

Republic of the Philippines  
Department of Health  
**OFFICE OF THE SECRETARY**

FEB 07 2013

**ADMINISTRATIVE ORDER**  
No. 2013 - 0006

**SUBJECT: Guidelines to "Rule XI: Role of DOH in the Omnibus Rules and Regulations Implementing the Migrant Workers and Overseas Filipinos Act of 1995, as Amended by Republic Act No. 10022"**

**I. BACKGROUND/ RATIONALE**

On January 2, 2003, Administrative Order (A.O.) No. 1 s. 2003 entitled "Operational Guidelines in the Conduct of Pre-Employment Medical Examination of Overseas Workers and Seafarers" was issued to establish and promulgate guidelines in the regulation of medical clinics where Pre-Employment Medical Examinations (PEME) are being conducted.

Pursuant to A.O. No. 181 s. 2004 dated September 9, 2004 known as "Revised Rules and Regulations Governing Accreditation of Medical Facilities for Overseas Workers and Seafarers", medical clinics were required to establish a Quality Standard System as part of its continuous improvement in the standards of medical service for overseas work applicants.

Subsequently, on July 27, 2007, A.O. No. 2007 – 0025 was issued providing for the "Revised Guidelines for Conducting Medical Fitness Examinations for Seafarers". This brings to light a list of medical guidelines that may render a seafarer unfit for sea duty. With the decision by the International Maritime Organization (IMO) to include the Manila amendments into the standards set by the International Convention on Standards of Training, Certification and Watchkeeping (STCW), it is essential that Filipino sailors and maritime physicians understand these amendments which may affect their professional qualifications in relation to additional requirements and competencies they need to meet to acquire an STCW Certificate.

Furthermore, on March 8, 2010, Republic Act (R.A.) No. 10022 also known as "An Act Amending Republic Act No. 8042, Otherwise Known As 'The Migrant Workers And Overseas Filipinos Act Of 1995,' As Amended, Further Improving The Standard Of Protection And Promotion Of The Welfare Of Migrant Workers, Their Families And Overseas Filipinos In Distress, And For Other Purposes", lapsed into law. The law recognized the importance of the role of government agencies particularly the Department of Health (DOH) through the Bureau of Health Facilities and Services (BHFS) in upholding the health, safety and welfare of Filipino migrant workers. On July 29, 2010, the Omnibus Rules and Regulations implementing the aforementioned Act was published and this put the law into full force and effect.

All applicants for overseas work are required to undergo PEME at medical clinics accredited by DOH. With the variation in health examination packages among receiving countries, Section 16 of R.A. No. 10022 authorizes DOH to promulgate the necessary guidelines by prescribing, among others, a reasonable range of fees on the aforesaid examinations to enhance the quality of PEME.

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**AMENDED by**

No. 2013 - 0006 - A  
Date NOV. 6, 2013  
Posted on/by: NOV. 7, 2013 / JMS

This Order revises the foregoing issuances to ensure access to safe, quality and affordable health facilities and PEME services for the benefit of Filipino migrant workers.

## **II. OBJECTIVE**

This Order sets the guidelines to carry out the provisions of Rule XI: Role of DOH in the Omnibus Rules and Regulations Implementing the Migrant Workers and Overseas Filipinos Act of 1995, as amended by R.A. No. 10022.

## **III. SCOPE OF APPLICATION**

This Order applies to all DOH accredited medical clinics conducting PEME for land based overseas work applicants and seafarers for domestic/overseas employment.

## **IV. DEFINITION OF TERMS**

For purposes of this Order, the following terms and acronyms shall have the corresponding definitions:

1. Applicant – a person defined under #15 of the Definition of Terms.
2. Assessment Tool – the checklist utilized by regulatory officers during inspection or monitoring visits to evaluate compliance of DOH accredited medical clinics to minimum standards and requirements set forth by DOH through BHFS.
3. Audiometry – the minimum screening test to check the threshold of hearing utilizing air conduction. It may be performed by a trained physician, an audiologist or any allied medical staff with the appropriate training.
4. Board Certified Physician – a physician who is a Diplomate and/or a Fellow of a medical specialty and/or subspecialty society recognized by the Philippine Medical Association and certified to by the corresponding medical specialty and/or subspecialty board.
5. Bureau of Health Facilities and Services (BHFS) – the regulatory agency of DOH which shall exercise the accreditation and regulatory function under these rules and regulations.
6. Certificate of Accreditation (COA) – the formal authorization issued by BHFS to an individual, partnership, corporation or association to operate a medical facility for overseas workers and seafarers. It refers to compliance with standards set for a particular purpose. These standards cover input/structural, process and outcome/output standards.
7. Department of Foreign Affairs (DFA) – the agency responsible for the authentication (DFA Ribbon) of PEME certificates of applicants bound to other countries.
8. Department of Health (DOH)
9. DOH Accredited Medical Clinic – refers to a medical facility for overseas workers and seafarers that has complied with all requirements for DOH accreditation.
10. Department of Health – Permit to Construct (DOH-PTC) – a permit issued by DOH through BHFS to an applicant who will establish and operate a medical facility for overseas workers and seafarers upon compliance with required documents set forth in this Order prior to the actual construction of the subject facility. It is also required of a medical clinic with substantial alteration, expansion and/or renovation. It is a prerequisite for accreditation of a medical clinic.

11. E-Commerce Law – refers to R.A. No. 8792, “An Act Providing for the Recognition and Use of Electronic Commercial and Non-Commercial Transactions and Documents, Penalties for Unlawful Use Thereof and for Other Purposes”.
12. Fitness date – the date of issuance of a fit PEME certificate. The ninety (90) day validity of a fit PEME certificate of an applicant for overseas work prior to deployment commences on the date of fitness issued by DOH accredited medical clinics.
13. Full Time – refers to an employee with a fixed working time of eight (8) business hours a day, five (5) days a week, Monday through Friday or during business hours of clinic operations.
14. Maritime Industry Authority (MARINA) – the agency of the Philippine government responsible for integrating the development, promotion and regulation of the maritime industry in the Philippines.
15. Overseas Filipino Worker (OFW) or migrant worker – a person who is to be engaged, is engaged, or has been engaged in a remunerated activity in a state of which he or she is not a citizen or on board a vessel navigating the foreign seas other than a government ship used for military or non-commercial purposes, or on an installation located offshore or on the high seas. A person to be engaged in a remunerated activity refers to an applicant worker who has been promised or assured employment overseas.
16. Part Time – refers to personnel who typically work fewer hours in a day or during a work week than full-time employees. They serve continuously but part-time in order to fulfill a high function that does not require their continuous presence. Examples are, but not limited to, specialist physicians in pathology, radiology and others.
17. Pre-Employment Medical Examination (PEME) – DOH standard medical examination that is conducted prior to deployment on an applicant to determine whether he/she is physically and mentally fit to work. It applies to both land based overseas work applicants and seafarers for domestic/overseas employment.
18. Peer Review Committee – a committee created by the Secretary of Health to review and decide contested PEME results.
19. Philippine Overseas Employment Administration (POEA) – the agency responsible for the issuance of the Overseas Employment Certificate (OEC) which serves as the worker’s travel exit clearance at the airport and immigration counters.
20. Principal – an employer or foreign placement agency hiring or engaging Filipino workers for overseas employment through a licensed private recruitment/manning agency.
21. Quality Standard System (QSS) – refers to documented policies, procedures and instructions in accordance with international standards that are related to quality management system and designed to help organizations ensure that they meet the needs of customers and other stakeholders while meeting statutory and regulatory requirements related to health facilities and services as certified by a DOH recognized certifying entity.
22. Repatriation – the return of an OFW, dead or alive, from a job site overseas, the reasons for which range from completion of employment, labor conflicts, medical causes, psychosocial problems, wars, restrictive immigration policies and others.
23. Standards for Training, Certification and Watchkeeping (STCW) – the International Convention that prescribes the minimum standards relating to training, certification and watchkeeping for seafarers.

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## V. IMPLEMENTING MECHANISMS

### A. GENERAL GUIDELINES

1. The Department of Health shall regulate the activities and operations of all clinics which conduct medical, physical, optical, dental, psychological and other similar examinations, hereinafter referred to as health examinations, on Filipino migrant workers as a requirement for their overseas employment. All PEME for overseas work applicants shall be performed only in DOH accredited medical clinics and health facilities utilizing the standards set forth by DOH. Pursuant to this, DOH shall ensure that:
  - a. The scope of medical examination shall be in accordance with the standards set by DOH through BHFS.
  - b. The fees for the health examinations are regulated, regularly monitored and duly published to ensure that the said fees are reasonable and not exorbitant. The DOH shall set a minimum and maximum range of fees for the different examinations to be conducted, based on a thorough and periodic review of the cost of health examinations and after consultation with concerned stakeholders. The fees shall be reasonable enough to cover the cost of services rendered.
  - c. No group or groups of medical clinics shall have a monopoly of exclusively conducting health examinations on migrant workers for certain receiving countries.
  - d. Every Filipino migrant worker shall have the freedom to choose any of DOH accredited or DOH operated clinics that will conduct his/her health examinations and that his/her rights as a patient is respected, except when the migrant worker is a seafarer whose cost of medical examination is shouldered by the principal/shipowner.
  - e. The decking practice, which requires overseas Filipino workers to go first to an office for registration and then farmed out to a medical clinic located elsewhere, shall not be allowed. All clinics are enjoined to strictly observe the provisions of Administrative Order No. 2011-0015, as amended by A.O. No. 2011-0015-A, known as "Guidelines on the Prohibition of Referral/ Decking Practice of OFW Clinics and Respecting the Right of OFWs to Choose Their Own OFW Clinics for Medical Examinations Pursuant to Republic Act 10022".
2. All clinics shall have a valid QSS in place certified by a DOH recognized certifying entity.
3. All clinics, including DOH operated clinics, conducting health examinations for Filipino migrant workers shall observe the same standard operating procedures and shall comply with internationally accepted standards in their operations.
4. The Bureau of Health Facilities and Services shall closely coordinate with DFA in strengthening diplomatic relations with other countries and in pushing for the rights and health interests of Filipino migrant workers through massive information dissemination of DOH regulatory policies and standards of health for the Filipino people.
5. Stakeholders shall comply with the standards and requirements prescribed in the assessment tool for accreditation of medical facilities for overseas workers and

seafarers posted at DOH website [www.doh.gov.ph](http://www.doh.gov.ph), this Order and its Annexes, other related policy guidelines and/or issuances.

## **B. SPECIFIC GUIDELINES**

### **1. Classification of Medical Facilities for Overseas Workers and Seafarers**

- a. Regular – conducts PEME for land based overseas work applicants and seafarers for domestic/overseas employment.
- b. Special – divided into two (2) types:
  1. Seafarer’s Medical Facility – conducts PEME exclusively for seafarers for domestic/overseas employment.
  2. Land Based Medical Facility – conducts PEME exclusively for land based work applicants.

### **2. Standards**

Every clinic shall be organized to provide quality, effective and efficient PEME services for overseas work applicants.

#### **a. Personnel**

Every clinic shall have an adequate number of qualified, trained and competent staff depending on the workload and the services being provided to ensure efficient and effective delivery of PEME services.

1. All clinical, technical and support staff shall be physically present during hours of clinic operations.
2. The following are the minimum personnel required on a full time basis.
  - a. Staff from clinical services shall be composed of, but are not limited to, the following:
    1. Head or Medical Director of the facility  
Every clinic shall have a medical director who is a duly licensed physician of the Professional Regulation Commission (PRC) and who shall oversee the overall medical operations of the clinic.
    2. Examining Physician(s)  
An examining physician shall be duly licensed by PRC.
    3. Registered Nurse  
A nurse, duly licensed by PRC, shall assist the examining physician in the following, but not limited to: taking the medical history, weight, height and vital signs of the applicant, taking the cardiogram and conducting pre- and post-HIV test counseling.
    4. Psychologist(s)  
A psychologist shall comply with R.A. No. 10029, “Philippine Psychology Act of 2009” and DOH standards and requirements.
    5. Psychometrician(s)  
A psychometrician shall comply with R.A. No. 10029, “Philippine Psychology Act of 2009” and DOH standards and requirements.
    6. Audiometrician(s)  
An audiometrician shall have a training certification from a competent training provider, authority or professional organization.

7. Dentist(s)  
A dentist shall be duly licensed by PRC.
- b. Staff from ancillary services shall be composed of, but are not limited to, the following:
  1. Pathologist  
The clinical laboratory shall be headed by a pathologist duly licensed by PRC and certified by the Specialty Board of the Philippine Society of Pathologists. Whenever the head of the clinical laboratory is working on a part-time basis, he/she shall visit the clinic at least once a week. The visit shall have to be documented.
  2. Medical Technologist(s)  
A medical technologist shall be duly licensed by PRC. There shall be at least one (1) medical technologist with a valid certificate of Human Immunodeficiency Virus (HIV) proficiency.
  3. Radiologist  
The imaging facility shall be headed by a radiologist duly licensed by PRC and certified by the Specialty Board of the Philippine College of Radiology. Whenever the head of the imaging facility is working on a part-time basis, he/she shall visit the clinic at least once a week. The visit shall have to be documented.
  4. X-ray technologist(s)  
The x-ray technologist shall be duly licensed by PRC.
- c. Staff from administrative/support services shall be composed of, but are not limited to, the following:
  1. Administrative Officer (AO)  
An AO, not necessarily a physician, shall be responsible in managing the overall administrative areas of the clinic and its operations.
  2. Quality Management Representative (QMR)  
A QMR shall initiate, support and implement quality assessment and performance improvement activities in accordance with the quality policy and objectives of the clinic.

**b. Physical Facilities**

Every clinic shall have physical facilities with adequate areas to ensure the safety of staff and its clients.

1. All clinics shall conform to applicable local and national regulations for the construction, renovation, maintenance and repair of the facility.
2. All clinics shall conform to the required space as prescribed by DOH.
3. All clinics shall have an approved DOH-PTC in accordance with the planning guidelines prepared by DOH through BHFS posted at DOH website [www.doh.gov.ph](http://www.doh.gov.ph). (**Annex A** – Planning and Design Guidelines for Medical Facilities for Overseas Workers and Seafarers) The floor plan of the entire facility shall be signed and sealed by a licensed architect and/or engineer and shall contain the following areas listed below (**Annex B** – Proposed Reference Plan of Medical Facilities for Overseas Workers and Seafarers).
  - a. General Administrative Service shall be composed of the following rooms/areas:

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1. Office of the Medical Director;
  2. Reception and registration office (or Business Office) with clients' waiting area;
  3. A reporting section or medical records room.
- b. Clinical Service shall be composed of the following rooms/areas:
1. Medical/physical examination rooms;  
The clinic shall provide separate examination rooms for male and female clients.
  2. Dental clinic;
  3. Optical room/area;
  4. Audiometry room;
  5. Psychological testing room;  
The testing room shall be capable of accommodating a minimum of at least six (6) persons at any given time.
  6. Pre- and Post-test HIV counseling room  
The clinic need not provide a separate HIV counseling room. Consultation/follow-up room(s) may be used for this purpose.
- c. Ancillary Service shall be composed of, but are not limited to, the following rooms/areas:
1. At least a secondary general clinical laboratory that has capability for HIV testing with the following rooms/areas:
    - a. A room/area for taking blood samples or specimen collection room/area;
    - b. Clinical working area with sink(s);
    - c. A pathologist's area (for the head of the clinical laboratory);
    - d. Access to toilet facility;
    - e. Waiting/reception area may be shared with other services.
  2. A radiologic facility comprised of the following rooms/areas:
    - a. X-ray room with control booth and dressing area;
    - b. Area for x-ray equipment;
    - c. Radiologist's area (for the head of the imaging facility);
    - d. Access to toilet facility;
    - e. Waiting/reception area may be shared with other services.
  - d. Support Service shall include the following rooms/areas:
    1. Toilet facilities (separate for male and female);
    2. Staff pantry or break room;
    3. Supply storage room;
    4. Waste holding room/closet/area;
    5. Janitor's closet.

**c. Equipment/Instruments and Supplies**

Every clinic shall provide adequate materials, supplies and equipment at all times.

1. There shall be an adequate number of operational equipment to provide the procedures within the facility.
2. There shall be a calibration, preventive maintenance and repair program for equipment in the facility.
3. There shall be a contingency plan in case of equipment breakdown and malfunction.
4. There shall be an adequate supply of properly stored and inventoried reagents and supplies for the examinations to be provided.

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#### **d. Service Delivery**

Every clinic shall ensure that the services delivered to overseas work applicants comply with the standard quality embodied in the Assessment Tool for accreditation of OFW clinics, other policy guidelines and/or related issuances.

1. All clinics shall have Manual of Operations.
2. All clinics shall have documented Standard Operating Procedures (SOP) for the provision of PEME services.
3. All clinics shall have documented technical policies and procedures for each activity of PEME that will ensure the quality of PEME results.

#### **e. Information Management**

Every clinic shall maintain a system of communication, recording and reporting of results of examinations to DOH.

1. Establishment of a Shared Government Information System for Migration
  - a. The DOH shall procure, establish and maintain an electronic uploading system, in accordance with the provisions of R.A. No. 9184 known as "The Government Procurement Reform Act" and other related laws, rules and regulations for the submission of data of all clinics which shall submit a summary of the medical and psychological examinations to BHFS following the format specified below.
  - b. The DOH shall make available to itself the information contained in existing data bases/files. There shall be linking of computer facilities in order to allow free-flow data exchanges and sharing among concerned agencies.
2. Collection and Aggregation of Data
  - a. There shall be relevant, accurate, qualitative and quantitative data for the timely and efficient delivery of PEME services.
    1. All clinics shall ensure prompt results of PEME within seventy two (72) hours from the time of examination.
    2. All clinics shall submit data/information as may be required by DOH through BHFS for purposes of research, standards setting, improving access to quality PEME services and others.
  - b. There shall be policies and procedures for the reporting of PEME results to DOH.
    1. All clinics shall follow the template of the Certificate of PEME posted at DOH website [www.doh.gov.ph](http://www.doh.gov.ph).
      - a. DOH PEME Certificate for Land Based Workers (**Annex C**)
      - b. DOH PEME Certificate for Seafarers (**Annex D**)
    2. All clinics shall submit reports to BHFS on a monthly basis in accordance with the statistical report formats posted at DOH website [www.doh.gov.ph](http://www.doh.gov.ph).
      - a. Statistical Report on PEME (**Annex E**)
      - b. Statistical Report on Selected Laboratory Tests (**Annex F**)
      - c. Statistical Report on Psychological Assessment (**Annex G**)
      - d. Cases of Repatriation (**Annex H**)

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3. All clinics shall follow the format of reporting HIV test results as indicated in HIV Screening Test Certificate (**Annex I**) posted at DOH website [www.doh.gov.ph](http://www.doh.gov.ph)
  4. All reports to be submitted to DOH shall be automated/computerized.
  - c. All clinics shall maintain logbooks following the format posted at DOH website [www.doh.gov.ph](http://www.doh.gov.ph)
    1. Master Logbook, duly registered and stamped by BHFS (**Annex J**);
    2. Preventive and Corrective Maintenance of Equipment (Refer to Annex I of A.O. No. 2012 – 0012);
    3. Maintenance and Monitoring of Physical Facility (Refer to Annex J of A.O. No. 2012 – 0012).
3. Records Management
- a. All original PEME reports/certificates shall bear the name and the signature of the authorized examining physician and medical director. They shall be accountable for the reliability of the results. Electronic signatures shall be in accordance with the E-Commerce Law.
  - b. There shall be policies and procedures on access to and confidentiality of applicant's information. Likewise, the right of the applicant to obtain records of treatment and other relevant medical information shall be observed.
  - c. Retention and disposal of medical records and other relevant information whether paper-based or electronic media shall be in accordance with the standards promulgated by DOH or by competent authorities for such purposes.

### 3. Basic DOH PEME Package

- a. The basic DOH PEME package for overseas work applicants shall be in accordance with the standards and requirements set by DOH through BHFS (**Annex K**).
- b. The medical standards for seafarers shall be in accordance with the current "ILO/IMO Guidelines on the Medical Examinations of Seafarers" (**Annex L**).
- c. The Filipino migrant worker shall only be required to undergo health examinations when there is reasonable certainty as certified by the hiring recruitment/manning agency pursuant to POEA Rules and Regulations that he/she will be hired and deployed to the jobsite and only those health examinations which are absolutely necessary for the type of job applied for or those specifically required by the foreign employer shall be conducted.
- d. Any foreign employer who does not honor the results of valid health examinations conducted by a DOH accredited or DOH operated clinic shall be temporarily disqualified from participating in the overseas employment program, pursuant to POEA Rules and Regulations. The temporary disqualification of the employer may be lifted only upon the latter's unqualified acceptance of the result of the examination.
- e. The applicant shall pay directly to DOH accredited medical clinic where PEME is to be conducted except in the case of a seafarer whose medical examination cost is shouldered by the principal/shipowner.

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#### **4. Validity of PEME**

- a. A fit to work PEME certificate shall be valid only for ninety (90) days from the date of fitness or less as may be required by the host country/employer prior to deployment. If for any reason the applicant is not deployed within ninety (90) days after the date of fitness, the applicant shall be required to undergo a complete basic DOH PEME.
- b. For a land based overseas work applicant, a PEME is required for every contract.
- c. For a seafarer applicant, a fit for duty PEME certificate shall be valid for a maximum period of two (2) years, on condition that the applicant is deployed within ninety (90) days from the date of fitness. Exception applies in the following cases:
  1. Examinee is below 18 years old in which case the maximum period of validity shall be one (1) year;
  2. Examinee has limitations due to health reasons.

#### **5. Repatriation**

- a. In case an OFW is found to be not medically fit within fifteen (15) days upon his/her arrival in the country of destination, the medical clinic or health facility that conducted the health examination(s) of such OFW shall pay his/her repatriation back to the Philippines and the cost of deployment of such worker.
- b. Any DOH accredited clinic which violates any provisions under Section 16 of R.A. No. 10022 shall, in addition to any other liability it may have incurred, suffer the penalty of revocation of its DOH accreditation, if after investigation, the medical reason for repatriation could have been detected at the time of examination using DOH PEME package as required by the principal or the receiving country.
- c. Procedural Guidelines on Repatriation
  1. The repatriated OFW shall report to BHFS within fifteen (15) days upon arrival in the Philippines with the following documents:
    - a. Passport (exit visa);
    - b. Boarding pass;
    - c. Medical certificate (with English translation) detailing the cause of repatriation;
    - d. Pertinent documents the repatriated worker may have in his/her possession.
  2. The BHFS shall refer the repatriated worker to the Peer Review Committee for evaluation.

#### **6. Peer Review Committee**

There shall be a mechanism for appealing and handling cases of unfitness.

- a. A Peer Review Committee shall be created by the Secretary of Health based on the recommendations of BHFS and in response to appeals made by applicants declared unfit for overseas work by medical examiners.
- b. Whenever the result of medical examination is contested by an applicant, recruitment/manning agency, company or other interested party, BHFS may be assisted by experts in the medical and/or allied medical specialties to

review the results. Hospitals identified by DOH shall create a Peer Review Committee(s) in the different fields of specialization (**Annex M** – Department Order No. 185-N s. 1996).

- c. The Committee shall be comprised of, but is not limited to, the following:
  1. Chairperson – Head of Medical/Surgical Department
  2. Medical Examiner(s)/Examining Physician(s) from hospitals and/or clinics:
    - a. A physician from a selected government specialty center;
    - b. A board certified specialist in the area of the case under evaluation.
- d. The expert opinion and/or recommendations of the Peer Review Committee shall be officially transmitted to the Director of BHFS.
- e. The decision of the Peer Review Committee shall be final.

## **VI. ROLES AND RESPONSIBILITIES**

Pursuant to Section 16 of R.A. No. 10022, the subsequent agencies shall have, but not limited to, the following roles and responsibilities:

### **A. DOH – BHFS**

1. Issues the COA of all DOH accredited medical clinics and renews the same upon full compliance to standards and requirements stipulated in the Assessment Tool for Accreditation of Medical Facilities for Overseas Workers and Seafarers.
2. Suspends or revokes the COA of DOH accredited medical clinics.
3. Conducts fact-finding investigations prior to resolution of cases.
4. Refers cases involving violations committed by the medical clinic to the concerned government agency, as the case may be, for their appropriate action.

### **B. DOH Accredited Medical Clinics**

1. Conducts PEME on overseas work applicants upon full compliance to the standards and requirements stipulated in this Order and its Annexes.
2. Submits reports mentioned under Section V. B. 2. e. of this Order to BHFS for appropriate action.

### **C. POEA**

Acts on cases referred to it by DOH relative to deficiencies and violations of recruitment/manning agency based on the required health examinations in the basic DOH PEME package and in the country of destination.

### **D. DFA and POEA**

Acts on cases referred to it by DOH regarding foreign employers who do not honor the results of valid health examinations conducted by a DOH accredited or DOH operated clinic.

### **E. Civil Service Commission**

Acts on cases referred to it by DOH relative to nonfeasance and malfeasance of duties of DOH officials/employees under this Order.

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## F. Local Government Units (LGU)

In the fight against illegal recruitment, the LGU in partnership with POEA, other concerned government agencies and non-government organizations advocating the rights and welfare of overseas Filipino workers shall take a proactive stance by being primarily responsible for the dissemination of information to their constituents on all aspects of overseas employment.

## VII. PROCEDURAL GUIDELINES

### A. APPLICATION FOR COA

1. The medical clinic can download the prescribed application form for accreditation at DOH website [www.doh.gov.ph](http://www.doh.gov.ph).
2. The duly accomplished form together with the necessary attachments shall be submitted to BHFS.
3. The medical clinic shall pay a non-refundable application fee upon submission of the accomplished form and other documentary requirements.
4. Every clinic shall comply with the guidelines stipulated in AO No. 2008 – 0027 “One-Stop Shop System for the Regulation of ... Medical Facilities for Overseas Workers and Seafarers ... with Ancillary Services”, its related issuances and this Order.
5. Status of COA
  - a. Initial
    1. A clinic applying for COA shall pay a one-time cash bond of 100,000.00 pesos which shall be refunded, subject to clearance from BHFS, once the clinic terminates its operations.
    2. A clinic shall have a valid QSS certification within six (6) months from the date of issuance of the COA. Otherwise, the COA shall be revoked.
  - b. Renewal
    1. Renewal of COA of a clinic shall be filed within ninety (90) days before its expiration.
    2. All clinics shall have a valid QSS certification prior to renewal of its COA.
    3. The COA of a clinic shall be automatically cancelled upon failure to submit a duly accomplished application and failure to pay the proper fee on or before the expiration of its accreditation. The clinic shall immediately cease its operations and apply for a new COA.

### B. APPLICATION FOR DOH-PTC, CONDUCT OF INSPECTION AND MONITORING

The conduct of Application for DOH-PTC, Inspection and Monitoring activities shall be in accordance with the procedural guidelines stated in A.O. No. 2008 – 0027 entitled “One-Stop Shop System for the Regulation of Medical Facilities for Overseas Workers and Seafarers...With Ancillary Services” and A.O. No. 2012 – 0012 known as “Rules and Regulations Governing the New Classification of Hospitals and Other Health Facilities in the Philippines”.

## VIII. SCHEDULE OF FEES

- A. Fees on health examinations shall be posted at conspicuous areas in all clinics. The cost of the basic DOH PEME package shall be displayed at the reception area using, at a minimum, a tarpaulin not less than two (2) feet by three (3) feet in dimension and legible enough at a distance of twenty (20) feet. The cost of other health examination packages shall be shown in a similar manner.
- B. All fees shall comply with A.O. No. 2008 – 0028 known as “Schedule of Fees for the One-Stop Shop System for the Regulation of Medical Facilities for Overseas Workers and Seafarers ... with Ancillary Services”, its related issuances, this Order and its Annexes.

## IX. VALIDITY OF COA

The COA of a clinic shall be valid for three (3) years from January of the first year to December of the third year.

## X. TERMS AND CONDITIONS OF THE COA

- A. All clinics shall notify BHFS in writing within fifteen (15) days of any change in personnel, physical facility and provision of other relevant services that would affect the status of the clinic’s COA. All clinics shall attach in the notice the necessary credentials and contract of service of the new personnel.
- B. The COA of a clinic may be revoked, suspended or modified in full or in part for any false statement by the management and/or staff of the medical facility, or as shown by the record of inspection and/or monitoring activities or for a violation of, or failure to comply with any of the terms, conditions or provisions of these rules and regulations, its Annexes and related issuances.

## XI. INVESTIGATION OF CHARGES/COMPLAINTS

- A. Upon filing of charges or complaints by any individual, corporation, association or organization against any clinic or any of its personnel who has violated or is violating the provisions of laws and/or rules and regulations for the regulation of medical clinics and their ancillary facilities/services, BHFS shall investigate and verify whether the clinic concerned or any of its personnel is guilty of the charges or complaints.
- B. If, upon investigation and hearing, the clinic concerned or any of its personnel is found violating the provisions of existing laws and/or rules and regulations for the regulation of medical clinics and their ancillary facilities/services, the Director of BHFS shall impose the corresponding sanctions, *provided that*, if any of the personnel of government health facilities are involved, they shall be subject to appropriate disciplinary/administrative action in accordance with Civil Service rules, *provided further that*, if any of the involved personnel of clinics are professionals subject to the Professional Regulation Commission, then the report finding that said personnel are guilty shall be considered as a formal complaint against them and shall be immediately filed with their respective Professional Regulatory Boards. These actions are without prejudice to taking the case to judicial authorities for appropriate action.

- C. The BHFS may ask the assistance of the Food and Drug Administration in the conduct of the investigation, if the charge or complaint involves ancillary facilities such as pharmacy and/or x-ray facility. It shall provide a copy of the investigation report to the Bureau(s) concerned.

## **XII. VIOLATION**

Stakeholders found violating any provision of these guidelines and its related issuances, including failure of an OFW clinic to honor the decision of the Peer Group Review Committee and/or commission/omission of acts by personnel operating the health facility under this Order shall constitute a violation and shall be penalized and/or its COA suspended or revoked.

## **XIII. PENALTY**

- A. The following are the penalties to be imposed on clinics regardless of the nature of the offense, except cases of repatriation, for any violation committed/omitted under this Order and its Annexes, other related and/or future issuances by DOH.
1. First offense – fifty thousand pesos (Php 50,000.00);  
In case of repatriation, the penalty shall be revocation of COA.
  2. Second offense – suspension of COA and/or fine of one hundred thousand pesos (Php 100,000.00);
  3. Third offense – Revocation of COA.
- B. Preventive Suspension
1. If upon inspection or monitoring visits the OFW clinic is found to be violating the standards or existing rules and regulations or committed prohibited acts stipulated in this Order and its Annexes, BHFS may immediately preventively suspend the operation of the said OFW clinic for not more than sixty (60) days.
  2. An OFW clinic may also be placed under preventive suspension upon filing of a complaint for violation of the provisions of Section 16 of R.A. No. 10022 of the Migrant Workers' Act, as amended.
  3. An OFW clinic shall cease its operation and shall not accept any client for medical examination during the period of preventive suspension. Any violation of the preventive suspension shall be a ground for the revocation of COA of an OFW clinic.

## **XIV. APPEAL**

- A. Any clinic that has been denied a COA or whose COA has been suspended or revoked, after having filed a Motion for Reconsideration with BHFS, may elevate the case to the Office of the Secretary who shall now refer the same to the appropriate Bureau for review and recommendation. These Offices may request for further clarifications and documents or even request for Memoranda to be submitted by the party concerned. In any case, the Bureau concerned shall accordingly submit its findings and recommendations to the Office of the Secretary for decision.
- B. The decision of the Office of the Health Secretary shall be final and executory.

## **XV. TRANSITORY PROVISION**

All DOH accredited medical clinics shall be given only up to June 30, 2014 to attain full compliance with the rules and regulations set forth in this Order and its Annexes.

**XVI. REPEALING CLAUSE**


All Administrative Orders, Circulars, Rules and Regulations inconsistent with this Order shall be deemed impliedly or expressly amended or revoked.

**XVII. SEPARABILITY CLAUSE**

In the event that any provision or part of this Order is declared unauthorized or rendered invalid by any court of law or competent authority, those provisions not affected by such declaration shall remain valid and in force.

**XVIII. EFFECTIVITY**

This Order shall take effect fifteen (15) days after its approval and publication in a newspaper of general circulation.

  
**ENRIQUE T. ONA, M.D.**  
Secretary of Health

*moe/cav*