BOARD REGULATION NO. 4
Series of 2003

SUBJECT: IMPLEMENTING RULES AND REGULATIONS GOVERNING ACCREDITATION OF DRUG ABUSE TREATMENT AND REHABILITATION CENTERS AND ACCREDITATION OF CENTER PERSONNEL

Section 1: Scope

These implementing rules and regulations shall apply to all Drug Abuse Treatment and Rehabilitation Centers in the Philippines and its personnel.

Section 2: Authority:

These rules and regulations are issued to implement the provisions of Republic Act 9165: “Comprehensive Dangerous Drugs Act of 2002” consistent with Executive Order 102, s. 1999: “Redirecting the Functions and Operations of the Department of Health”.

Section 3: Regulatory Agency

The Department of Health through the Bureau of Health Facilities and Services shall exercise the regulatory function.

Section 4: Definition of Terms

Accreditation – a formal authorization issued by the DOH to an individual, partnership, corporation or association in compliance with all licensing requirements (input/structural standards) and accreditation requirements (process standards and outcome/output/impact standards) as prescribed in the Manual of Operations for Treatment and Rehabilitation Centers.

BHFS – refers to the Bureau of Health Facilities and Services

Bureau Director – refers to the director of the Bureau of Health Facilities and Services.
CHD – refers to the Center for Health Development, which is the DOH Regional Field Office.

Center – any of the treatment and rehabilitation centers which undertake treatment, aftercare and follow up treatment of drug dependents. It includes institutions, agencies and the like whose purposes are: the development of skills, arts and technical know-how, counseling and/or inculcating civic, social and moral values to drug dependent patients, with the aim of weaning them away from dangerous drugs and keeping them drug-free, adapted to their families and peers and readjusted into the community as law abiding, useful and productive citizens.

DOH – refers to the Department of Health

DOH Accredited Physician – a physician with background experience on psychological/behavioral medicine whose application has been approved and duly authorized by the DOH to conduct dependency examination and treatment on persons believed to be using dangerous drugs.

Drug Dependent – a person suffering from drug dependence.

Drug Dependence - a cluster of physiological, behavioral and cognitive phenomena of variable intensity, in which the use of psychoactive drug takes on a high priority thereby involving among others, a strong desire or a sense of compulsion to take the substance and the difficulties in controlling substance taking behavior in terms of its onset, termination or levels of use.

Non-Professional Center Personnel – graduate of less than four (4) year course, high school or elementary.

Procedure Manual – a written document giving detailed steps to be followed when undertaking a particular task.

Professional Center Personnel – a board certified or graduate of a four (4) year course.

Rehabilitation – a dynamic process including aftercare and follow-up treatment directed towards the physical, emotional/psychological, vocational, social and spiritual change of a drug dependent to enable him/her to live without dangerous drugs, enjoy the fullest life compatible with his capabilities and potentials and render him/her able to become a law abiding and productive member of the community.

Treatment - medical service rendered to a patient for the effective management of physical and mental conditions arising from an individual’s drug abuse.
**Service Patient**- one who cannot afford or partially afford to pay the treatment and rehabilitation services of the Center based on income or paying capacity.

**Section 5: Classification of Treatment and Rehabilitation Centers for Drug Dependents**

The Centers shall be classified as follows:

1. **Ownership**
   1.1 Government – operated and maintained partially or wholly by the national, provincial, city or municipal government, or any other government agency.
   1.2 Private – privately owned, established and operated with funds through donation, principal, investment or other means, by any individual, corporation, association or organization.

2. **Institutional Character**
   2.1 Institution-based – a Center that operates within any institution.
   2.2 Free-standing – a Center that operates separately from any other institution.

3. **Service Capability**
   3.1 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 maybe a drop-in/walk-in Center or any other office/facility used by support groups that provide consultation or counseling. From time to time, it may provide temporary shelter for patients in crisis for not more than twenty four (24) hours.
   3.2 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.

**Section 6: Technical Requirements for Accreditation**

For a Center to be accredited, it shall comply with the following technical requirements: (refer to Annex A)

1. Service Capability – services provided in accordance to its physical plant, personnel and equipment.
2. Personnel – minimum staffing of qualified and trained health and health related professionals and non-professionals.

3. Equipment/Instruments – minimum tools to perform the required services.

4. Physical Plant – well ventilated, lighted, clean, and safe with adequate water supply and functional structures sufficient to accommodate the activities.

5. Procedural Manual – document describing the administrative as well technical policies and procedures of the Center. It must contain among others the background of the Center, admission and exclusion criteria, description of services offered, treatment modality, major policies, disciplinary measures, source of funds, aftercare/referral. The Procedure Manual must be fully disseminated and implemented.

6. Personnel Management – the Center must have a sound system of recruitment, selection and appointment of personnel to ensure that staff is competent and qualified to perform the services.

7. Financial Management – the Center shall have a sound plan of financing which gives assurance of sufficient funds to enable it to carry out its defined purposes and provide appropriate services for drug dependents. The Center shall submit to DOH an Annual Financial Report.

8. Records Management – patient’s records must be complete and updated. Security and confidentiality must be maintained at all times. The Center shall ensure timely submission of Statistical Reports to the DOH.

9. Treatment and Rehabilitation Program and Services – each Center must have a program with a treatment modality that is scientifically based, acceptable to standard norms and does not cause harm to the patients and as such, will restore an individual’s physical, psychological and social capability.

10. Referral Services – after identifying accurately the problems of the patient, the Center must be able to send/refer him to an agency/professional that can provide appropriate services.

11. Training Program – to achieve an integrated, coordinated and comprehensive treatment and rehabilitation program, the Center shall require the technical staff to undergo periodic relevant trainings.
12. Program Evaluation – program evaluation shall be conducted by the Center at least once a year. Findings of the program evaluation shall be the basis for policy formulation, modification and program development.

13. Maintenance Program – the Center must have a preventive/corrective maintenance program for the physical plant as well as for its equipment and instruments.

14. Disciplinary Action/Measures - the Center must institute disciplinary measures that are appropriate and humane. There shall be written policies regarding disciplinary measures/sanction imposed by the Center. It shall be made available for review.

Section 7: **Allowable Service Fees:**

All private residential Centers shall allocate five (5) percent of the total beds for service patients. Government residential Centers must not exceed fifty (50) percent of the total bed allocation for paying patients. Discounted rates shall be based on the guidelines prescribed by the Department of Social Welfare and Development. Further, cost sharing in the treatment and rehabilitation of any dependent shall follow what is prescribed in Section 74 of the Implementing Rules and Regulations of Republic Act 9165, otherwise known as the “Comprehensive Dangerous Drugs Act of 2002”.

For a residential Center, service fees shall include fees for the recovery of board and lodging as well as materials and supplies.

Section 8: **Procedural Guidelines for Certificate of Accreditation**

I- Issuance of Permit to Construct- for residential Centers

The applicant shall secure a Permit to Construct from the BHFS for construction of a new facility, alteration, expansion or renovation of an existing health facility, change in classification or increase in bed capacity. It is a prerequisite for accreditation.

1. The applicant accomplishes the required documents and submits them to the CHD for endorsement to the BHFS. Upon filing of application, the applicant pays the corresponding fees to the Cashier of the DOH in person, or through postal money order.

   **Documentary requirements – Permit to Construct**

   1.1 Letter of application to the BHFS Director

   1.2 Letter of endorsement to the BHFS (if filed at the CHD)
1.3 Four (4) sets of Site Development Plan and Floor Plan signed and sealed by a licensed architect and/or engineer

1.4 Zoning Certificate or Location Clearance from the City/Municipality Planning and Development Office

1.5 DTI/SEC Registration (for private facilities) Enabling Act/Board Resolution (for government facilities)

2. The BHFS reviews the documents and approves/disapproves the issuance of Permit to Construct.

2.1 If approved, the BHFS issues a Permit to Construct to the applicant.

2.2 If disapproved, the BHFS returns the documents, together with their findings and recommendations to the applicant. Failure to comply within thirty (30) days shall be a ground for denial of application. Hence, the applicant has to re-file his application and pays the required fees.

II- Issuance of Certificate of Accreditation

Prior to the operation of a Center, it must secure a Certificate of Accreditation.

1. The applicant accomplishes the required documents and submits them to the BHFS or CHD for endorsement to the Bureau. Upon filing of application, the applicant pays the corresponding fees to the Cashier of the DOH in person or through postal money order.

Documentary requirements

1.1 BHFS Application Form filed either at the Bureau or CHD
1.2 Letter of endorsement to the Bureau Director if filed at the CHD
1.3 Permit to Construct
1.4 Mayor’s Permit
1.5 Building Permit
1.6 Fire Protection Permit
1.7 Health and Sanitation Permit
1.8 List of personnel including biodata
1.9 List of Equipment
1.10 Procedure Manual to include among others the schedule of the structured activities
1.11 Training Plan
2. The BHFS conducts on site survey to determine compliance with standards/technical requirements.

3. The BHFS approves/disapproves the issuance of Certificate of Accreditation.

3.1 If approved, the BHFS accredits the Center and issues an initial Certificate of Accreditation to the applicant upon deposit of twenty thousand pesos (20,000.00) cash bond.

3.2 If disapproved, the BHFS sends the findings and recommendations to the applicant. Failure to comply within fifteen (15) days shall be a ground for denial of the application. Hence, the applicant has to re-file his application and pay the required accreditation fees.

Section 9: Permit to Construct and Accreditation Fees

The following schedule of fees for initial and renewal of Certificate of Accreditation shall be paid to the Cashier of the DOH.

<table>
<thead>
<tr>
<th>Permit to Construct Fees</th>
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<tbody>
<tr>
<td>Non Residential Center</td>
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<tr>
<td>Residential Center</td>
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The initial Certificate of Accreditation of private Center shall be issued upon deposit of twenty thousand pesos (P20, 000.00) cash bond per Center.

Section 10: Content of Certificate of Accreditation

The Certificate of Accreditation shall state on its face the name of the owner or operator of the Center, the service capability, the period for which it is valid, and the location at which said services shall be provided. It shall be signed by the Bureau or CHD Director.

Section 11: Validity:

The Certificate of Accreditation shall be valid for a period of three (3) years.

Section 12: Renewal of Accreditation

1. Application for renewal of accreditation shall be filed ninety (90) days before the expiry date to the BHFS or CHD under whose jurisdiction the Center is located.
2. The following are the procedures for application for renewal of accreditation:

2.1 Applicant accomplishes the required documents and submits them to the BHFS or CHD. Upon filing of application, the applicant pays the corresponding fees for renewal to the Cashier of the DOH or CHD in person, or through postal money order.

Documentary Requirements - Certificate of Accreditation:

1. Application for Renewal of Accreditation
2. List of Personnel and training(s) attended
3. List of Equipment/Instrument
4. Annual Statistical Report for the past three (3) years
5. Annual Financial Report for the past three (3) years
6. Annual Program Evaluation Report

2.2 The BHFS or CHD conducts on site survey to determine compliance with standards.

2.3 The BHFS or CHD approves/disapproves the issuance of accreditation.

2.3.1 If approved, the BHFS or CHD issues an accreditation to the applicant.

2.3.2 If disapproved, the BHFS or CHD sends the findings and recommendations to the applicant for compliance. Failure to comply within fifteen (15) days shall be a ground for suspension/revocation of accreditation.

Section 13. Monitoring of Centers:

The BHFS shall require all Centers to submit monthly Statistical Reports to the Dangerous Drugs Board Secretariat for the drug information system. Further, all Centers shall submit Annual Statistical Reports to the BHFS.

The BHFS or CHD may conduct an on site monitoring of the accredited Center. The monitoring visits shall be conducted unannounced during regular office hours. BHFS monitoring team shall be allowed unrestricted ocular inspection of the Center, access to any case file or charts of patients, conduct random chart reviews and individual and/or group interviews with patients and/or employees of the Center.
Section 14. **Terms and Conditions of Accreditation:**

1. An accreditation shall be granted in accordance with prescribed accreditation requirements and on the basis of specific conditions and limitations established during the survey.
2. An accreditation that is not renewed at the expiry date shall be considered lapsed and registration shall be cancelled. A new application for registration and issuance of Certificate of Accreditation shall be required before a Center can be allowed to operate.
3. The BHFS shall be notified of any change in management, name or ownership. In cases of transfer of location, a new application for registration and accreditation is required.
4. Failure to report in writing within fifteen (15) days of any substantial change in the condition of the Center (e.g. changes in physical plant, equipment and personnel) may be a basis for the suspension or revocation of the accreditation.
5. A separate accreditation shall be required for all Centers maintained in separate premises but operated under the same management.
6. The Certificate of Accreditation shall be placed in an area readily seen by the public. A copy of the rules and regulations shall be readily available for guidance of all personnel of the Center.

Section 15. **Violations:**

Violations of the “Comprehensive Dangerous Drugs Act of 2002” or the rules and regulations issued in pursuance thereto include but not limited to the commission of the following acts:

1. Conviction of the owner or manager of the Center for any criminal offense committed as an incident to its operation.
2. Person who violates the confidentiality of records.
3. Failure to comply with the prescribed guidelines in the Manual of Operations for Treatment and Rehabilitation Centers.

Section 16. **Suspension or Revocation of Certificate of Accreditation:**

The BHFS on its own or based on complaint, investigate and after hearing, suspend or revoke the accreditation of a Center for such period and under such terms as may be necessary to protect the interest of the government and the public.

If upon survey or monitoring visits, the Center is found violating the rules and regulations as well as other violations stipulated under Section 15, the BHFS may immediately preventively suspend the operation of the said Center. Preventive suspension shall not be more than sixty (60) days.
Refusal of the Center to allow BHFS monitoring team to conduct a survey of the Center may be a ground for suspension of Certificate of Accreditation.

Section 17. **Reapplication for Accreditation:**

A Center whose Certificate of Accreditation has been revoked may reapply for the issuance of a new one upon compliance with the requirements established hereunder and/or the correction of the deficiency, which resulted in the revocation.

Section 18. **Appeal:**

Any Center or any of its personnel aggrieved by the decision of the BHFS may, within, fifteen (15) days after receipt of the notice of decision, file a notice of appeal with the Office of the Secretary, and serve a copy of the notice of appeal to the BHFS. Thereupon, the BHFS shall promptly certify and file a copy of the decision, including the transcript of the hearings on which the decision is based with the Office of the Secretary, for review.

Section 19. **Accreditation of Center Personnel**

Accreditation of Center personnel shall be categorized as follows:

1. DOH Accredited Physician
2. DOH Accredited Professional
3. DOH Accredited Non-Professional

**Accreditation of Physician**

The prescribed requirements for the accreditation of physician who will conduct examination and treatment of drug dependents are the following:

1. The physician must be registered with the Board of Medical Examinees and duly licensed to practice in the country.

2. The physician must be a psychiatrist or in lieu thereof, he must have been in the general practice of medicine for at least three (3) years and must at least have supervised training in the diagnosis and management of drug dependents for at least one (1) month.

3. The physician must be a member of good standing in a local medical society in his community.

4. The applicant must have been actively involved in dangerous drugs control work for at least six (6) months prior to the filing of application for accreditation.
Accreditation of Professional/Non Professional Center Personnel

The prescribed requirements for the accreditation of Professional/Non Professional Center Personnel who will conduct the day to day operation are the following:

1. The applicant must have been actively involved in the management of drug dependents for at least three (3) years prior to the filing of application for accreditation.

2. The applicant must have undergone the Basic Training Course on Rehabilitation Management of Drug Dependents conducted by the DOH.

Procedural Guidelines for Accreditation

1. Applicant accomplishes the required application form and submits all the documentary requirements to the BHFS. The applicant pays the corresponding fees to the Cashier of the DOH in person or through postal money order.

   Initial Accreditation
   
   1.1 BHFS Application Form filed either at the BHFS or CHD
   1.2 Letter endorsement of the Bureau director if filed at the CHD.
   1.3 Photocopy of appropriate Professional Regulation Commission Identification Card (if applicable)
   1.4 Certificate(s) of training related to treatment/management of drug dependents.
   1.5 Certification from the local Medical Society (for physicians only)

   Renewal of Accreditation
   
   1.6 Current PRC Identification Card (if applicable)
   1.7 Certificate(s) of training related to treatment/management of drug dependents.

2. The BHFS evaluates the documents submitted to determine compliance with the accreditation requirements.

3. The BHFS approves/disapproves the issuance of Certificate of Accreditation.

   3.1 If approved, the BHFS registers the Center personnel and issues the Certificate of Accreditation to the applicant.
3.2 If disapproved, the BHFS sends the findings and recommendations to the applicant for compliance. Failure to comply within three (3) days shall be a ground for denial of application (for initial) suspension or revocation (for renewal) of accreditation.

Validity:

The Certificate of Accreditation shall be valid for a period of five (5) years.

Accreditation Fees

1. The applicant pays the amount of one thousand pesos (P1,000.00) for the accreditation of physician and five hundred pesos (P500.00) for the accreditation of professional/non professional center personnel to the Cashier of the DOH.

2. The BHFS is authorized to adjust the schedule of fees from time to time.

Section 20. Moratorium

All DDB Accredited Centers shall be given two (2) years from approval and publication of these implementing rules and regulations to meet the new accreditation requirements.

All DDB accredited physicians who were given lifetime-accreditation shall be given five (5) years to continue the conduct of examination and treatment of drug dependents from approval and publication of these implementing rules and regulations. Likewise, the rest of the DDB Accredited Center Personnel who were given lifetime-accreditation shall be given five (5) years to continue performance of their functions. Thereafter, they must renew their Certificate of Accreditation regularly.

Section 21. Separability

In the event that any section, paragraph, sentence, clause or word of this order is declared invalid for whatever reason, other provisions thereof shall not be affected thereby.

Section 22. Effectivity:

These rules and regulations shall take effect upon adoption of the Dangerous Drugs Board and publication in a newspaper of general circulation.

ADOPTED and APPROVED this 11th of July, 2003 at Camp Crame, Quezon City
Technical Requirements

A. Non Residential Treatment and Rehabilitation Center (Outpatient Center)

Service Capability

1. Assessment, treatment and management

2. Emergency assistance
   2.1 Medical and psychiatric first aid treatment for drug overdose/withdrawal including minor trauma and other medical complications as well as psychiatric illness

3. Information and referral:
   3.1 Medical and psychiatric treatment
   3.2 Rehabilitation
   3.3 Other special services – shelter, food, clothing

4. Follow-up and after care

5. Counseling services including individual and group therapy, educational, vocational, occupational, spiritual and legal counseling

6. Other support services
   6.1 Job placement referral

7. Access to drug testing facility

Personnel – all personnel must be drug free

1. DOH Accredited Physician (part time) - 1
2. Licensed Nurse - 1
3. Licensed Social Worker/Psychologist (part time) - 1
4. Clerk - 1

Equipment/Instrument

1. Bench
2. Cabinet with lock
3. Clinical Weighing Scale
4. Examining light
5. Examining table
6. Sphygmomanometer
7. Stethoscope
8. Table/chair
9. Telephone

**Physical Plant** - minimum of twenty (25) square meters

1. Business area
2. Consultation, examination and treatment room with lavatory/sink
3. Toilet with lavatory
4. Multi purpose area that can double as the reception/ waiting area and meeting area for group/family

B. **Residential Treatment and Rehabilitation Center**

**Service Capability**

1. Assessment, treatment and management

2. Emergency Assistance
   
   1.1 Medical and psychiatric first aid for drug overdose/withdrawal, minor trauma and other medical complications as well as psychiatric illness

3. Information and Referral
   
   1.1 Medical and psychiatric treatment
   2.2 Other special services, shelter, food clothing

4. Follow-up and after care

5. Counseling services including individual and group therapy, educational, vocational, occupational, spiritual and legal counseling

6. Living accommodation

7. Structured program of activities

8. Rehabilitation service
   
   8.1 Treatment Modality
   8.2 Counseling Program
   8.3 Recreational Program
   8.4 Works and vocational skill training
   8.5 Family Program

9. Other support services
9.1 Job placement referral – optional
9.2 In house education program – optional

10. Access to drug testing facility

**Personnel – all personnel must be drug free**

1. Center/Program Director/Administrator with training on any behavioral sciences
2. DOH Accredited Physician (on call) - 1
3. Licensed Dentist (on call) - 1
4. Licensed Nurse/Midwife - 1:50
5. Licensed Social Worker – 1:50
6. Psychologist - 1:50
7. Clerk - 1:100
8. Other non-professional staff - 4:100

**Physical Plant** – minimum of four hundred (400) square meters for thirty (30) patients.

1. Registration area/Waiting area/reception
2. Living quarters, separate rooms for male and female
3. Toilet /bath/lavatory – one for every 10 patients
4. Multi purpose area/recreational area
5. Dining area
6. Kitchen area
7. Counseling/testing/examination room
8. Administrative office/directors office (with secured storage files)
9. Area for outdoor activity
10. Emergency Clinic

**Equipment**

1. bed or double decked bed – 1 bed for every patient
2. cabinet and locker
3. dining table
4. electric fan
5. emergency medical cabinet /first aid kit
6. examining light
7. fire extinguishers
8. recreational equipment
9. refrigerator
10. sofa set
11. sphygmomanometer
12. stethoscope
13. stove
14. table and chair
15. telephone
16. thermometer
17. TV and/or karaoke
18. typewriter/computer
19. weighing scale
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