



Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

January 8, 2021

DEPARTMENT CIRCULAR

No. 2021- 0006

FOR : ALL DOH CENTER FOR HEALTH DEVELOPMENT REGIONAL DIRECTORS, HEALTH FACILITIES AND SERVICES REGULATORY BUREAU (HFSRB) DIVISION CHIEFS, REGULATORY LICENSING AND ENFORCEMENT DIVISION (RLED) CHIEFS, HFSRB AND RLED REGULATORY OFFICERS, CHIEFS OF HOSPITALS AND HOSPITAL MEDICAL DIRECTORS, HEADS/MEDICAL DIRECTORS OF OTHER HEALTH FACILITIES

SUBJECT : Guidelines in the Conduct of Virtual Inspection for the Initial Licensing of Health Facilities

With the current COVID 19 pandemic, access to public transportation became limited and the Local Government Units' imposed restrictions in their borders turn out to be a burden in carrying out onsite inspection visits. There is a need to explore an alternative means to facilitate the inspection of health facilities in the different parts of the country to ensure public health safety.

Attendance to the Development Academy of the Philippines workshop entitled "Designing Citizens-centered Public Service Improvement" served as a catalyst to the possibility of doing virtual inspection. Thus, in November 2020, test runs were conducted by HFSRB. It proved that virtual inspection is feasible, safer, reliable, and more economical, and can be useful as an alternative to being physically present in the facilities. Henceforth, to continuously serve the clients and meet the timelines indicated in the citizen's charter, the virtual inspection shall be utilized as an alternative in the conduct of inspection to reduce possible risk of infection to regulatory officers, provided that the internet connection in the area is stable and there are no other constraints in the use of virtual inspection.

The following guidelines shall serve as a reference to harmonize the conduct of virtual inspection:

A. Coverage:

The virtual inspection may be conducted for initial applications of all types of health facilities **except** for hospitals, kidney transplantation facilities, human stem cell and cell-based or cellular therapy facilities, and medical facilities for overseas workers and seafarers. Initial applications include newly established facility, transfer of site, and those applying for changes in their licenses/accreditations such as, but not limited to, increase of stations or beds, change of ownership, and additional services or add-ons.

B. Virtual Inspection Process

The conduct of virtual inspection shall be in accordance with the following procedures:

1. Pre-Inspection process

- a. The inspection team shall inform the applicant, through the email address reflected in the application form, of the date of the inspection and shall be asked to submit the required documents based on the corresponding assessment tool of the type of facility being applied for, such as standard operating procedures, qualification of personnel like Professional Regulation Commission licenses and training certificates, memorandum of agreements with outsourced services, photos or walk through video of the facility (to determine readiness of the facility), water analysis reports, and other pertinent documents.
- b. The assigned inspection team shall review the documents sent by the health facility and shall be validated during the inspection. The team creates a Zoom, Google Meet, WebEx, or any online meeting application and send the invitation link to the applicant. The facility shall also be asked to prepare a mobile device for the walk through of the facility and a measuring tape/device for verification of physical spaces.
- c. Assessment tool and a copy of the Permit to Construct with the approved floor plan must be on-hand to validate whether the physical plant was complied with and to serve as a reference during the walk through of the facility.

2. Inspection proper

- a. Opening conference shall include introduction of inspection team and the licensee team, purpose and scope of the inspection, and the manner or flow of the inspection. The applicant shall be informed that the inspection will be recorded for future review and reference
- b. The walk through of the facility shall start at the façade to show the signboard bearing the name of the facility, road access, proof of location if possible and the accessibility ramp (if applicable)
- c. Exit conference shall include summary of findings and feedback from the facility such as comments, problems encountered, and experience with virtual inspection for process improvement
- d. The inspection team shall create a group chat room (viber/messenger) to include the key personnel of the facility during the exit conference for any clarifications on the noted deficiencies, and for easy and faster follow-ups.

3. Post-Inspection process

- a. A written report of the findings shall be sent to the applicant within 24 hours of the inspection. Compliance period shall be thirty days.
- b. The following documents shall be consolidated to a single electronic folder labeled with the name of the health facility
 - Submitted application of HF and a copy of the application fee official receipt

- All documents submitted by the health facility
- Report of findings, scanned inspector's assessment tool with signatures, and submitted compliance
- Copy of the recorded inspection
- Scanned copy of the inspection teams recommending approval (or HFSRB compliance evaluation sheet)
- E-copy of the LTO/COA

c. All records shall be filed/saved in a USB flash drive or an external drive for ISO QMS quality audit and for future reference

For the information and guidance of all concern.

By Authority of the Secretary of Health:

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