

[Administrative Order No. 2016-0042, January 05, 2017]

GUIDELINES IN THE APPLICATION FOR DEPARTMENT OF HEALTH PERMIT TO CONSTRUCT (DOH-PTC)

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I. RATIONALE/BACKGROUND

The issuance of Administrative Order (A.O.) No. 2010-0035 entitled "Recentralization of the Issuances of Permit to Construct (PTC) for All Levels of Hospitals, License to Operate (LTO) for All New Hospitals and Renewal of LTO for Levels Three (3) and Four (4) Hospitals", authorized the re-centralization of the licensing and regulatory functions to the Health Facilities and Services Regulatory Bureau (HFSRB).

In the said A.O., the following regulatory functions were assigned to HFSRB: a) issuance of PTC for all levels of hospitals; b) issuance of LTO for all new hospitals; c) any change in the LTO of existing hospitals; and d) renewal of LTO for Level 3 and Level 4 hospitals. Based on the same A.O., the Regional Offices shall continue with their regulatory functions of renewing the LTO of Levels 1 and 2 hospitals.

With the issuance of A.O. No. 2012-0012 entitled "Rules and Regulations Governing the New Classification of Hospitals and other Health Facilities in the Philippines", the processing of DOH-PTC applications for all new hospitals and other health facilities remained solely in the jurisdiction of HFSRB. Upon review and evaluation of its implementation, such set-up along with the increase in the volume of applications has led the HFSRB to adopt a strategy in order to make the process of application for DOH-PTC more efficient, rational and client responsive.

In this regard, regulatory functions for selected health facilities shall be decentralized to the Regional Offices. This decentralization is in support of the presidential directive to streamline all government processes including regulation.

Furthermore, this Order shall serve as the guidelines for the processing of all DOH-PTC applications for both HFSRB and the Regional Offices.

II. OBJECTIVE

These rules and regulations are promulgated to decentralize to the Regional Offices the DOH-PTC application process for selected health facilities and to harmonize all PTC related issuances.

III. SCOPE

These rules and regulations shall apply to all government and private hospitals and other health facilities applying for a DOH-PTC.

IV. DEFINITION OF TERMS AND ACRONYMS

1. Add-on Services - health care services which are beyond the current service capability of health facility (ex. Level 1 Hospital with add-on services like Hemodialysis Clinic, Intensive Care Unit, Neonatal Intensive Care Unit, etc.)
2. Ambulatory Surgical Clinic (ASC) - a government or privately owned institution which is primarily organized, constructed, renovated or otherwise established for the purpose of providing elective surgical treatment of out-patients whose recovery, under normal and routine circumstances, will not require inpatient care
3. Applicant - the natural or juridical person who is applying for a License to Operate or Certificate of Accreditation of a hospital or any other health facility
4. Birthing Home - a health facility that provides maternity service on prenatal and postnatal care, normal spontaneous delivery and care of newborn babies
5. Certificate of Need (CON) - a required document prior to the issuance of a DOH-PTC for construction of new government and private hospital.
6. Checklist for Review of Floor Plans - the checklist for the planning and designing of health facilities to comply with the minimum standards and requirements
7. Department of Health (DOH)
8. Department of Health-Permit to Construct (DOH-PTC) - a permit issued by DOH through HFSRB to an applicant who will establish and operate a hospital or other health facility, upon compliance with required documents set forth in this Order prior to the actual construction of the said facility. A DOH-PTC is also required for hospitals and other health facilities with substantial alteration, expansion, renovation, increase in the number of beds or for additional services (add-ons) beyond their service capability. It is a prerequisite for License to Operate.
9. Drug Abuse Treatment and Rehabilitation Center (DATRC) - a health facility that provides diagnosis, treatment and management of drug dependents utilizing any of the accepted modalities such as multidisciplinary team approach, therapeutic community approach, and/or spiritual services towards the rehabilitation of a drug dependent. A DA TRC according to service capability can be categorized as a Residential Treatment and Rehabilitation Center (In-patient Center) or as a Non-residential Treatment and Rehabilitation Center (Out-patient Center).
10. Residential Treatment and Rehabilitation Center (In-patient Center) - a health facility that provides comprehensive rehabilitation services utilizing, among others, any of the accepted modalities: multidisciplinary team approach, therapeutic community approach, and/or spiritual services towards the rehabilitation of a drug dependent.
11. Non-residential Treatment and Rehabilitation Center (Out-patient Center) - a health facility that provides diagnosis, treatment and management of drug dependents on an outpatient basis. It may be a drop-in/walk-in center or any other facility with consultation and counseling on addiction as the main services provided, or may be an aftercare service facility. From time to time, it may provide temporary shelter for patients in crisis for not more than twenty four (24) hours.
12. Drug Testing Laboratory (DTL) - refers to a private or government diagnostic facility that performs a laboratory examination of human biological specimen for identification of dangerous drugs
13. Health Facility - a building or physical structure providing health care services

14. Health Facilities Evaluation and Review Committee (HFERC) - refers to the committee that reviews all applications for PTC with respect to compliance with the guidelines in planning and design of health facilities
15. Health Facilities and Services Regulatory Bureau (HFSRB) - the Bureau of DOH in charge with the implementation of these rules and regulations
16. Hemodialysis Clinic - a health facility doing medical procedures whereby the patient's blood is delivered by a machine to a dialyzer (filter) to remove metabolic waste and restore fluid and electrolyte balance
17. Hospital - a place devoted primarily to the maintenance and operation of health facilities for the diagnosis, treatment and care of individuals suffering from illness, disease, injury or deformity or in need of obstetrical or other surgical, medical and nursing care. It shall also be construed as any institution, building or place where there are installed beds, cribs or bassinets for twenty-four hour use or longer by patients in the treatment of diseases
18. Infirmary - a health facility that provides emergency treatment and care to the sick and injured, as well as clinical care and management to mothers and newborn babies
19. License to Operate (LTO) - a formal authority issued by DOH to an individual, agency, partnership or corporation to operate a hospital or other health facility. It is a prerequisite for accreditation of a health facility by any accrediting body recognized by DOH.
20. Medical Facility for Overseas Workers and Seafarers (MFOWS) - a health facility that conducts pre-employment medical examinations prior to deployment of land based overseas work applicant or seafarers for domestic/overseas employment to determine whether he/she is physically and mentally fit to work
21. Psychiatric Care Facility - a health facility that provides medical service, nursing care, pharmacological treatment and psychosocial intervention, including basic human services like food and shelter, for mentally ill patients. It can be categorized as an Acute-Chronic Psychiatric Care Facility or as a Custodial Psychiatric Care Facility.
22. Acute-Chronic Psychiatric Care Facility - a health facility that provides medical service, nursing care, pharmacological treatment and psychosocial intervention, including basic human services like food and shelter, for mentally ill patients.
23. Custodial Psychiatric Care Facility - a health facility that provides long-term care, including basic human services like food and shelter, for mentally ill patients.
24. Regional Office (RO) - the regional health office of DOH
25. Regulation Licensing and Enforcement Division (RLED)

V. IMPLEMENTING MECHANISMS

A. GENERAL GUIDELINES

1. The application for the DOH-PTC are required for the following health facilities:
 - a. Ambulatory Surgical Clinic
 - b. Birthing Home
 - c. Drug Abuse Treatment and Rehabilitation Center (Residential and Non-Residential)
 - d. Drug Testing Laboratory
 - e. Hemodialysis Clinic
 - f. Hospital
 - g. Infirmary

- h. Medical Facility for Overseas Workers and Seafarers
- i. Psychiatric Care Facility (Acute-Chronic and Custodial)

2. The processing of application for DOH-PTC shall be as follows:

HFSRB	Regional Offices – RLED
a. Ambulatory Surgical Clinic	a. Birthing Home
b. Drug Abuse Treatment and Rehabilitation Center (Residential and Non-Residential)	b. Level I and Health Facility Enhancement Program (HFEP) funded Hospitals
c. Drug Testing Laboratory (free- standing)	c. Add-on Services to Level 1 Hospitals
d. Hemodialysis Clinic	d. Infirmary
e. Hospital (Levels 2 and 3)	e. Psychiatric Care Facility (Acute-Chronic and Custodial)
f. Medical Facility for Overseas Workers and Seafarers	
g. Add-on Services to Level 2 and Level 3 Hospitals	

3. The HFSRB and RLED shall create a Health Facilities Evaluation and Review Committee (HFERC) composed of the following:

- a. Chairperson - Director IV (HFSRB) or may be assigned to any qualified HFSRB personnel/RLED Chief (RO) or may be assigned to any qualified RLED personnel
- b. Vice-Chair - any competent HFSRB/RLED personnel may be assigned
- c. Members at a minimum shall include the following:
 - i. Architect/Engineer
 - ii. Physician
 - iii. Nurse
 - iv. Other technical experts such as Medical Technologists, Pharmacists, Physicists, etc. may be invited to assist in the evaluation of the DOH-PTC application as needed.

4. Hospitals and other health facilities shall be planned and designed in accordance to existing laws and guidelines to ensure a safe and secure environment for patients, staff and the public.

5. Health facility owners shall strictly follow the checklist for review of floor plans.

6. The HFSRB shall exercise oversight, supervisory and monitoring functions over the ROs with regards to infrastructure compliance of facilities based on the approved DOH-PTC of hospitals, their ancillary and other facilities.