



Republic of the Philippines  
Department of Health  
**HEALTH FACILITIES AND SERVICES REGULATORY BUREAU**

**APPLICATION FOR 2022 DOH HOSPITAL STAR AWARDS for QUALITY PERFORMANCE**

Name of Hospital:		Contact Person:	
Level:		Contact No.:	
Address:		Email Address:	

**GUIDELINES FOR APPLICATION**

1. Pre-qualification for the DOH Hospital Star Awards shall be based on six categories. Under each category are listed the criteria that a hospital must meet. Hospitals interested to join the awarding shall submit their application to their respective regional health office or specifically, the **Regulatory, Licensing, and Enforcement Division** of the Center for Health Development Office.
2. Applicants shall list their current/ongoing programs, activities, initiatives/innovations for each criteria. Give short description and enumerate the activities and status of the program. Please follow the given format below. Submit the application in a PowerPoint Presentation Format (.ppt) and store it in a CD and flash drive as back up. (Please see format below). Limit the presentation to thirty (30) slides only with font size not less than 18. Make sure that the file can be opened before submitting the application.
3. Deadline for submission of application will be on **June 30, 2022**.
4. Hospitals that qualify for the star awards will be notified through the contact number/email address provided in the application and shall be informed of the date of hospital visit of the assessors to validate the listed programs and activities. Schedule of the hospital visits will start on the 2nd week of July and ends on the 31<sup>st</sup> of July.
5. Awardees will be notified in August, 2022 and shall be invited to the Awarding Ceremony in September, 2022.
6. Incentives for the awardees will be announced soon.

**CRITERIA**

**1. Safety and Infection Control:**

- a) Risk assessment and management programs
- b) Recording, evaluation and corrective action of adverse/sentinel events
- c) Comprehensive Infection control program
- d) Equipment efficacy and reliability
- e) Tangible measurements of safety programs
- f) Building inspection, maintenance and upkeep
- g) Waste Management and Reduction Program

**2. Service Provision:**

- a) Approved clinical practice guidelines for each department
- b) Improved patient experience
- c) Implements public health programs
- d) Practices anti-microbial resistance stewardship
- e) Clear demonstration of where a positive outcome or improvement in patient care has been achieved
- f) Multi-specialty case and clinic-pathological conference
- g) Monitoring of Turn Around Time
- h) Innovative Technology in medicine

**3. Customer and Employees Satisfaction:**

- a) Documents complaints and action taken
- b) Follows patient centric approach. Evaluation of patient experience and demonstrate improvements
- c) Evaluates of employees satisfaction
- d) Provides human resource development training program
- e) Analyses of turnover of employees and addresses them

**4. Community-based activities:**

- a) Defined and implemented Corporate Social Responsibility Program
- b) Preventive and curative projects in the community. It must include measurable outcomes. Examples- HIV/AIDS, CANCER, TB awareness/ prevention camps, "operation cataract", etc.
- c) Undertakes "Green" initiatives to preserve natural resources
- d) Regular and sustained mass voluntary blood donation activities

- e) Uploading of prices of services, accommodation and professional fees of hospitals to Health Facilities Price Advisory App
- f) Implements RA 10932 or "The Anti-Hospital Deposit Law"
- g) Implements RA 9439 or "An Act Prohibiting the Detention of Patients in Hospitals and Medical Clinics on Grounds of Non-payment of Hospital Bills or Medical Expenses"
- h) For private hospital, allots 10% of its ABC to charity patients while for government hospital, 90% of their ABC

- c) Documented program for reducing mortality/morbidity case rate, caesarian case rate and others
- d) Innovative programs/projects improving preventive or curative process

**6. Coping up with the COVID -19 pandemic:**

- a) Programs/Plans to prevent the spread of COVID 19 infection in the hospital
- b) Establishment of referral system during full bed capacity and engagement with LGUs
- c) Compliance to the required bed allocation for COVID 19 patients
- d) Contingency plan to manage shortage of personnel caused by COVID 19 infection

**5. Quality Improvements:**

- a) Studies, researches, or projects that aim to improve service and patient outcomes
- b) Formal and collaborative evaluation of care using analysis of process and outcome data

**FORMAT**

For the PowerPoint Presentation:

For the CD Cover:



Color coding:

