screening, casting, fabrication, assembly, fitting					
	and repairs					
	ii. Wheelchair assembly, modifications,					
	maintenance & repair					
	iii. Storage Area for prosthetic & orthotic					
	wheelchair, seating devices' components, tools,					
	supplies and wheelchairs					
2.1.5	Accessibility Features					
	Compliant to BP 344 "An Act To Enhance The Mobility					
	Of Disabled Persons By Requiring Certain Buildings,					
	Institutions, Establishments And Public Utilities					
	To Install Facilities And Other Devices" especially:					
	i. Ramps					
	ii. Restroom for PWDs					
3	Equipment and tools					
3.1	Equipment for Prosthetic and Orthotic Workshop					
	Assessment, Casting and Fitting Tools					
	- Plinth					
	- Basin					
	- Stepping stool					
	- Goniometer					
	- Steel and flexible tape measure					
	- Flexible tape measure					
	- Bandage & tailor scissors					
	- Stump / body calipers					
	- Rulers: 12 inch-ruler + 1 meter steel ruler					
	- Cutter with replaceable blade					
	- Pencil markers/indelible pencils					
	- Cling wrap					
	- Casting tubes					
	- Plaster of Paris rolls/bandage (4 and 6 inches)					
	- Stockings/Cling wrap to be applied on residual limb for					
	- Vaseline					
	- Disposable gloves					
	- Disposable masks					
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DECHIDEMENITS		CI	PHIC		DEMADIZO
REQUIREMENTS	Yes	No	Yes	No	REMARKS
Rectification					
- Metal table with mandrel holder					
- Sandbox for setting plaster molds					
- Sink with plaster trap					
- Plaster of Paris powder with container					
- Bucket					
- Heavy duty balloon wisp for mixing plaster					
- Plaster mixing bowl					
- Spatula					
- Staple gun					
- Surforms for shaping/shaving positive mold (flat, half					
round, and round)					
- Wire screen/mesh Sandpaper p240					
- Tubes for positive mold					
Fabrication					
Equipment and tools					
- Oven with socket frame					
- Router					
<ul> <li>Vacuum Forming Stations (Vacuum Pump &amp; Connection Kit &amp; Enveloping Suction Tubes)</li> </ul>					
- Air Compressor					
- Dust aspirator and filter					
- Work benches with bench vise & vise grip					
<ul><li>Sewing machine</li><li>Hand Drill</li></ul>					
- Cast cutter					
- Jigsaw and steel hacksaw					
- Heat Gun					
- Anvil					
- Riveting bar					
- Soldering iron					
- Pipe Cutter Heavy Duty for Steel Pipes 1/8" To 2"					
- Deburring Tool					
- Ballpen Hammer ½ - 1Lb					
- Set of metric Allen keys					
- Rubber Mallet M10 450G					
- Center/hole punch					
- Contouring Instruments for orthoses 4-6Mm 7-9mm					
- Halfround, round & flat files W/ Handle					
- Protective eyeglass					
- Ear muffs/ plugs					
- Thermal gloves					
- Sanding Cone & Drum					
- Pliers					

	DECUIDEMENITS	HCI		CI PHIC		DEMADKO
	REQUIREMENTS	Yes	No	Yes	No	REMARKS
	- Screwdrivers					
	- Water/bubble Level					
	Consumables					
	- Sanding sleeve with varying grit					
	- Polypropylene/polyethylene plastics					
	- Different foams and sizes (3mm, 6mm, 12mm)					
	- Ethylvinyl acetate					
	- Rugby					
	- Industrial mask					
	- Industrial gloves					
	- Velcros					
	- Webbings/straps					
	- Rivets					
	- Buckles					
	- Stockinettes (cotton and nylon, sizes: 2, 3, 4, 5, 6					
	inches)					
	- Prosthetic components					
3.2	For wheelchair assessment, prescription, and fitting:					
5.2	Clinical Area					
	Fixed equipment / gadget					
	Low Assessment Bed and Foot blocks (set of 4, surface 400					
	mm x 300 mm. Heights: Varied from 15-150 mm)					
	Workbench					
	- Therapy Floor Mat					
	- Metal Tape Measure					
	- Goniometers					
	- Privacy screen					
	- Catalogue of sample wheelchairs					
3.3	For Wheelchair assembly, modification, maintenance &					
5.5	repair					
	Set of metric combination spanners (8 mm to 22 mm)			1		
	Set of imperial combination spanners					
	Long-stem types are best – preferably with a T-bar handle					
	Foam cutting instruments: Hacksaw blade/ kitchen					
	knife/Electric kitchen knife					
	Wrench					
	Long nose Pliers					
	Large scissors					
	Safety glasses					
	Hand wood and metal Saw					
	Flat or Half round File					
	Rubber Mallet					
	Hammer Scrowdrivers (Philips and Elat)					
	Screwdrivers (Philips and Flat)	l	l		I	

	DEOLUDEMENTO	HCI		HCI PHIC		DEMADIC
	REQUIREMENTS	Yes	No	Yes	No	REMARKS
	Tire Pump					
	Tire Gauge					
	L-square (90°) ruler					
	Spirit/bubble level					
	Electric jigsaw Electric Drill					
	Drill bit for wood & metal					
	Pop riveter					
	Spoke key					
	Contact glue for wood and foam (for intermediate services)					
	1 sheet each of <sup>3</sup> / <sub>4</sub> inch and 1 inch Marine Plywood (for					
	intermediate services)					
	10 pcs Blocks of Firm/Chip Foam (for intermediate services)					
	10 Wedges of Firm/Chip Foam (for intermediate services)					
	10 webbing buckles that match 1 inch and 2 inches webbing					
	straps (for intermediate services)					
	straps (for interinediate services)					
	1 roll each of 1 inch and 2 inches webbing straps (for					
	intermediate services) Metal Brackets (offset and L-brackets) (for intermediate					
	services)					
	Directory of wheelchairs available in the area that conform to					
	the ISO 7176, 16840 standards					
	Catalogue of available cushions in the area					
	Wheelchair Repair Kit (Tire Pump, wrench, tire repair kit)					
4	Human Resources					
4.1	Rehabilitation Medicine Specialist who is a Diplomate of					
4.1	the Philippine Board of Rehabilitation Medicine with:					
	i. Valid PRC License					
	ii. PhilHealth Accreditation					
4.2	Occupational Therapist/Physical Therapist					
	Valid PRC License					
4.3	Prosthetist and Orthotist Clinician graduate of a 4-5 year					
4.4	BS Prosthesis & Orthosis course)					
4.4	Prosthetic and Orthotic Non-clinician (Technician) Wheelchair Professional certified by the Philippine Society					
4.5	of Wheelchair Professionals as an Intermediate Wheelchair					
1.5	Assessor and Provider)					
	Wheelchair Technician under supervision of Wheelchair					
4.6	Professional					
4.7	Z-Benefit Coordinator					
4.8	Medical Social Service					
5	General algorithm of care					
	Presence of policy adopting the general algorithm of care					
6	Z Benefit Program Implementation					

	REQUIREMENTS -		HCI		IIC	REMARKS
			No	Yes	No	<b>KENIAKKS</b>
	Full awareness of the PhilHealth Z benefit program					
6.1	including No Balance Billing (NBB) and maximum co-					
	payments					
6.2	Action plan/ commitment of the HCI to abide with the					
0.2	NBB policy					
6.3	Conduct advocacy programs/seminars at least annually					
6.4	Submit report on patient outcomes, and other statistical					
0.4	report					
6.5	Costing for maximum co-pay					
6.6	Process for the provision of services					

## PhilHealth Survey Team

Surveyor's Name	Designation	Signature

## HCI Management Team

Names of Management Team	Designation	Signature

