



Accreditation Toolkit for Civil Society Organizations



ACHIEVE



Action for Health Initiatives, Inc.



Accreditation Toolkit for Civil Society Organizations

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This toolkit is produced through the Sustainability of HIV Services for Key Populations in South-East Asia (SKPA-2) Program.

ACHIEVE

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Acronyms and Abbreviations

AAFS	Annual Audited Financial Statements
ABSNET	Area Based Standards Network
ACHIEVE	Action for Health Initiatives, Inc.
AFS	Annual Financial Statements
AIDS	Acquired Immunodeficiency Syndrome
ART	Antiretroviral therapy
BAC	Bids and Awards Committee
BIR	Bureau of Internal Revenue
CBO	Community-Based Organization
CDA	Cooperative Development Authority
CEP	Certificate of Eligibility to Participate
CHD	Center for Health Development
COA	Commission on Audit
COI	Certificate of Incorporation
CLO	Community-led Organization
CSO	Civil Society Organization
CSO/PPPP-PMO	Civil Society Organizations / People's Participation Partnership Program- Program Management Office
CrCI	Certified rHIVda Confirmatory Laboratory
DILG	Department of the Interior and Local Government
DOH	Department of Health
DOLE	Department of Labor and Employment
DPCB	Disease Prevention and Control Bureau
DST	Documentary Stamp Tax
eFAST	Electronic Filing and Submission Tool
eSPARC	Electronic Simplified Processing of Application for Registration of Company
FO	Field Office
FPOP	Family Planning Organization of the Philippines
GIS	General Information Sheet
GPPB	Government Procurement Policy Board
GPRA	Government Procurement Reform Act
HCI	Health Care Institution

Acronyms and Abbreviations

HFERC	Health Facilities Evaluation and Review Committee
HFSRB	Health Facilities and Regulatory Bureau
HIV	Human Immunodeficiency Virus
HRT	Health Regulation Team
IHCP	Institutional Health Care Provider
IRR	Implementing Rules and Regulations
LGC	Local Government Code
LGU	Local Government Unit
LTO	License to Operate
LY	LoveYourself
MSM	Men who Have Sex with Men
NGA	National Government Agency
NGO	Non-Government Organization
OHAT	Outpatient HIV/AIDS Treatment Package
PAS	Pre-Accreditation Survey
PCNC	Philippine Council for NGO Certification
PDR	Provider Data Record
PHILGEPS	Philippine Government Electronic Procurement System
PLHIV	People Living with HIV
PO	People's Organization
PPAs	Programs, Projects, and Activities
PRO	PhilHealth Regional Office
PTC	Permission to Construct
PWID	People Who Inject Drugs
PWUD	People Who Use Drugs
RDO	Revenue District Office
rHIVda	Rapid HIV Diagnostic Algorithm
RITM	Research Institute for Tropical Medicine
RLED	Regional Licensing and Enforcement Division
SAP	Survey for Advanced Participation
SB	Standards Bureau
SEC	Securities and Exchange Commission

Acronyms and Abbreviations

SRH	Sexual and Reproductive Health
STI	Sexually Transmitted Infections
SWA	Social Work Agency
SWD	Social Work and Development
SWDA	Social Work and Development Agency
TB	Tuberculosis
TB-DOTS	Tuberculosis Directly-Observed Treatment Short-course
TGW	Transgender Woman
TIN	Tax Identification Number
TITF	Treasurer in Trust Fund
TLD	Tenofovir, Lamivudine and Dolutegravir
YKP	Young Key Population



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Definition of Terms

Accreditation

Accreditation is the process of assessing the applicant to determine whether a Civil Society Organization (CSO) is eligible to implement programs and/or projects after meeting all the set criteria and requirements.

Civil Society Organization (CSO)

A Civil Society Organization (CSO) is a non-stock, non-profit citizens' group, organization, association, labor organization, or workers' association, expressing the interests and values of not only their members or others, based on socioeconomic, ethical, cultural, and scientific considerations, and is operating within the social welfare purview. Non-State, not-for-profit, voluntary entities formed by people in the social sphere that are separate from the State and the market. CSOs represent a wide range of interests and ties. They can include community-based organizations as well as non-government organizations (NGOs).


Community-led Organizations (CLOs)

Community-led Organizations (CLOs) are entities for which the majority of governance, leadership, staff, spokespeople, membership, and volunteers, reflect and represent the experiences, perspectives, and voices of their constituencies and who have transparent mechanisms of accountability to their constituencies. Usually, they are self-determining and autonomous, and not influenced by government, commercial, or donor agendas.

Community-led organizations are led by the people who they serve and are primarily accountable to them. In the AIDS response, this includes organizations by and for people living with HIV or tuberculosis and organizations by and for people affected by HIV, including gay men and other men who have sex with men, people who use drugs, prisoners, sex workers, transgender people, women, and young people

Government Procurement Policy Board (GPPB)

The Government Procurement Policy Board (GPPB) was established by virtue of Republic Act No. 9184 or the Government Procurement Policy Act, as an independent inter-agency body that is impartial, transparent and effective, with private sector representation. Among its main functions include: (1) to formulate and amend public procurement policies, rules and regulations, and amend, whenever necessary, the implementing rules and regulations Part A; and (2) to establish a sustainable training



program to develop the capacity of Government procurement officers and employees, and to ensure the conduct of regular procurement training programs by the procuring entities.

The GPPB, being an inter-agency body composed of top-level public officials, is supported by its very own Technical Support Office (TSO) to provide support in the performance of its duties and responsibilities, particularly in spearheading the implementation of public procurement reform initiatives in the Philippines.

Social Contracting

Social Contracting is the process or practice wherein the government provides funds and/or other resources to civil society organizations in order to implement activities, projects, programs, or services. Social contracting modalities include grants, procurement and contracting, and other third party payments. It must also be noted that this process does not intend to simply channel funds and other resources to civil society organizations. It instead necessitates certain policy, financial, and programmatic initiatives to ensure proper implementation.

In the context of the HIV response, social contracting can be a potentially valuable approach towards financing community-led service provision and social mobilization since it fosters greater partnership between governments and civil society, wherein CSOs could advocate for greater participation and accountability to ensure effective HIV programming.

Social Work and Development Agency

A Social Work and Development Agency is a non-stock, non-profit corporation, organization, or association, implementing or intending to implementing either directly or indirectly, social welfare and development programs and services in the Philippines, and assessed as having the capacity to operate administratively, technically, and financially. Its clients may include, but are not limited to, the poor, disadvantaged, and vulnerable individuals, groups, families, and communities.


Overview

HIV and AIDS continues to burden the country as new infections rise. Described to be “slow and low” (Farr & Wilson, 2010) from 1984 to 2007, HIV in the Philippines is now characterized as an epidemic (Gangcuangco & Eustaquio, 2023). The National Capital Region (NCR) alone registered 3,469 newly diagnosed HIV cases as of 2022 (Department of Health NCR, 2023). It is estimated that total new cases in 2024 will reach about 59,400 should the upward trend continue (Department of Health NCR, 2023). Some identified highly urbanized areas reported in 2022 more than 7.9% HIV prevalence among the Key Population (KP), particularly among Men having sex with Men (MSM) (Department of Health NCR, 2023). Of the total, only 71% have been diagnosed (including those who have died), of which 63% are on treatment (Department of Health NCR, 2023). The COVID-19 pandemic exacerbated the current scenario. At the national level, the transmission mode has also shifted from heterosexual to homosexual (Department of Health NCR, 2023). In addition, the sharing of needles among People Who Inject Drugs (PWIDs) was also reported to have resulted in high HIV prevalence (Department of Health NCR, 2023).

The most dominant age group affected by HIV is 15 to 24 years old. This trend among the young population has been noted in the recent years pre-pandemic, rising in 2021-2022, with the 25-34-year-old bracket having the highest infection rate. Key populations affected include Men who Have Sex with Men (MSM), People Who Inject/Use Drugs (PWID/PWUD), Young Key Population (YKPs), Transgender Women (TGW), and Female Sex Workers (FSWs), including trafficked women and girls who are forced to engage in transactional sex. HIV infection is also increasing among pregnant women. The HIV and AIDS Registry of the Philippines (HARP) reported in 2022 that a significant number of pregnant women were found positive for HIV, and 64% are on anti-retroviral therapy (ART) (Department of Health NCR, 2023).

The health system capacity has since been substantially improved over the years. However, the social and economic restrictions due to COVID-19 resulted in further challenges, such as disruption in service delivery. The challenge now is to muster a healthy and efficient turnaround of HIV testing and treatment. Furthermore, much depends on managing the risks and transitioning to the "new normal."

The management of HIV requires the government to create proactive measures for prevention, testing, linkage to care, and retention services for key populations. This mechanism is essential to achieve epidemic control and will reduce future costs by preventing new infections.



Community-led Organizations (CLOs) play an essential role in providing services, filling gaps in services that should have been provided by the State, and often working with governments to do so. The gamut of their operations is extensive, and their impacts are widespread. They are well-positioned to be proactive and effectively contribute to the establishment and implementation of a social contracting mechanism for continued service delivery to key populations and other vulnerable groups, particularly those with an interest in:

1. Sustainability of the HIV response;
2. Safeguarding equitable access to HIV-related services for all;
3. Promoting human rights of people living with HIV;
4. Alleviating HIV and key population-related stigma and discrimination; and
5. Developing strong, transparent systems, and institutions.

The CLOs' accountability towards their key constituents is becoming increasingly important. Thus, the initiative to develop this toolkit which includes the accreditation standards and processes to aid the CLOs as they engage in social contracting and other funding mechanisms with government agencies, local government units, or international donors in delivering HIV and AIDS services. It is a starting point for developing methodologies and solutions to some of the challenges raised by CLOs in accessing government funding.

The effective rollout of social contracting requires planning, ongoing advocacy, and collaboration between the government and CLOs as they build partnerships to deliver HIV services. This partnership must be grounded in trust, transparency, accountability, and efficiency geared toward assisting the government to implement its policies and support national goals as outlined in the 7th AIDS Medium Term Plan (AMTP). To test systems and provide proof of concept, the Action for Health Initiatives, Inc. (ACHIEVE) created this toolkit to assist CLOs in social contracting for HIV and preparing the documentary requirements needed including the processes for their organizations to be accredited by government agencies.

CHAPTER 1

NATIONAL ACCREDITATION PROCESS

- A. Securities and Exchange Commission (SEC)
- B. Bureau of Internal Revenue (BIR)
- C. Cooperative Development Authority (CDA)
- D. Department of Health (DOH)
- E. The Philippine Health Insurance Corporation
Outpatient HIV and AIDS Treatment Package (OHAT)
- F. Department of the Interior and Local Government (DILG)
- G. Department of Social Welfare and Development (DSWD)
- H. The Philippine Government Electronic Procurement System (PhilGEPS)



A. Securities and Exchange Commission

Intended for CLOs that would like to obtain a separate juridical personality and acquire the rights and powers that a corporation may exercise such as managing shelters that were funded by LGUs; facilitating testing; and providing education as resource speakers or orientation which entails certification for one or more of the following purposes: scientific, research, educational, character-building, youth and sports development, health, social welfare, cultural, or charitable purposes (Revenue Regulation No. 13-98 Section 1(b)).

Overview

The Securities and Exchange Commission (SEC) or the Commission was created on October 26, 1936, to regulate the sale and registration of securities, exchanges, brokers, dealers, and salespeople.



It is the national government regulatory agency charged with supervising the corporate sector, the capital market participants, the securities and investment instruments market, and the protection of the investing public. It issues guidelines for non-profit organizations to monitor and protect them from money laundering and terrorist financing abuse. Subsequent laws were enacted to encourage investments and more active public participation in the affairs of private corporations and enterprises.

SEC is the registrar and overseer of the Philippine corporate sector; it supervises more than 600,000 active corporations and evaluates the financial statements (FS) filed by all corporations registered with it. With the growing number of corporations and other forms of associations that it supervises and monitors, and given the evolving nature of transactions where the corporate vehicle is being used to defraud the investing public, as well as the ever-dynamic character of the capital market, it must progressively perform its critical role as the prudent registrar and supervisor of the non-government organizations and corporate sector. Registration with other regulatory agencies is also required if CLOs want to accept donations or to participate in government projects.

Requirements

To register a non-stock, non-profit organization, you need to have the following requirements to start with:

Requirements	(X)/ (/)	Remarks
1. At least five (5) incorporators, the majority of them must be residents of the Philippines		
2. Complete the address of each incorporator		
3. Bureau of Internal Revenue Tax Identification Number (TIN) of each incorporator		
4. Contribution of incorporators and members		
5. Basic Securities and Exchange Commission Requirements:		
a. Name verification slip of the CSO name to be used. This should be reserved manually with the Securities and Exchange Commission (SEC) for minimal fees		
b. Articles of Incorporation and By-laws		
c. Joint affidavit of two (2) incorporators to change the name		

Requirements	(X)/ (/)	Remarks
d. List of members, as certified by the Corporate Secretary, unless already stated in the Articles of Incorporation		
e. List names of contributors or donors and the amounts contributed or donated, as certified by the treasurer		

Accreditation Committee

Securities and Exchange Commission's Special Committee

Process Flow

The SEC now has the Electronic Simplified Processing of Application for Registration of Company (eSPARC). The SEC - eSPARC is a facility to cater application for registration of One Person Corporation and Domestic corporations (stock and non-stock) with 2 or more incorporators who may either be natural person, partnership, association or corporations, singly or jointly with others but not more than fifteen (15) in number. The system allows the applicant or his duly appointed representative to submit the proposed company name and input details of the articles of incorporation for review of the Commission.

1. Log on to this link: **<https://esparc.sec.gov.ph/application>**

To continue, click the "Regular Processing" button. The ESPARC Regular Processing page will be displayed next.

You can also access the User Guide for a more comprehensive step-by-step procedure: **<https://esparc.sec.gov.ph/docs/UserGuide-esparc.pdf>**

2. To continue, click the "Proceed to Regular Processing" button that can be found at the lower section screen/page. The application form will be displayed next. The welcome page contains the (a) General Provisions, (b) Privacy Policy, and (c) Consent Form of System User.

3. To continue, click the "Continue to application form" button that can be found at the lower left section screen/page. The application form will be displayed next.

4. The Regular Processing of ESPARC application form is grouped into six (6) steps. Each step is composed of sections. The applicant must be able to complete all six steps to enable them to submit their application.

STEP 1 – NAME VERIFICATION

STEP 2 – COMPANY DETAILS

STEP 3 – CAPITAL STRUCTURE (for Stock Corporations)

STEP 4 – COMPANY OFFICERS

STEP 5 – FILE UPLOADING

STEP 6 – APPLICATION REVIEW

In filling out the application form, please take note of the following:

- All fields marked with a red asterisk (*) are mandatory fields and must be given correct values;
- The system displays Information Message, Confirmation Message and Error Message whichever is applicable; and
- Lastly, the system sends email notifications for One-Time Passcode, when the application is created, when name verification process is completed, when SEC approved or disapproved the application, and when payment is received.

5. After that, the system confirms the application is successfully submitted and provides information such as status of the application, Application Reference Number and the date the application is submitted. The provided application reference number will be sent through your registered email account. Said reference number shall be used for easy tracking of the application.

6. An email notification of Pre-Approved Application status will be sent to the authorized representative's registered email. Click the link to go to your application.

7. A checklist of applicable System Generated Forms will display. Click the "Download" link to download the form/s and provide all the necessary signatures for each incorporator/partner. Once signed, upload the authenticated or notarized file/s by clicking the "Upload Documents" button.

8. Click the Upload/Reupload button. Click the browse button to upload the file then click save button. Please ensure to upload PDF format file with a maximum of 3MB size per file. Click submit button.

9. An email notification of status will be sent to the authorized representative's registered email.

- If the uploaded signed and authenticated or notarized documents are correct an email notification of Approved Application status will be sent and may proceed to payment of registration fees.

- If there is/are correction/s or deficiency/ies in the uploaded signed and authenticated or notarized document/s, an email notification of Disapproved Uploaded Document/s status will be sent to the authorized representative's registered email. Click the link to redirect to your application form.

10. Pay the registration fees through the following payment method:

- Electronic System for Payment to SEC (Espaysec)
- Over-the-Counter (OTC) of SEC Cashier Office
- Land Bank Over-the-Counter

Perform the necessary steps/process within the chosen payment method. For payment made through the Land Bank over-the-counter, upload the validated deposit slip by clicking the link provided in the email notification.

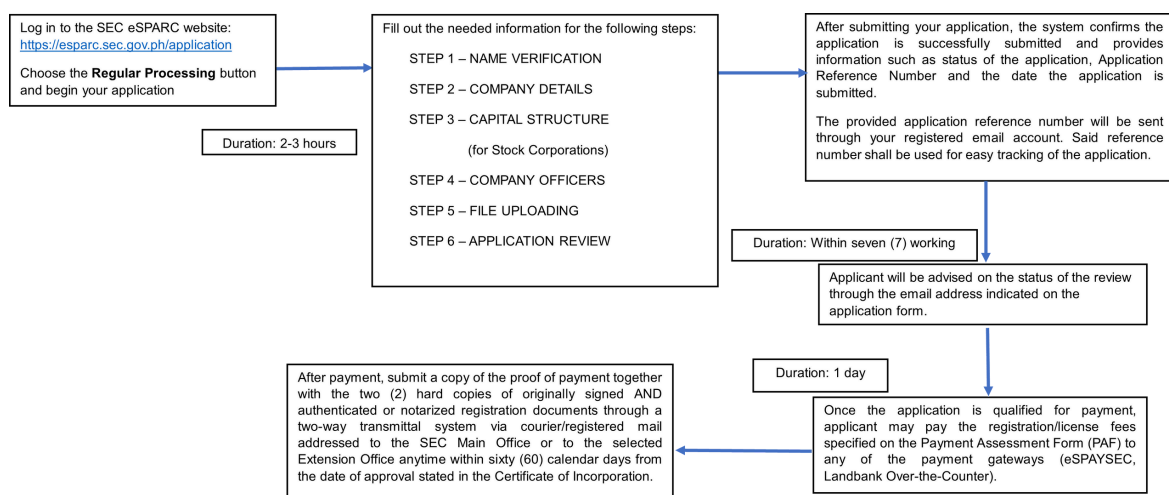
11. Once the payment has been done and confirmed by SEC, an email of payment confirmation and notification for approved registration will be sent. You may now download the Digital Certificate of Incorporation by clicking the link provided in the email notification for approved registration. Click the Download Digital COI button, download and print the digital COI.

12. To continue your application to the Philippine Business Hub for registration with the BIR, Social Agencies, LGUs and FDA, click the "Click here to continue To Philippine Business hub" button.



Important Note:

The original copy of the Certificate of Incorporation (COI)/Partnership shall be released only upon presentation and submission to the selected SEC Process Office of the digital copy of the COI/Partnership, copy of the proof of payment of the assessed registration fees, together with the four (4) sets of originally signed and authenticated or notarized hard copies, anytime within a period of sixty (60) calendar days from the date stated in the Digital Certificate of Incorporation.



Submit to:

SEC Processing Offices

SEC MAIN OFFICE

Secretariat Building, PICC Complex
Roxas Boulevard, Metro Manila Philippines
Telephone No.:(+632) 818-0923
Fax No.:(+632) 818-5293

BAGUIO CITY

3/F Newtown Square, Navy Base Road,
Baguio City

TARLAC CITY

2F Legislative Bldg.
Tarlac City

LEGAZPI CITY

SEC Bldg., 2nd Floor
Chiniel (Avon) Bldg.
Rizal St. Albay District
Legazpi City

CEBU CITY

SEC Bldg. V. Rama Ave.
Guadalupe, Cebu City
Telephone No.:(+632) 253-5337

ILOILO CITY

SEC Bldg. Gen. Hughes St.
Iloilo City

DAVAO CITY

3/F AMYA2 Bldg.
Quimpo Boulevard, Matina,
Davao City

CAGAYAN DE ORO CITY

SEC Bldg. Corner 14th and
Tomasaco Del Lara Sts.
Cagayan de Oro City

ZAMBOANGA CITY

SEC Bldg., San Jose
Panigayan St.
Zamboanga City

Opening a Bank Account

After receiving the digital copy of the Certificate of Incorporation from the SEC, an organization is given **one (1) month to open a bank account**, since this is part of the requirements for incorporation. This corporate bank account is known as a **Treasurer in Trust Fund (TITF)** account, and holds the amount that will become a company's equity or starting capital.



Important Note:

A TITF is required by the SEC before incorporation in the Philippines. It is mainly used for deposits because withdrawals are restricted until the SEC approves the company incorporation in the Philippines. It is thus used for complying with the requirements for Philippine incorporation.

After opening your TITF, submit the certificate of deposit to the SEC within the one (1) month deadline.

Requirements for opening a TITF

Requirements	(X)/ (/)	Remarks
1. Must be opened by a resident of the Philippines also called a Treasurer in Trust . This could be the Treasurer of your organization.		
2. Articles of Incorporation and By-Laws		
3. Valid IDs of the Treasurer		
4. Board Resolution duly notarized, giving the Treasurer authority to open a bank account		
5. Initial deposit (The amount depends on the bank.)		

Once the organization is formally registered with the SEC, you can approach the bank to convert the TITF into a standard corporate bank account.

Filing of the SEC Annual Financial Statements and General Information Sheet

CLOs must undergo the annual process of compliance to the SEC, regardless of whether they were able to implement any activity or receive funding for that year, in order to maintain their registration. Otherwise, they will be penalized.

Process Flow

1. The deadlines for filing of an organization's Annual Financial Statements (AFS) shall depend on the last numerical digit of their SEC registration or license numbers. **Please refer to the latest Memo of the SEC for the schedule of payments for every year.**
2. The AFS to be submitted, other than the consolidated financial statements, shall be stamped "received" by the Bureau of Internal Revenue (BIR) or its authorized banks, unless the BIR allows an alternative proof of submission for its authorized banks (e.g., bank slips) and/or other facilities. For companies, which filed their AFS through the BIR e-AFS system, they shall attach the system-generated Transaction Reference Number issued by the BIR, in lieu of the manual "received" stamp.
3. The AFS shall include the basic components prescribed under Revised Securities Regulation Code (SRC) Rule 68. Failure to comply with any of the formal requirements under said Rule, including any material deficiency or misstatement that may be found upon evaluation of the specific contents thereof, shall be considered a sufficient ground for the imposition of penalties by the SEC. The acceptance and receipt by the Commission of the financial statements shall be without prejudice to such penalties.
4. Nonstock corporations with total assets or total liabilities of Six Hundred Thousand Pesos (Php 600,000.00) or more shall submit their Annual Audited Financial Statements (AAFS). However, Nonstock Corporations which do not meet this threshold may submit their AFS, certified under oath by the corporation's treasurer or chief financial officer.



Important Note:

Late filings or submissions of the AFS after the due dates will still be accepted by the SEC but shall be subject to the prescribed penalties which shall be computed from the date of the last day of filing of that year.

5. For Nonstock Corporations, they shall file their General Information Sheet (GIS) within thirty (30) calendar days from the actual annual members' meeting.

6. All corporations (stock and nonstock) are required to file their annual reportorial requirements through **eFAST** (Electronic Filing and Submission Tool) which may be accessed at **<https://efast.sec.gov.ph/>** following the deadlines. All filers of GIS and AFS, regardless of the number of reports to be filed with the Commission, shall be accommodated through eFAST.

Submission of reports over the counter and/or through mail or courier under the SEC Express Nationwide Submission (SENS) facility shall no longer be accepted.

Any problem encountered in the enrollment and submission of AFS and GIS in eFAST shall be accommodated through the email addresses and telephone numbers provided in the SEC Contact Center posted at **<https://www.sec.gov.ph/contact-us>**



Important Note:

The eFAST is open twenty four (24) hours everyday. However, all review, acceptance and reversion shall be done only from Mondays to Fridays. Submissions made on a Saturday, Sunday, holiday or during work suspension shall be considered filed on the next working day.

B. Bureau of Internal Revenue

Tax Identification Number Application

Intended for CLOs that would like to obtain a separate juridical personality and acquire the rights and powers for one or more of the following purposes: scientific, research, educational, character-building, youth and sports development, health, social welfare, cultural, or charitable purposes or a combination thereof, no part of the net income will benefit any private individual. (Revenue Regulation No. 13-98 Section 1(b)). Moreover, BIR accreditation would allow CLOs to acquire donee institution status which entitles them to receive tax-deductible donations.

Overview

The Bureau of Internal Revenue is mandated by law to assess and collect all national internal revenue taxes, fees, and charges and to enforce all forfeitures, penalties, and fines, including the execution of judgments in all cases decided in its favor by the Court of Tax Appeals and the ordinary courts. It will prescribe a certificate of donation to be issued by all accredited NGOs on every donation or gift they receive. Such certificate shall be issued by the said accredited NGO in triplicate (for donor, BIR, and donee) and distributed within thirty (30) days after the receipt of the donation.

Tax Form

BIR Form 1903

Application for Registration for Corporations/ Partnerships (Taxable/Non-Taxable)

Requirements

For Corporations/Partnerships:

Requirements	(X)/ (/)	Remarks
1. BIR Form No. 1903 version 2018		

Requirements	(X)/ (/)	Remarks
2. Photocopy of SEC Certificate of Incorporation; or Photocopy Certificate of Recording (in case of partnership); or Photocopy of License to Do Business in the Philippines (in case of foreign corporation)		
3. Articles of Incorporation or Articles of Partnerships		
4. Payment of P500.00 for Registration Fee and P30.00 for loose Documentary Stamp Tax (DST) or Proof of Payment of Annual Registration Fee (ARF) (not applicable to those exempt from the imposition of ARF)		
5. BIR Printed Receipts/Invoices or Final & clear sample of Principal Receipts/ Invoices		

Other documents for submission only if applicable:

Requirements	(X)/ (/)	Remarks
1. Board Resolution indicating the name of the authorized representative or Secretary's Certificate, in case of the authorized representative who will transact with the Bureau		

Requirements	(X)/ (/)	Remarks
3. Memorandum of Agreement (for Joint Venture)		
5. Certificate of Authority, if Barangay Micro Business Enterprises (BMBE) registered entity		
6. Proof of Registration/Permit to Operate with BOI, BOI-ARMM, SBMA, BCDA, PEZA		

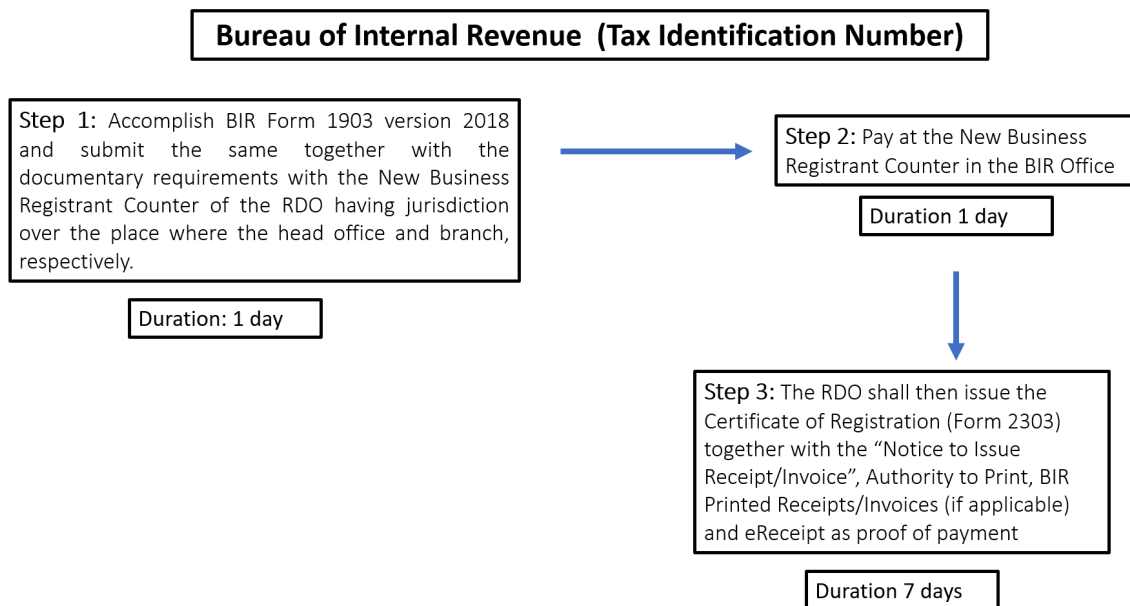
For Cooperatives

Copy of Cooperative Development Authority (CDA) Certificate of Registration and Articles of Cooperation

Process Flow

1. Accomplish BIR Form 1903 version 2018 and submit the same together with the documentary requirements with the New Business Registrant Counter of the Revenue District Office (RDO) having jurisdiction over the place where the head office and branch are, respectively.
2. Pay the following at the New Business Registrant Counter in the BIR Office.
 - (i) Annual Registration Fee (P500.00)
 - (ii) Documentary Stamp Tax (P30.00) (if applicable)
 - (iii) BIR Printed Receipt/Invoice (if opted to buy for use)
3. The RDO shall then issue the Certificate of Registration (Form 2303) together with the "Notice to Issue Receipt/Invoice", Authority to Print, BIR Printed Receipts/Invoices (if applicable), and eReceipt as proof of payment.

Note: Taxpayers may attend the scheduled initial briefing for new business registrants to be conducted by the concerned RDO in order to apprise them of their rights and duties/responsibilities. Non-individual business taxpayers may also submit applications via electronic mail through the [BIR New Business Registration \(NewBizReg\) Portal](#).



Deadline

Corporations and their branches shall accomplish and file the application on or before the commencement of business, it shall be reckoned from the day when the first sale transaction occurred or within thirty (30) calendar days from the issuance of Mayor's Permit by LGU, or Certificate of Registration issued by the Securities and Exchange Commission (SEC), whichever comes first.

In the case of corporations (Taxable or Non-taxable) where documentary stamp tax is required to be paid within five (5) days after the close of the month, BIR Registration shall be done on or before payment of DST due.

Partnerships, Associations, Cooperatives, Government Agencies and Instrumentalities shall accomplish and file the application before or upon filing of any applicable tax return, statement or declaration as required by the Code, as amended



Important Note:

Refer to the organization's Certificate of Registration for the schedule of the filing of the annual tax return. Use Form 1702-EX to file the annual income tax return. The Annual Financial Statement and Annual Audited Financial Statement will serve as attachments to the annual income tax return. **Non-filing of the tax return every year will result to penalties.**

Submit to:

Bureau of Internal Revenue (Legal and Legislative Division)

Email: contact_us@bir.gov.ph

Phone Number: 8981-7326-29

Website : <https://www.bir.gov.ph>

C. Cooperative Development Authority

Intended for CLOs with cooperative development programs that include but are not limited to managing shelters that were funded by an LGU, facilitating testing, and providing education as resource speakers or providing orientation which entails certification.

Overview

The Cooperative Development Authority is a government agency attached to the Department of Trade and Industry (DTI) that promotes the viability and growth of non-government organizations such as cooperatives, as instruments of equity, social justice, and economic development. It announces such institutions' expansion and complete effect to fulfill their potential as socially just, equitable, and progressive institutions. It issues registration certificates among non-government organizations, such as cooperatives, following the Cooperative Code of the Philippines (RA 9520).

This office only registers cooperatives. The application for registration of primary cooperatives is processed online. The templates of the requirements are already embedded in the system. For more information, visit the CDA website at www@cda.gov.ph and refer to Memorandum Circular 2015-01 (Revised Guidelines Governing the Registration of Cooperatives).

Requirements

CDA Requirements for Registration of Primary Cooperatives

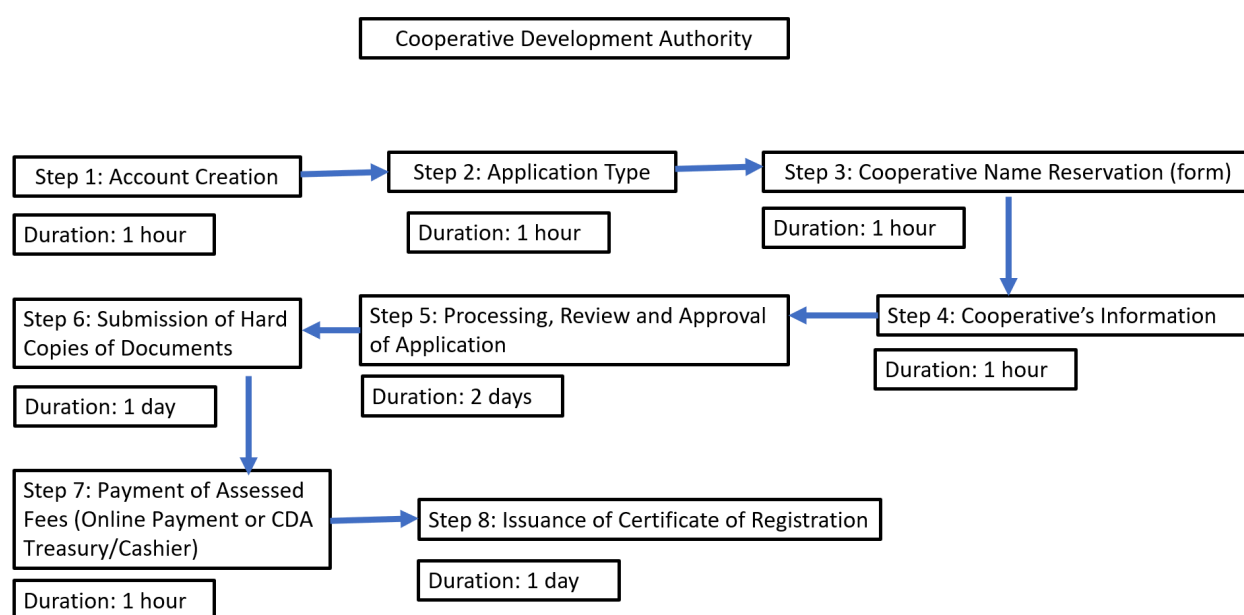
Requirements	(X)/ (/)	Remarks
1. Economic Survey		
2. Articles of Cooperation and the Approved Bylaws		
3. Treasurer's Affidavit (Notarized)		

Requirements	(X)/ (/)	Remarks
4. Surety Bond of Accountable Officers		
5. Favorable/ Endorsement/ written/ verification/ authority/ pre-feasibility study, if applicable		
6. Registration Fee (this varies, please contact the office)		

Accreditation Committee

For further information on the step-by-step process, you may visit the CDA website and access the online system - the Electronic Cooperative Registration Information System (E-CoopRIS). On the client login page, underneath is the User's Manual.

Process Flow



1. Account Creation
2. Application Type
3. Cooperative Name Reservation (form)
4. Cooperative's Information
5. Processing, Review, and Approval of Application
6. Submission of Hard Copies of Documents
7. Payment of Assessed Fees (Online Payment or CDA Treasury/Cashier)
8. Issuance of Certificate of Registration

Submit to:

Cooperative Development Authority
Email: helpdesk@cda.gov.ph
8725-3764
<https://cda.gov.ph/contact-us/>

D. Department of Health

Accreditation of CSOs as Implementing Entities of Programs and Projects

Intended for CLOs engaged in managing shelters that were funded by LGUs, facilitating testing, and providing education as resource speakers or orientation which entail certification.

Overview

The Department of Health is mandated to be the overall technical authority on health. The major mandate of the DOH is to provide national policy direction and develop national plans, technical standards, and guidelines on health. It is also a regulator of all health services and products; and a provider of technical assistance to other health providers especially to the local government units by assuring the promotion of health and well-being for every Filipino, prevention, and control of diseases among the population at risk, protection of individuals, families and communities exposed to health hazards and treatment, management, and rehabilitation of individuals affected by disease and disability.

This shall apply to all DOH Offices, Centers for Health Development (CHDs), DOH Hospitals, Special and Specialty Hospitals, Sanitaria, Treatment, and Rehabilitation Centers, all DOH attached agencies, the Ministry of Health- Bangsamoro Autonomous Region in Muslim Mindanao (MOH-BARMM), and CSOs.

Requirements

Requirements	(X)/ (/)	Remarks
1. Accomplished Application Form		
2. Board Resolution		

Requirements	(X)/ (/)	Remarks
3. Location Sketches and Photographs of the Principal Officer and satellite offices		
4. Organizational Chart		
5. Data Sheet of directors, trustees, officers, and key employees with attached resumes/curricula vitae		
6. Omnibus Sworn Statement		
<p>7. Original or certified true copies of the following for the past three years:</p> <p>a. Certificate of Registration from the Securities and Exchange Commission (SEC) and/or either the Cooperative Development Authority or the Department of Labor and Employment, as the case may be; and</p> <p>b. Latest Articles of Incorporation or the Articles of Cooperation, as the case may be, Bylaws and General Information Sheets</p>		
8. Original or certified true copies of Secondary Permit, License, or Registration, if applicable, e.g. issued by the Department of Social Welfare and Development (DSWD) for Social Welfare and Development Agencies (SWDA)		

Requirements	(X)/ (/)	Remarks
9. Original or certified true copies of the Certificate of Registration, Annual Income Tax Returns, and Audited Financial Reports/Statements issued or as filed with the Bureau of Internal Revenue (BIR) for the past three (3) years		
10. List of Projects and Programs within the past three (3) years, for which the CSO received public funds from any government agency certified under oath by the responsible officer of the CSOs, if applicable		
11. List of Projects and Programs within the past three (3) years for which the CSO did not receive any public funds from any government agency certified under oath by the responsible officer of the CSO, if applicable		
12. Original Certificate of Good Standing issued by SEC, CDA, or DOLE issued not more than (3) months prior to or before the application		
13. Original Certificate of Good Standing issued by each government agency from which the CSO received public funds, if any, issued not more than (3) months prior to or before the application		

Requirements	(X)/ (/)	Remarks
14. Original Certificate of Affiliation. Certificate of Good Standing issued by the umbrella group to which the CSO belongs, if any, issued not more than (3) months before the application		
15. Original Recommendation Letters stating positive feedbacks or good performance or certification of previously completed projects from at least two (2) public or private entities with which the applicant had previously engaged or partnered in relation to concerning the Technical Areas or Focus of Activity stated in the application for accreditation		
16. Internal Policy or Guidelines of the CSO on monitoring and evaluation to be able to ensure that the government funds will be used for the intended purpose		

Accreditation Committee

Accreditation Committees Composition:

- Minimum of three persons shall compose a Secretariat;
- Permanent Employee; and
- Part of the Organizational Structure of the Bureau/Service/Program.
- Term: 1 year

Central Committee

Position	Assigned Person
Chairperson	Assistant Secretary of Health for the Health Regulation Team (HRT)
Vice-Chairperson	Director of Legal Service
Members	<p>Division Chief or higher from the following Offices:</p> <ol style="list-style-type: none"> 1. Disease Prevention and Control Bureau (DPCB); 2. Health Facilities Services and Regulatory Bureau (HFSRB); 3. Bureau of Local Health Systems Development (BLHSD); and 4. Financial and Management Service (FMS).
Secretariat	Technical and/or Administrative Staff from the Officer under the HRT. The Executive Assistant of the Chairperson shall at all times be part of the Central Accreditation Secretariat, unless otherwise disqualified under his order.

Regional Accreditation Committee

Position	Assigned Person
Chairperson	Regional Director
Vice-Chairperson	CHD Legal Officer

Central Committee

Position	Assigned Person
Members	Division Chief or higher from the following Offices: 1. Local Health Support Division (LHSD) 2. Regional Licensing and Enforcement Division (RLED) 3. Health System Development Division (HSDD) 4. Management Division (MD)
Secretariat	Technical Staff from the LHSD, RLED, and other divisions of the CHDs as may be needed

Criteria for Accreditation

1. Minimum Criteria for CSO Accreditation:

- a. The presence of the CSO in its stated address and area of operation has been validated;
- b. An identified membership and leadership and defined organizational structure;
- c. Good standing with all government agencies from which the CSO has received public funds;
- d. Not in default or in delay in liquidating any public funds received from any government agency;
- e. Must have a proven track record and good standing in undertaking civil society works
- f. Must not have any Director, Trustee, Officer, or key personnel related within the fourth (4) civil degree of consanguinity or affinity to any DOH official involved in the processing of its accreditation or any official of the DOH unit or entity funding the program or project to be implemented by the CSO; and
- g. Must have proven legal existence.

2. All CSOs applying for accreditation must have operated at least three (3) years before the date of application for accreditation in the Technical Areas or Focus of Activity being applied for.

3. In the case of a cooperative which that applies to be a CSO partner, the submission of a certificate of registration and certificate of compliance as issued by the Cooperative Development Authority (CDA) specifically for that purpose including meeting the minimum criteria stated in this section shall be sufficient for it to qualify as a CSO partner.

4. The minimum criteria provided herein shall be deemed modified by any subsequent law providing a new set of minimum criteria for the accreditation of CSOs without the need for further amendment.

Process Flow

1. Filing of the Application

Any CSO that seeks accreditation shall submit to the Secretariat, personally or by mail, two (2) sets of a duplicate copy of the same. The original copy shall be retained by the Accreditation Committee, and the duplicate copies shall be retained by the Accreditation Secretariat which received the application and the Office of the Undersecretary for HRT, respectively.

CSOs that have a presence and operation in at least two or more regions shall file their applications with the Central Accreditation Secretariat.

CSOs that have stated address and area of operation in the same region shall file their applications with the respective Regional Accreditation Secretariat.

Applications for renewal of accreditation shall only be filed with the Secretariat, which received the original application for accreditation.

All applications filed by mail shall be addressed to the Accreditation Committee of the receiving Secretariat.

2. Initial Desk Review of Documentary Requirements

Upon receipt of the application, the Secretariat shall check the completeness of the documentary requirements submitted by using the checklist provided in pages 22-25.

a. If the documentary requirements are found to be incomplete, the Secretariat shall immediately return the same to the CSO applicant without prejudice to its refiling;

If the CSO applicant commits any misrepresentation or falsification in any documents submitted in support of the application for accreditation, the same shall be retained to be used as evidence for blacklisting against the erring CSO;

b. It shall be understood that the application is deemed filed only upon submission of complete documents to the Secretariat;

c. The Secretariat shall notify the Knowledge Management Information Technology Service (KMITS) of such application for posting on the DOH Website to notify the public of the CSO's application for accreditation and invite the same to submit Sworn Complaints/Oppositions against the CSO relative to its application for accreditation.

3. Validation and Inspection

The Secretariat shall validate the existence and operation of the CSO applicant.

a. Within five (5) working days from receipt of the application, the Secretariat shall conduct a site visit or ocular inspection, subject to prior notice, of the stated address and area of operation of the CSO applicant, and check the existence of any derogatory record. The Inspection Report shall narrate the findings of the ocular inspection and site visit.

b. Within five (5) working days from receipt of the Inspection Report, the Secretariat shall endorse a Validation Report to its respective Accreditation Committee. The Secretariat shall attach to the Validation Report the original set of copies of the documentary requirements of the application and the Inspection Report. The Validation Report shall also contain a summary of findings or highlights of the validation, including but not limited to the review of submitted documents, ocular inspection, and site visit.

c. To validate the CSO's multi-regional presence, the Central Secretariat may request the Regional Secretariat, where the applicant CSO's stated address and/or area of operations are located, to conduct site visits or ocular inspections. Upon receipt of the request, the Regional Secretariat shall immediately conduct an inspection. The Regional Secretariat which conducted the inspection shall prepare and transmit to the Central Secretariat the Inspection Report within five (5) working days from receipt of the request.

4. Assessment of Application

a. The Accreditation Committee shall evaluate the application and attached documents based on the criteria for accreditation provided in this order;

b. During the evaluation, the Accreditation Committee shall consider all information on record, including accomplishments and previous complaints; and

c. If the Accreditation Committee deems it necessary, it may conduct further background checks through any of the following:

- i. Require the CSO applicant to submit original or certified true copies in support of documents already submitted in case of questionable documents;
- ii. Interview or meeting with directors, trustees, officers, or key personnel of the CSO applicant, or any person with past or present substantial dealings with the CSO applicant;
- iii. Conduct further validation visits through the Secretariat, if necessary; and
- iv. Invite resource persons to give expert advice on Technical Areas, the Focus of Activity of the CSO applicant, or any other matter requiring technical assistance.

d. If the CSO applicant claims several Technical Areas or Foci of Activity, but the Accreditation Committee finds that the CSO applicant does not have sufficient experience, resources, and technical and financial capability for some of the claimed Technical Areas or Foci of Activity, the Accreditation Committee shall still recommend the issuance of a Certificate of Accreditation but only for the Technical Areas or Foci of Activity where the CSO applicant has sufficient experience, resources, and technical and financial capability.

e. In the assessment of applications, the respective DOH COA Resident Auditors and DOH Internal Auditors may be invited to attend all meetings of the Accreditation Committee as observers.

f. The Accreditation Committee shall endorse to the Undersecretary for HRT the application documents with a resolution recommending either approval or disapproval of the application within seven (7) working days from receipt of the application documents. In case of a recommendation approving the application, the resolution shall be accompanied by a draft Certificate of Accreditation. In case of a recommendation denying an application, the resolution shall be accompanied by a draft Letter of Disapproval stating the reasons for the denial.

5. Issuance of Certificate of Accreditation

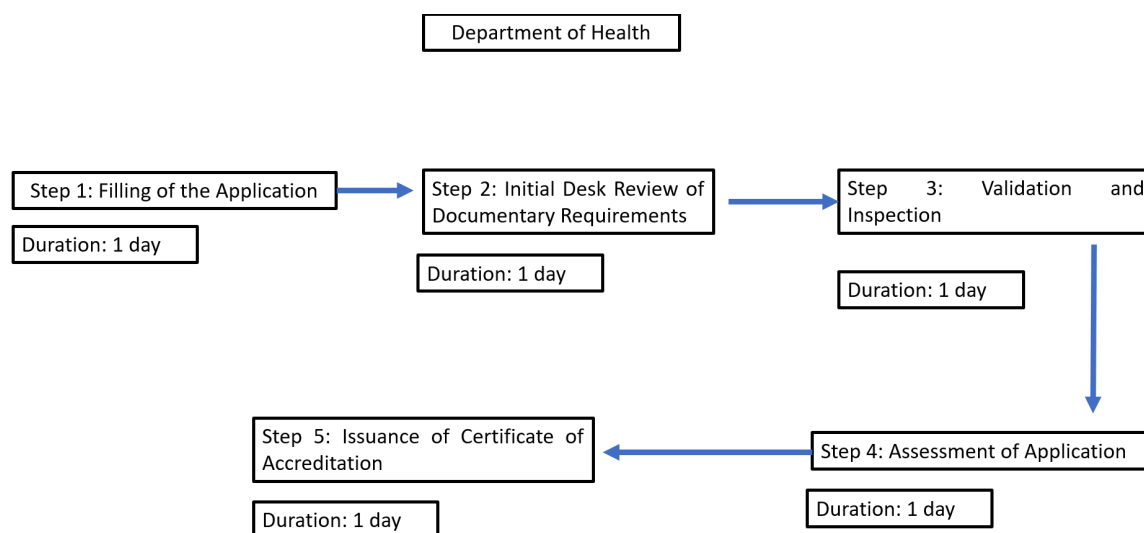
Within three (3) working days from receipt of the recommendation of the Accreditation Committee, the Undersecretary for HRT, or his authorized representative, shall take action on the application by either approving or disapproving the application.

In either case, the Undersecretary for HRT shall:

- a. Grant the application for accreditation by issuing a Certificate of Accreditation in favor of the CSO applicant, if the CSO applicant meets all the criteria for accreditation; or

b. Deny the application for accreditation by issuing a Letter of Disapproval, without prejudice to a reapplication for accreditation, unless otherwise disallowed under this order.

The decision of the Undersecretary for HRT regarding the accreditation may be appealed by submitting a Memorandum of Appeal to the Secretary of Health within (15) days from notice.



Notification and Record-keeping

1. After taking action on the application, the Undersecretary for HRT shall immediately forward copies of the application documents to the Central Secretariat and the Secretariat which received the application. Upon receipt of the application documents, the Central Secretariat shall immediately update the Central Registry of Accredited CSOs to update said Registry posted on the DOH website;
2. The Secretariat that received the application shall notify the CSO applicant of its application status, and release the Certificate of Accreditation or Letter of Disapproval, as may be proper.

Validity

1. Valid only for the Technical Areas or Focus of Activity specifically stated.
2. Valid for a period of three (3) years from the date of issuance unless sooner revoked. In no case shall the period of validity of a Certificate of Accreditation be extended.

3. The CSO may apply for renewal of accreditation ninety (90) days before the Certificate of Accreditation expires. In case of renewal, the concerned CSO shall still undergo the accreditation process upon submission of documentary requirements. However, the application for renewal shall be exempt from site inspection of the Secretariat for purposes of validation, unless otherwise directed by the Accreditation Committee.

Submit to:

Disease Prevention and Control Bureau

DOH San Lazaro Compound,
Rizal Avenue, Sta Cruz Manila 1003
dpcb@doh.gov.ph
dpcbtbhivsti@doh.gov.ph
8651-7800 local 1724

Department of Health

Permit to Construct and License to Operate Health Facilities

This is intended for CLOs facilitating testing and treatment services.

Overview

In 2017, the Department of Health (DOH) crafted its Administrative Order No. 2017-0019 titled "Policies and Guidelines in the Conduct of Human Immunodeficiency Virus (HIV) Testing Services (HTS) in Health Facilities. It mentioned that the 6th AIDS Medium Term Plan (2017-2022) recognized HIV counseling and testing strategy as one of the preventive interventions for key populations at risk. HIV testing is being promoted to KPs to assist them in knowing their status, and at the same time are provided with information on risk reduction strategies and referred to relevant support facilities.

To further bring the essential health services closer to the key affected population, more treatment hubs and satellite treatment hubs were established by DOH. Some of them function as "stand-alone" facilities dedicated to deliver HIV and AIDS related health services only, which can be private clinics or community centers.

Requirements

Before being accredited by Philhealth and be eligible for OHAT reimbursements, a health facility must first be accredited as a DOH-Designated HIV Treatment Hub or Primary HIV Care Facility through a formal issuance.

A DOH License to Operate (DOH-LTO) is a formal authority issued by DOH to an individual, agency, partnership or corporation to operate a hospital or other health facility; while a DOH Permit to Construct (DOH-PTC) is a permit issued by DOH through the Health Facilities and Services Regulatory Bureau (HFSRB) to an applicant who plans to establish and operate a health facility, upon compliance with required documents prior to the actual construction of the said facility. A DOH-PTC is also required for health facilities with substantial alteration, expansion, renovation, increase in the number of beds, transfer of site, or for additional services (add-ons) beyond their service capability. **It is a prerequisite for a License to Operate.**

Requirements	(X)/ (/)	Remarks
1. Application for a DOH Permit to Construct		
With the following documents:		
a. Letter of Application/Intent addressed to the Director of the HFSB		
b. Form No. 4-01: Application for Permit to Construct (notarized)		
c. Three (3) Sets of Site Development Plan and Floor Plan showing all areas with appropriate scale, dimension, and label (in blue/white print 20" x 30", scale 1:100) <ul style="list-style-type: none"> Signed and sealed by an Architect or Engineer 		
d. SEC Registration including the Articles of Incorporation and By-Laws		
e. Payment of applicable fees		
2. Accomplished License to Operate Form with Acknowledgement (notarized)		
3. List of Personnel		
4. Photocopies of proof of qualification and employment of the medical and paramedical staff		

Requirements	(X)/ (/)	Remarks
5. List of equipment/instrument		
6. Health Facility Geographic Form (Geographic Coordinates)		
7. SEC Registration with Articles of Incorporation and By-Laws		
8. Accomplished Health Facility Assessment Tool		

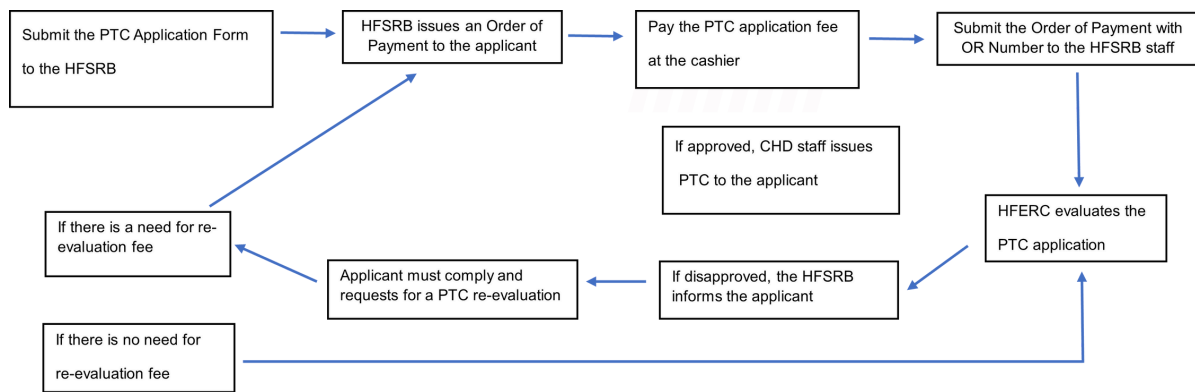
Accreditation Committee

The Health Facilities Evaluation and Review Committee (HFERC) shall facilitate the immediate evaluation of valid applications for the PTC. The CHD evaluates the applications for the LTO.

Process Flow

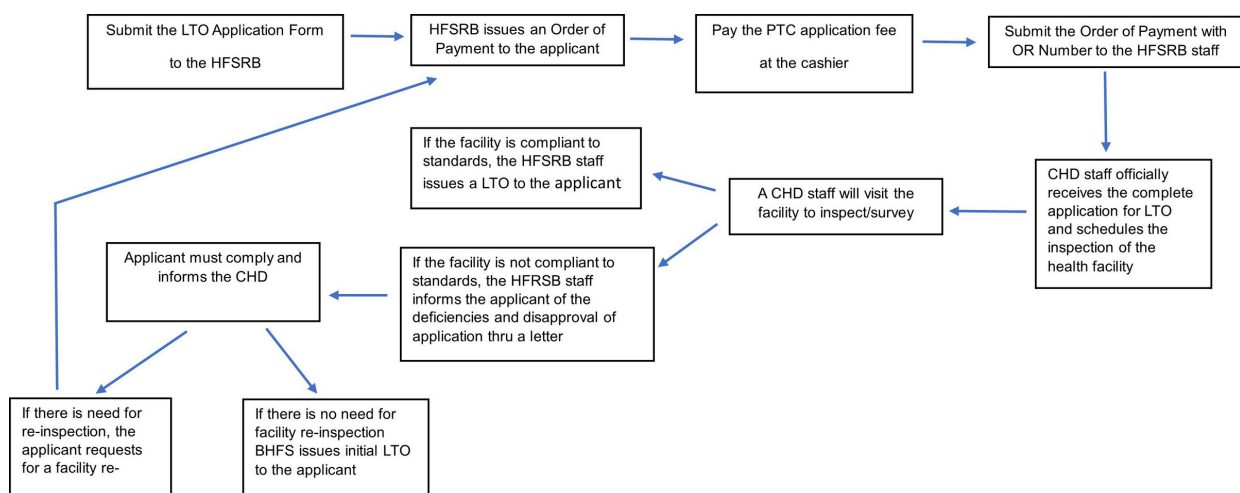
For the Permit to Construct

1. The Permit to Construct Application Form can be obtained from the HFSRB/CHD/DOH website.
2. Submit the PTC Application Form, together with the other documentary requirements, to the HFSRB.
3. The HFSRB issues an Order of Payment to the applicant.
4. Pay the PTC application fee at the cashier.
5. Submit the Order of Payment with OR Number to the HFSRB staff.
6. The HFERC evaluates the PTC application.
7.
 - a. If the application for PTC is approved, the CHD staff issues PTC to the applicant.
 - b. If the application for PTC is disapproved, the HFSRB informs the applicant of the reason for the disapproval of the application. The applicant must comply and requests for a PTC re-evaluation.
 - c. If there is a need for re-evaluation fee go back to step 3.
 - d. If there is no need for re-evaluation fee go back to step 6.



For the License to Operate

1. The License to Operate Application Form can be obtained from the HFSRB/CHD/DOH website.
2. Submit the LTO Application Form, together with the other documentary requirements, to the HFSRB.
3. The HFSRB issues an Order of Payment to the applicant.
4. Pay the LTO application fee at the cashier.
5. Submit the Order of Payment with OR Number to the HFSRB staff.
6. A CHD staff officially receives the complete application for LTO and schedules the inspection of the health facility within 30 working days.
7. A CHD staff will visit the facility to inspect/survey.
 - a. If the facility is compliant to standards, the HFSRB staff issues a LTO to the applicant.
 - b. If the facility is not compliant to standards, the HFSRB staff informs the applicant of the deficiencies and disapproval of application thru a letter. The applicant must comply and informs the CHD.
 - c. If there is need for re-inspection, the applicant requests for a facility re-inspection. Go back to step 3.
 - d. If there is no need for facility re-inspection BHFS issues initial LTO to the applicant.



Submit to:

DOH Center for Health Development Region I

Brgy. Parian, City of San Fernando, La Union 24500

Landline: (072) 6076413

DOH Cagayan Valley Center for Health Development

Maharlika Highway, Carig Norte, Tuguegarao City

Email: chdcvdoh@yahoo.com / dohregionaloffice2@gmail.com**Cordillera Center for Health Development**

BGHMC Compound, Baguio City, Benguet 2600

Telefax : (074) 4428097, 4428098

Email: chd_cordillera@yahoo.com.ph**Central Luzon Center for Health Development**

Diosdado P. Macapagal Government Center,

Brgy. Maimpis, City of San Fernando, Pampanga

Trunkline: 8613425

Email: rd@centralluzon.goh.gov.ph**Health Facilities And Services Regulatory Bureau**

1003 Rizal Ave, Santa Cruz, Manila, 1008 Metro Manila

Center for Health Development IV-A (CALABARZON)

QMMC Compound Project 4, Quezon City

Public Assistance Desk (PAD): 82492000 loc. 4400

Email Address: chd4a_doh_calabarzon@ro4a.doh.gov.ph**Center for Health Development – MiMaRoPa**

QMMC Compound, Project 4, Quezon City

Trunkline No. : (02) 891201-5

Mobile Number : 0917-5235424 | 09175397835 | 0908-8872336

Bicol Center for Health Development

Daraga, Albay

Landline: (052) 7425555

Email: records@bicol.doh.gov.ph / bicoldoh@gmail.com**Western Visayas Center for Health Development**

Mandurriao, Iloilo City, 5000 Iloilo

Trunk Line : (033) 332-2326/332-2329

Email: dohro6rdo@gmail.com**Central Visasay Center for Health Development**

_Osmena Boulevard, Cebu City

Trunk line : 2609740

Email: centralvisayas@ro7.doh.gov.ph**DOH Eastern Visayas Center for Health Development**

Gov't. Center, Brgy. Candahug, Palo, Leyte

Landline: (053) 8882735

Official Email: doh.regionaloffice@ro8.doh.gov.ph**Zamboanga Peninsula - Center for Health Development**

Upper Calarian, Zamboanga City 7000

Cellphone(Smart): 0947-6467663

Cellphone(Globe): 0995-8441783

Landline: (062) 9830314

Email: dohchdzp@yahoo.com**Center for Health Development - Northern Mindanao**

J. Serina St, Cagayan de Oro, 9000 Misamis Oriental

Landline: (088) 8587123

Davao Center for Health Development

J.P. Laurel Ave., Bajada, Davao City 8000

Landline: (082) 3051903/3051904/305-1906

Center for Health Development - SOCCKSARGEN

Purok San Miguel, Brgy. Paraiso, Koronadal City, South Cotabato
Koronadal City 9506
Trunkline: (083) 3200280
Email: dohsox@ro12.doh.gov.ph

Center for Health Development - Caraga

Narra Road & Pizarro Street, Jose Rizal Pob. (Brgy. 25)
Email: dohro13caraga@gmail.com

BARMM Ministry of Health

Bangsamoro People's Complex, Gov. Gutierrez Ave.,
RH 7, Cotabato City
Landline: (064) 5520110

E. The Philippine Health Insurance Corporation Outpatient HIV and AIDS Treatment (OHAT) Package

This is intended for CLOs facilitating testing and treatment services.

Overview

In support of the United Nation's Millennium Development Goal Number 6 to halt or reverse the incidence of HIV and AIDS by 2015, the Philippine Health Insurance Corporation (PHIC) through Board Resolution No. 1331, series of 2009 has approved the implementation of an Outpatient HIV/AIDS Treatment (OHAT) package that aims to increase the proportion of the population having access to effective HIV and AIDS treatment and patient education measures. Guidelines for providing accreditation and benefit delivery are defined in PhilHealth Circular 19, s-2010. This remedies the maldistribution of health care facilities and health professionals across the country, and removes needless barriers in accrediting health care providers.

PhilHealth launched the OHAT package in 2010 to improve the accessibility and affordability of HIV and AIDS treatment. This benefit aims to increase the proportion of the population having access to effective HIV and AIDS treatment and patient education measures. Its benefit coverage, support value, and utilization rate for this benefit package should be evaluated with already 13 years underway and continued growth in people infected with HIV and AIDS. Addressing underutilization and retention among PhilHealth members will involve expanding coverage benefits to patients at different stages of the disease, increasing patient awareness, and improving claims processes. However, expanding access to treatment must also be coupled with preventive programs for HIV at the primary care level to maximize the benefits of this intervention and minimize out-of-pocket expenses.

This OHAT package is based on the DOH Treatment Guidelines which covers preventive services such as laboratory examinations (lipid profile, complete blood count, serum creatinine, fasting blood sugar - depending on treatment regimen), counseling, consultations (personal, face-to-face within the facility, home visits or telemedicine), screening (for Tuberculosis) and diagnostic tests (using GeneExpert for MTB/RIF and radiologic examinations) and Antiretroviral Therapy (Client-centered or differentiated service delivery). While PhilHealth is mandated to grant accreditation to healthcare providers to confer them the privilege of participating in the health sector, they need to enhance the process of engaging the healthcare providers to improve the access of PhilHealth members to quality healthcare services.

Only HIV and AIDS cases confirmed by San Lazaro Hospital Reference Laboratory/STD AIDS Central Cooperative Laboratory (SLH-NRL/SACCL), Research Institute for Tropical Medicine (RITM), Certified rHIVda Confirmatory Laboratory (CrCI), or DOH-licensed laboratories with rHIVda services requiring treatment shall be covered by the package and availed from PhilHealth-accredited facilities that are DOH designated HIV Treatment Facilities.

LoveYourself's Experience

Initial partnership with RITM

Back in 2011, LoveYourself (LY) was still a small community-based organization (CBO). They were then tapped by Dr. Rossana 'Annie' Ditangco, Head of the HIV/AIDS Research Group, because RITM needed a strong partner in the community to reach the young MSM population. She had a project that entailed setting up a clinic in Malate, Manila for HIV testing. However, RITM had no capacity to man the facility. They were only able to provide the space, a full-time nurse, and a medical technologist. There was no budget for counselors and other staff. Thus, it was LoveYourself which provided the volunteers. But there was no formal accreditation that happened nor signing of a Memorandum of Agreement (MOA) at that time. The only agreement was that LY will take care of the counseling through recruitment of volunteers and the training of the counselors would be managed by RITM. It was very fortunate that Dr. Ditangco was able to train the volunteers adequately and LY had a group of dedicated volunteers. They were organized similar to how clans of MSMs were formed, but now with a purpose.

By 2014, LoveYourself's Anglo community center was already established with support from the Global Fund and focusing on Prevention services. The paid medical staff and overhead expenses were shouldered by RITM while the volunteers were from LY. All reactive clients were still referred to RITM and all of the commodities also came from them.

In 2016, LoveYourself Initiated a contract with RITM and the DOH National AIDS/STI Prevention and Control Program to run the 4S Project (Sensing, Synchronizing, Shifting, Sustaining) approach, which is designed to combine biomedical intervention as well as a psychosocial assistance. Anglo expanded from testing to treatment services with the aim for the community center to transition from being an RITM satellite clinic to an independent facility. RITM payments for human resources and operations under the contract were delayed, so its founder, Dr. Ronivin Pagtakhan, had to cover these to maintain community center operations.

LoveYourself calls this setup as a public-private partnership (PPP), because back then, the term social contracting was not yet being used in the HIV and AIDS community. But such engagement is indeed a form of social contracting, since the RITM is a research arm of the DOH (government) and LY is a civil society organization.

Basics of a Community Center

A community center is primarily designed for HIV Prevention services. Usually, a facility has a Prevention side and Treatment side. It is the Treatment side that must be applied for PhilHealth accreditation. In the case of LoveYourself, it has both. For the Prevention side, this is where the volunteer engagement comes in. This usually entails just HIV testing. If a CLO's capacity is only at Level 1 or the Prevention side, they then refer the clients to a Treatment facility. Level 1 is Prevention, Level 2 is Dispensing, and Level 3 is the complete one-stop shop.

Challenges in Philhealth Accreditation

LoveYourself Anglo received its DOH and PhilHealth accreditation first as a TB primary care facility (with support from KNCV-HIVOS and Mandaluyong City Health Office) in January 2017 because at that time, PhilHealth had no guidelines yet for standalone HIV primary care facilities. It was then accredited as an HIV primary care facility in June 2018, and for its laboratory in January 2019.

One of the main challenges experienced by LoveYourself in getting their PhilHealth accreditation was the funding. Even though Dr. Pagtakhan had his own personal resources which he used for the capital of the community center, there was no guarantee that he would be able to reimburse the money he loaned to the organization. For the initial renovation of the Anglo center as a TB-DOTS facility, the money came from his own personal resources. And as soon as LoveYourself was recognized as a stand-alone facility, the RITM immediately ceased all forms of support. They no longer paid for the manpower and overhead expenses, even for the commodities. Dr. Pagtakhan had to cover (via loan) the first six months of LoveYourself Anglo's "independence" (July-December 2018), until the organization received its first batch of OHAT reimbursements in 2019.

Admittedly, the delayed reimbursements from PhilHealth posed problems in maintaining the community center. The lengthy validation process usually takes 6-8 months. While the facility is waiting for its reimbursements, expenses are on-going. Also, not all reimbursements for the clients are given whole, like when a client does not continue their treatment. Even if LY already has 14,000 clients, not all of them are PhilHealth members, with some being students. But there are other grants that shell out for indigency. This is where they enroll such clients. So, while LY has the OHAT reimbursements, it is also working to mobilize donor funding.

Moreover, back in 2023, the laboratory in Anglo stopped its operation because it had to be renovated following the new standard/guidelines of the Regulation, Licensing, and Enforcement Division (RLED). They then complied and the laboratory is once again operational.

Are OHAT reimbursements worth it?

According to LoveYourself, it is worth it to be accredited for OHAT reimbursements as

long as the organization is ready financially and its structure is well-established. If their manpower is lacking or they do not have enough volunteers, the community center may not profit as much. LY also cautioned that if all the staff are regular employees, the fund from the reimbursements might run out quickly, thus the need for volunteers.

At present, LY does not have its own office or space for the community center and is still renting all of its spaces. They are thus advising CLOs to find a suitable place to establish their facilities that would be accessible to potential clients. Additionally, LY stressed the importance of having the clients enrolled to Treatment so that they will be eligible for OHAT reimbursement.

Furthermore, LoveYourself estimates that a PhilHealth-accredited stand-alone HIV primary care facility can become self-sustaining at the 300-500 client mark. A client's confirmatory test is one requirement for PhilHealth to facilitate OHAT reimbursements; delays in the release of confirmatory tests have severely limited the number of clients eligible for OHAT enrolment and the facility's potential returns. Fortunately, with the release of the Guidelines on the Implementation of Rapid HIV Diagnostic Algorithm (rHIVda), the turnaround for the test results has been faster. LoveYourself is now also a rHIVda site and is able to release its own results and use these to initiate PhilHealth reimbursements.

Requirements

Requirements	(X)/ (/)	Remarks
1. DOH License to Operate		
2. Performance Commitment		
3. Updated certificates issued by the DOH/CHD or any other 3rd party accrediting body duly recognized by PhilHealth (if applicable)		
4. Latest Audited Financial Statement		
5. Proof of payment of the participation fee		

Accreditation Committees

PhilHealth Regional Office (PRO) Committee

Levels of Participation

Participation consists of two levels:

A. Basic Participation pertains to the minimum level of participation granted by PhilHealth that complies with all the registration requirements including their Performance Commitment and passing the Pre-accreditation Survey (PAS), where applicable; and

B. Advanced Participation pertains to a higher level of participation granted by PhilHealth to health care providers already engaged for Basic Participation who are able to comply with all the criteria/requirements set by PhilHealth and pass the mandatory Survey for Advanced Participation (SAP).

Application Process

Basic Participation

Healthcare providers may apply for participation by submitting the following:

1. Application

a. Performance Commitment: duly signed by Owner and the head of the facility/ Medical Director/ Chief of Hospital. It must reflect the service capabilities of the provider;

b. Provider Data Record (PDR): properly accomplished electronic copy (applicable only for initial engagement and for the transition period). This should be updated immediately upon the concurrence of any change of material information stated in the profile;

c. DOH License To Operate (LTO): Name of the healthcare institution in the DOH LTO is that of the applicant HCI. Validity of the DOH LTO shall cover the period applied for. Proof of three years operation prior to application or conditions for exemption.

d. Participation Fee - Proof of payment;

e. Latest Audited Financial Statement as stated in item A.1.a of PhilHealth Circular No. 31, s-2012 reflecting the income/payments received from PhilHealth;

f. Electronic copies of recent photos of the facility, both the interior and outside surroundings completely labeled with the name of the facility and date taken. Submission shall not be on a yearly basis; providers shall immediately update/ submit pictures;

g. Statement of Intent (SOI): applicable to all health care providers except primary care benefit 1 providers, which applied for initial engagement from September to December of the current year. The SOI allows healthcare providers to choose the preferred start date of their engagement;

h. Non-automatically accredited Institutional Health Care Providers (IHCPs) shall be subjected to a PAS. If deficiencies are noted during the PAS, the healthcare provider shall be given sixty (60) days from the last day of the survey to comply with or correct the deficiencies. The result of the PAS shall be part of the agenda for deliberation and decision by the PhilHealth Regional Office (PRO) Accreditation Sub-Committee or by the Accreditation Committee should it be referred by the PRO accreditation subcommittee.

2. Approval Process

The PRO shall review the documents submitted by the IHCP and approve their application if found compliant with all requirements. It shall issue the Certificate of Eligibility to Participate (CEP) within seven (7) calendar days from receipt of complete requirements of IHCPs for automatic accreditation, or approval of application by the Regional Vice President. The effectivity date of initial engagement of IHCPs which apply from January to August shall be on the date of compliance, while for initial applications filed from September to December, the start date shall either be upon compliance with requirements or on the next engagement cycle whichever the preference of the health care provider (as expressed in its SOI) except for Primary Care Benefit 1 (PCB1) providers, in which case the effectivity date shall be on the next quarter.

3. Denied Applications

Healthcare providers with denied application/gap in the validity or downgrading of category may file a Motion for Reconsideration (MR) with the Accreditation Committee within thirty (30) calendar days from receipt of the decision. IHCPs with denied MR may either file an appeal addressed to the PhilHealth Board of Directors within fifteen (15) calendar days from receipt of the notice of denial of MR or opt to file another application for engagement.

4. Payment rate for health care services

The healthcare providers under Basic Participation shall be paid based on the basic rates for services set by PhilHealth.



Advanced Participation

Healthcare providers may apply for Participation by submitting the following:

1. Application

- a. Letter of Intent for Advanced Participants;
- b. Accomplished self-assessment tool for Advanced Participation with a passing score. The tool shall consist of two (2) modules: Financial Risk Protection (FRP) Module and Quality Health Care Modules. Healthcare providers accredited by an International Accrediting Organization (IAO) duly recognized by PhilHealth that applied for Advanced Participation will not be assessed for the Quality Health Care Module; and
- c. Advanced Participation Fee.

2. Approval Process

The application for Advanced participation shall be processed as follows:

- a. Healthcare provider applications for advanced participation shall be initially assessed by the PhilHealth Regional Office for completeness of requirements/documents;
- b. A survey team consisting of representatives from the AQAS, BMU, and legal office of the concerned PRO and Health Finance Policy Sector (HFPS) shall conduct the Survey for Advanced Participation (SAP) within thirty (30) calendar days from receipt of the complete requirements. Healthcare providers shall be informed of the survey;
- c. During the exit conference, the survey team shall issue a post-SAP report that will be acknowledged and signed by both PhilHealth surveyors and the healthcare provider representatives. A more detailed assessment summary shall be sent to the healthcare providers not later than seven (7) calendar days after the conduct of SAP;
- d. The application of a healthcare provider found to be non-compliant or deficient during the survey shall be recommended for denial;
- e. The Accreditation Committee shall deliberate applications for Advanced Participation and shall submit its recommendation to the President/CEO for approval. The decision of the PhilHealth President/CEO shall be final and executory;
- f. No Motion for Reconsideration/appeal shall be entertained for denied applications. Healthcare providers with denied applications for Advanced Participation shall continue to participate in the National Health Insurance Program (NHIP) through Basic Participation. They may re-apply for Advanced Participation in the subsequent year/s.

3. Termination of Advanced Participation

Any adverse change/s in the license-to-operate of the healthcare providers such as the downgrading of its category and gap in the validity or adverse finding/s during monitoring shall be grounds for termination of the Advanced Participation of said healthcare provider after due process.

4. Awards and Incentives

Healthcare providers who are granted Advanced Participation shall be entitled to awards and incentives to recognize their exemplary performance, particularly in areas of ensuring financial risk protection and quality of care.

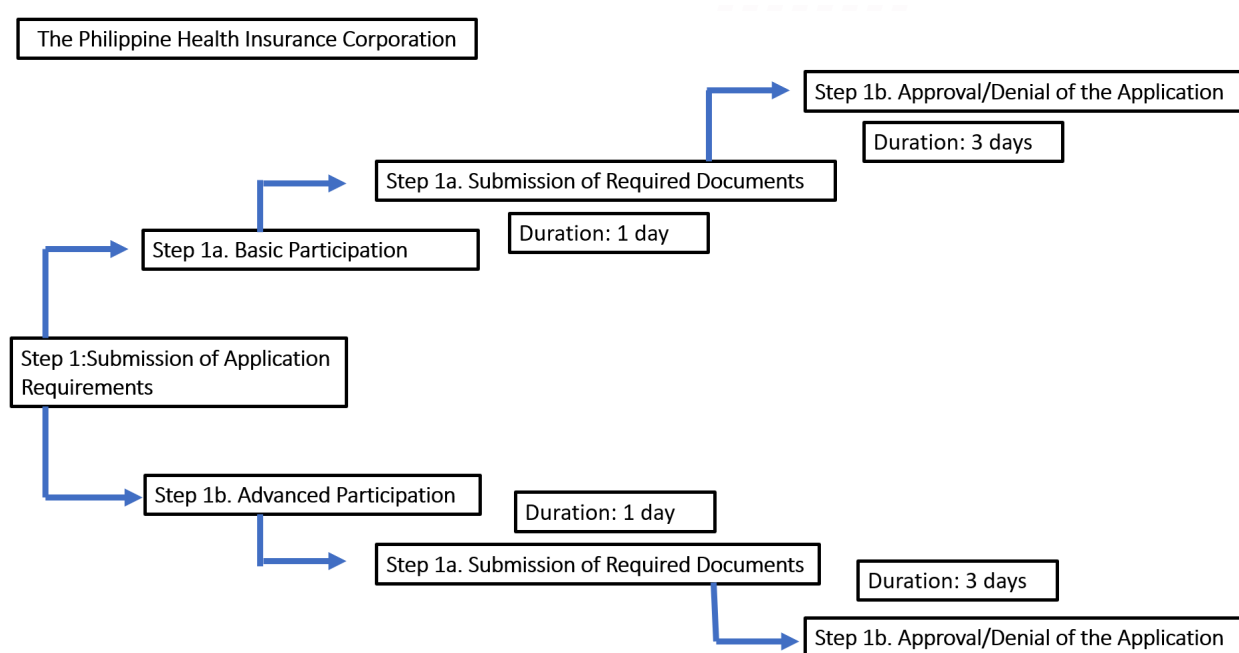
These awards and incentives shall include, but are not limited to the following:

- a. National Recognition
- b. Administrative Rewards (e.g. faster release of payments than healthcare providers under the Basic Participation)
- c. Financial Incentives (e.g., bonus payments)

Continuous Participation

Engaged healthcare providers either through Basic and Advanced Participation may continuously participate in the NHIP until such participation is withdrawn or terminated based on the rules set by the PhilHealth. These healthcare providers are required to submit the following on or prior to January 31, every year.

The respective PROs shall send through email a reminder letter to the healthcare provider on the 31st day of January and another one on the 15th day of February if the requirements are not submitted/completed before the said date. If the healthcare provider fails to submit/complete the said requirements by the end of February despite two (2) reminder letters, claims for admissions beginning March 1 and onwards shall be denied until the healthcare provider submits the requirement/s. If the license of the Ambulatory Surgical Clinic or Freestanding Dialysis Clinics or the certificate of the TB DOTS provider expires within the year, the IHCP shall be given sixty (60) days within which to submit the updated license or certificate. If the healthcare provider fails to submit such requirement within the sixty (60) day period, claims for admissions beginning on the 61st day and onwards shall be denied until the IHCP submits the requirement/s.



Accreditation of Stand-Alone HIV Treatment Hubs and Satellite Treatment Hubs as Providers of PhilHealth Outpatient HIV/AIDS (OHAT) Package

Stand-alone HIV and satellite treatment hubs are health care institutions operating independently from a PhilHealth-accredited facility. They are recognized as such by the DOH and are responsible for providing ART and other services to PLHIVs based on current treatment guidelines. Satellite treatment hubs are also called Primary HIV Care facilities. In order to increase the access of PhilHealth members and dependents to the OHAT Package, PhilHealth will engage these facilities as providers of the Package.

The accreditation of stand-alone HIV treatment hub in addition to the existing ones means greater access to member and patients who are living with HIV.

General Guidelines

1. DOH-recognized HIV treatment hubs and primary HIV care clinics listed on the latest DOH Department Memorandum are qualified to apply for accreditation as providers of the OHAT Package.
 - a. PhilHealth -accredited health facilities shall submit the following:
 - a.1 The latest copy of DOH issuance or a DOH certification that includes the facility as a DOH-certified treatment facility; and
 - a.2 A new performance commitment that will include OHAT Package as one of their services.

b. Health facilities that only provide HIV healthcare services and not accredited by PhilHealth for any type of benefit may apply as stand-alone HIV treatment facilities subject to existing guidelines[1].

2. The process of accreditation shall be in accordance with the existing guidelines on accreditation of HCIs and its subsequent revisions.

3. In line with PhilHealth policies that professional services must be provided by accredited health care professionals, physicians in HIV treatment facilities must be PhilHealth-accredited. They may file their applications for accreditation along with the application of the health facility if they are not yet accredited

4. As prescribed by PhilHealth Circular No.2, s-2014 (Enhanced Health Care Institution Portal), HCIs shall have the HCI Portal installed in their facility upon approval of their application as an OHAT provider. To ensure confidentiality, this shall be a separate user account from the one used by the facility for its general admissions and other PhilHealth claims, solely dedicated for OHAT claims. It shall only ensue once the HCI's accreditation is approved

5. HIV treatment facilities are required to create a trust fund or its equivalent (for private-owned health facilities) for reimbursement of OHAT Package.

Availment of OHAT Package

1. The Outpatient HIV/AIDS Treatment (OHAT) Package shall be paid up to Nine Thousand Seven Hundred Fifty Pesos (Php 9,750.00) per quarter. Annual reimbursement is set at a maximum of Thirty Nine Thousand Pesos (Php 39,000.00).

2. Only HIV and AIDS cases confirmed by the San Lazaro Hospital Reference Laboratory/STD AIDS Central Cooperative Laboratory (SLH-NRL/SACCL), Research Institute for Tropical Medicine (RITM), Certified rHIVda Confirmatory Laboratory (CrCI) or DOH-licensed laboratories with rHIVda services; and requiring treatment shall be covered by the package.

3. Excluded in this OHAT Package are the following:

- a. Diagnosis of HIV and AIDS with no laboratory confirmation;
- b. Management of patients for pulmonary tuberculosis co-infection;
- c. Illness (opportunistic infections) secondary to HIV and AIDS that requires hospitalization; and
- d. HIV and AIDS cases requiring confinement are covered under the regular in-patient benefit of PhilHealth.

[1] PhilHealth Circular No. 2018-0004 Accreditation of Stand-Alone HIV Treatment Hubs and Satellite Treatment Hubs as Providers of PhilHealth Outpatient HIV/AIDS Treatment (OHAT) Package

4. A separate package for TB-DOTS may be reimbursed in accredited TB-DOTS facilities. A member may avail of both the OHAT and TB-DOTS packages simultaneously.
5. This package shall only be availed from PhilHealth-accredited facilities that are DOH designated HIV Treatment Facilities.
6. Package shall be based on the latest HIV treatment guidelines prescribed by the Department of Health. All accredited OHAT facilities shall follow the guidelines set by the DOH [2].
 - a. Based on the DOH treatment guidelines, antiretroviral therapy (ART) shall be initiated in all persons with confirmed positive HIV test result regardless of clinical and immunologic status.
 - b. The following minimum services prescribed by the guidelines shall be provided to OHAT beneficiaries:
 - b.1 Adherence counseling and other counseling services;
 - b.2. Consultations which include face to face consultations within the facility, home visits, or via telemedicine;
 - b.3 Client-centered or differentiated service delivery for initiation and maintenance of ART;
 - b.4 Early identification of TB among PLHIV including diagnosis through GeneXpert for MTB/RIF and radiologic examinations (as indicated);
 - b.5 Monitoring of toxicity of antiretroviral drugs including laboratory examinations such as lipid profile, complete blood count, serum creatinine, fasting blood sugar (depending on treatment regimen);
 - b.6 Monitoring of response to ART including viral load testing;
 - b.7 Diagnosis and management of treatment failure including genotyping (as indicated)
 - b.8 Diagnosis, management, and prevention/prophylaxis of opportunistic infection (i.e., CD4 count, diagnostic tests and procedures, and prophylaxis drugs);
 - b.9 Prevention of hepatitis B virus infection including HBsAg screening and Hepatitis B vaccination as indicated.

Process Flow for OHAT Reimbursements

1. The OHAT Facility shall only file one claim for each patient per quarter regardless of the number of consultations/patient encounters or provision of services. However, if no services are provided based on the guidelines prescribed minimum services (i.e., no consultation), there will be no payment for that quarter. The package will be claimed and paid at Nine Thousand Seven Hundred Fifty Pesos (Php 9,750.00) maximum per quarter, payable to the health facility.

[2] Department of Health Administrative Order 2018-0024. Revised Policies and Guidelines on the Use of Antiretroviral Therapy (ART) among People Living with Human immunodeficiency virus and HIV-exposed infants

Moreover, the date during the applicable quarter when the patient obtained any HIV or HIV-related services (such as consultation, refill of antiretroviral drugs, and laboratory tests) from the OHAT facility shall be considered as the admission date. If there are several patient encounters for that quarter, the health care provider shall choose only one of them as the date of admission. The discharge date shall be the same as the admission date.

2. The OHAT Package is covered in PhilHealth Circular No. 2021-0012 (Modification on the Payment Rules of Benefits Packages under All Case Rates (ACR) Policy including COVID-19 Benefit Packages). To facilitate the processing of claims, all health services that were charged to PhilHealth must be included in the total actual charges reflected in Claim Form 2 and the Statement of Account or its equivalent. If there were several patient encounters during the applicable quarter, the services therein should be included in the total actual charges.

Submit to:

PHILHEALTH Region I Office

Akia Building, Old De Venecia Highway
Dagupan City, Pangasinan
(075) 515-1111
region1@philhealth.gov.ph

PHILHEALTH Region II Office

The Builder's Place, Del Rosario St. Tuguegarao City, Cagayan 3500
(078) 255-1342; (0917) 8357544
info.pro2@philhealth.gov.ph

PHILHEALTH Cordillera Administrative Region

SNOBT, Inc. Building, No. 19 Leonard Wood Road, 2600 Baguio City
(074) 444-5345; 444-8361; 444-9862
car@philhealth.gov.ph

PHILHEALTH Region III-A

G/F PhilHealth Bldg., Lazatin Blvd., San Agustin,
San Fernando City, Pampanga C-2000
(045) 961-1977; (045) 961-3949 loc. 4330

PHILHEALTH Region III-B

The Cabanas Mall of Malolos 2nd and 3rd floors N4 Bldg.
Km. 44/45 MacArthur Highway Longos, Malolos City, Bulacan
(044) 796-1559; (044) 796-1560 loc. 4400

PHILHEALTH National Capital Region

VCP Building, Block 56, Lot 11, 68 Kalayaan Avenue
Teacher's Village West, Quezon City
(02) 8441-5673

PHILHEALTH Region IV-A

Lucena Grand Central Terminal, Brgy. Ilayang Dupay, Lucena City
(042) 373-7554
member.pro4a@philhealth.gov.ph

PHILHEALTH Region IV-B

Xentro Mall Batangas City, Diversion Road, Brgy. Alangilan,
Batangas City, Batangas
region4b@philhealth.gov.ph

PHILHEALTH Region V

ANST IV Bldg., Benny S. Imperial Drive,
Legazpi City, Albay
Healthline: (052) 481-5596

PHILHEALTH Region VI

Gaisano Capital Building, Luna Street, Lapaz, Iloilo City
(033) 501-9160 to 62 loc. 100/102
region6@philhealth.gov.ph

PHILHEALTH Region VII

7th and 8th Floor, Skytower, N. Escario Street corner Acacia Street,
Cebu City 6000

PHILHEALTH Region VIII

Brgy. 24, P. Burgos Street, Tacloban City, Leyte
(053)325-3563; (053) 523-1195 (Fax)
info.pro8@philhealth.gov.ph

PHILHEALTH Region IX

BGIDC Corporate Center, Gov. Lim Ave., Zamboanga City
(062) 992-2739 (fax)
region9@philhealth.gov.ph

PHILHEALTH Region X

8F Gateway Tower 2, Limketkai Center, C.M. Recto Avenue, Cagayan de Oro City
(088) 859-0225
region10@philhealth.gov.ph

PHILHEALTH Region CARAGA

Lynzee's Building, 766 J. Rosales Avenue,
Butuan City
(085) 342-0900; (085) 816-0019; (085) 225-7026 loc. 101-103
caraga@philhealth.gov.ph

PHILHEALTH Region XI

Valgosons Bldg., Bolton Ext., Poblacion District, Davao City
(082) 295-2133 loc. 6314 / (082) 295-0151
region11@philhealth.gov.ph;
pro11.orvp@gmail.com

PHILHEALTH Region XII

CSA I Building Cor. Zulueta Street, General Santos Drive, Koronadal City
(083) 228-9731 to 34 (fax); (083) 228-4733
region12@philhealth.gov.ph
admin.pro12@philhealth.gov.ph

F. Department of the Interior and Local Government

Intended for CLOs engaged in managing shelters that were funded by LGUs, facilitating testing, and providing education as resource speakers or orientation which entail certification.

Overview

The Department of the Interior and Local Government (DILG) assists LGUs to effectively and efficiently deliver services to their constituents. It formulates policies, plans, and programs to enhance local autonomy, focusing mainly on the administrative, technical, and fiscal capacities of LGUs. In relation to this, it issued various Memorandum Circulars that ensure local government units comply with the accreditation process of non-government organizations and peoples' organizations in reiteration of the requirements and mandates provided by the Local Government Code of 1991. It ensures that a substantial number of LGUs conform to the law requirement to ensure NGOs at the grassroots level undergo a rigid accreditation process.

The DILG's CSO accreditation process is stipulated in Memorandum Circular 2022-05 (Guidelines on the Accreditation of Civil Society Organizations to Co-Implement DILG Programs and Projects).

Requirements

CSOs that intend to facilitate Voluntary Engagements:

Requirements	(X)/ (/)	Remarks
1. Fully-accomplished Application or Form A		
2. Letter of intent to apply for accreditation		

Requirements	(X)/ (/)	Remarks
3. Certificate Under Oath		
4. Organizational Chart of the CSO		

For CSOs that intend to facilitate Voluntary Engagements with Government Cost:

Requirements	(X)/ (/)	Remarks
1. Fully-accomplished Application or Form A		
2. Letter of intent to apply for accreditation		
3. Certificate Under Oath		
4. Organizational Chart of the CSO		
5. Data Sheet of the CSO containing the names, positions, and updated contact details of its current directors, trustees, officers, and key personnel		
6. Annual Accomplishment Report for the Immediately preceding year of Brochure or Profile of the CSO		

Requirements	(X)/ (/)	Remarks
<p>7. Copy of Resolution of the CSO's governing board authorizing the CSO to apply for DILG accreditation and the individual applying on its behalf, authorizing the DILG and/or Commission on Audit to inquire into the CSO's bank accounts in case of department of investigations, according to Republic Act No. 1405 or the Bank Secrecy Law and authorizing the DILG to publish details regarding the project or program, including the publication of quarterly reports, following the provision of Republic Act No. 10173 or the Data Privacy Act of 2012</p>		
<p>8. A certified true copy of the Certification of Registration from any of the following agencies: Securities and Exchange Commission (SEC), Cooperative Development Authority (CDA), Department of Labor and Employment (DOLE), or Housing and Land Use Regulatory Board (HLURB), including the latest General Information Sheet or Articles of Incorporation/ Partnership</p>		
<p>9. Certified true copies of Audited Financial Reports/ Statements and Annual Income Tax Returns as filed with the Bureau of Internal Revenue for the past three (3) years</p>		

Requirements	(X)/ (/)	Remarks
(Continuation) For those which have been in operation for less than three years: Financial Statement or Report signed by the executive officers of the organization for the year/s it has been in operation, and indicating therein other information such as the source(s) of funds		
10. Original Sworn Certification issued by the Chief Executive Officer, stating that the CSO is not default or delay in liquidating any funds received from any government agency that neither the CSO nor any government agency, that neither the CSO nor any of its past or present directors, trustees, officers or key personnel has been blacklisted by any government agency		
11. Original Certificate of Good Standing issued not more than three (3) months before the date of application by the responsible officer or any umbrella organization, federation, or coalition to which the CSO may belong to, if applicable.		

For CSOs that intend to provide goods and services:

Requirements	(X)/ (/)	Remarks
1. Fully-accomplished Application or Form A		
2. Letter of intent to apply for accreditation		
3. Certificate Under Oath		
4. Organizational Chart of the CSO		
5. Data Sheet of the CSO containing the names, positions, and updated contact details of its current directors, trustees, officers, and key personnel		
6. Annual Accomplishment Report for the Immediately preceding year of Brochure or Profile of the CSO		
7. Copy of Resolution of the CSO's governing board authorizing the CSO to apply for DILG accreditation and the individual applying on its behalf, authorizing the DILG and/or Commission on Audit to inquire into the CSO's bank accounts in case of department of investigations, according to Republic Act No. 1405 or the Bank Secrecy Law		

Requirements	(X)/ (/)	Remarks
(Continuation) and authorizing the DILG to publish details regarding the project or program, including the publication of quarterly reports, following the provision of Republic Act No. 10173 or the Data Privacy Act of 2012.		
8. A certified true copy of the Certification of Registration from any of the following agencies: Securities and Exchange Commission (SEC), Cooperative Development Authority (CDA), Department of Labor and Employment (DOLE), or Housing and Land Use Regulatory Board (HLURB), including the latest General Information Sheet or Articles of Incorporation/ Partnership		
9. Certified true copies of Audited Financial Reports/ Statements and Annual Income Tax Returns as filed with the Bureau of Internal Revenue for the past three (3) years. For those which have been in operation for less than three years: Financial Statement or Report signed by the executive officers of the organization for the year/s it has been in operation, and indicating therein other information such as the source(s) of funds;		

Requirements	(X)/ (/)	Remarks
10. Original Sworn Certification issued by the Chief Executive Officer, stating that the CSO is not default or delay in liquidating any funds received from any government agency, that neither the CSO nor any of its past or present directors, trustees, officers or key personnel has been blacklisted by any government agency		
11. Original Certificate of Good Standing issued not more than three (3) months before the date of application by the responsible officer or any umbrella organization, federation, or coalition to which the CSO may belong to, if applicable		
12. Original Certification of No Derogatory Record, or its equivalent issued by any of the following agencies: SEC, CDA, DOLE, HLURB or any national government organization empowered to certify such organization		
13. Original Sworn Certification, issued not more than three (3) months before the date of application, by the head of the government agency and local chief executive appearing in the Application Form, stating the PPA that the CSO implemented or is implementing with the government agency, and that the CSO has no derogatory record with the government agency		

For CSOs with existing valid accreditation from other national government agencies (NGA) or their local sanggunian or certification from the Philippine Council for NGO Certification (PCNC), they shall only submit the following:

Requirements	(X)/ (/)	Remarks
1. Fully-accomplished Application or Form A		
2. Letter of intent to apply for accreditation		
3. Certificate of Valid Accreditation signed by the NGA or LGU from which they have an existing valid accreditation or certification from the PCNC. Depending on the validity of their submitted documents and the result of the evaluation, the organization may still be requested to submit additional requirements.		

Accreditation Committees

a. National Accreditation Committee

Position	Assigned Person
Chairperson	Secretary, Department of the Interior and Local Government
Vice-Chairperson	Director, Bureau of Local Government Supervision

Position	Assigned Person
Members	Director, Bureau of Local Government Development Director, Office of Project Development Services Director, National Barangay Operations Office Representative, Legal and Legislative Liaison Service Representative, DILG Resident Commission on Audit
Secretariat	The Civil Society Organizations/People's Participation Partnership Program – Program Management Office (CSO/PPPP PMO) shall serve as the Secretariat to the National Accreditation Committee.

* Representatives from the Bureaus and PMOs shall attend all meetings wherein the application concerns their handled program and/or project.

b. Regional Accreditation Committee

Position	Assigned Person
Chairperson	Regional Director
Vice-Chairperson	Assistant Regional Director
Members	Provincial Director (where the applicant operates) City Director (for Highly Urbanized City where the applicant operates) Chief, Monitoring and Evaluation Division Chief, Capability Development Division Chief, Finance and Administrative Division Chief, Project Development and Monitoring Unit Representative, Legal Services Unit Representative, Commission on Audit
Secretariat	The Regional Director shall designate a Secretariat to the Regional Accreditation Committee, composed of at least three (3) members

c. Provincial Accreditation Committee

Position	Assigned Person
Chairperson	Provincial Director
Members	Program Managers Cluster Heads Representatives (where the applicant intends to operate) Project Development and Monitoring Unit Head
Secretariat	The Provincial Director shall designate a Secretariat to the Provincial Accreditation Committee, which shall be composed of at least three (3) members

Process Flow

1. Filing of In-Person Applications

The applicant must submit complete documentary requirements as follows:

- a. National Accreditation Committee - for CSOs intending to co-implement DILG Programs, Projects, and Activities (PPAs) in multiple provinces, cities, and municipalities in more than one (1) region
- b. Regional Accreditation Committee - for CSOs intending to co-implement DILG (PPAs) in HUCs or multiple provinces, cities, and municipalities within a region
- c. Provincial Accreditation Committee - for CSOs intending to co-implement DILG (PPAs) in one or more cities or municipalities within the same province only.

2. Initial Assessment and Evaluation

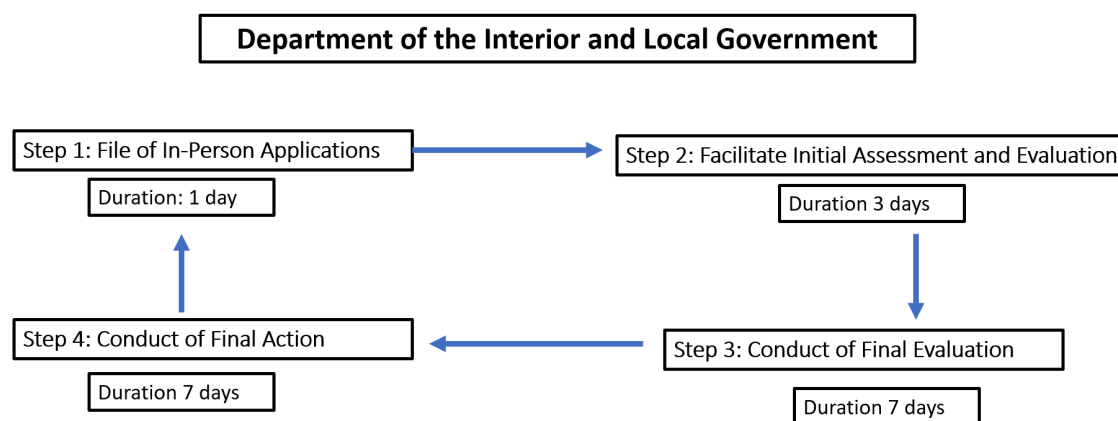
- a. If the documents are incomplete, the concerned secretariat shall, within two (2) working days, return the Application form and inform the Applicant of the deficiencies using the Notes/Remarks section.
- b. If the documents are complete, the Secretariat will assign a Document Number and Control Number to the Application Form and endorse the application to the concerned Bureau/Project Management Office including all the submitted requirements for final evaluation.

3. Final Evaluation: within five (5) working days from the receipt of completed documents from the concerned secretariat, the concerned Bureau/PMO, guided by their respective program or project guidelines, shall complete its evaluation of the applicant's eligibility.

The Bureau/PMO may require the applicant to submit additional documents and may also conduct interviews with any person or agency with substantial dealings with the applicant.

4. Final Action: Within two (2) working days, the Secretariat shall take final action on the application:

- a. For disapproved applications, the Secretariat shall prepare a Declination Notice
- b. For approved applications, the Secretariat shall recommend the final action to the accreditation committee together with the accreditation certificate. The Secretariat shall release the signed Certificate of Accreditation or Certification to the Applicant.



Submit to:

Department of the Interior and Local Government
 DILG-NAPOLCOM Center, EDSA Corner Quezon Avenue, West Triangle, Quezon City
 Philippines
 925-0330 / 925-0331
<https://www.dilg.gov.ph/public-assistance-center/>

G. Department of Social Welfare and Development

Intended for CLOs receiving funds from a particular Government Agency, implementing DSWD programs and/or projects in line with the implementation of the Ease of Doing Business Act, considered Social Work Agencies that directly engage in programs and services whether center or community-based, engaged in managing shelters that were funded by LGUs, facilitating testing and providing education as resource speakers or orientation which entails certification.

Overview

The Department of Social Welfare and Development (DSWD) is the government's regulatory arm for CSOs engaged in the delivery of social welfare and development programs and services. Specifically, it is a national agency mandated to assist local government units (LGUs), non-government organizations (NGOs), other national government agencies (NGAs), people's organizations (POs), and other members of civil society in effectively implementing programs, projects, and services that will alleviate poverty and empower disadvantaged individuals, families, and communities for an improved quality of life (Executive Order No. 15 issued in 1998). It also implements statutory and specialized programs that are directly lodged with the Department and/or not yet devolved to the LGUs (Executive Order No. 221 issued in 2003). These two issuances direct the DSWD to balance its "enabling and implementing" roles as it performs its crucial functions as one of the poverty alleviation agencies of the government.

Requirements for the Registration, Licensing and Accreditation of Social Work and Development Agencies (SWDAs)



Important Note:

Before a CSO can be accredited to implement DSWD projects and/or programs using DSWD funds, it must first be registered, licensed, and accredited as a Social Work and Development Agency (SWDA).

Classification of SWDAs

1. Public SWDAs - Managed by the government (national or LGUs) which are exempted from registration and licensing but its social work and development (SWD) programs and services are required to be accredited by the DSWD.
2. Private SWDAs - Non-stock, non-profit organization duly established and/or recognized under the laws performing SWD activities. These may be:

a. Social Work Agency - a private SWDA that directly engages in SWD programs and services whether Center-based and/or Community-based using social work interventions, whether case work, group work, or community organizing. It employs the services of a full time or part time social worker.

a.1. Center-based - refers to SWD programs and services rendered in a physical structure or facility.

a.2. Community-based - refers to the programs and services rendered in the community while they remain in their homes and/or with their families.

b. Auxiliary SWDA - a private SWDA which provides SWD programs and services to clients indirectly through provision of funds and/or in-kind, and/or capacitating staff of other SWAs through training, research, and advocacy.

Three Steps to SWDA Accreditation

1. Registration - the process of assessing the applicant's organization to determine whether its intended purpose is within the purview of SWD, where the determination of the same shall result in the inclusion of the organization in the DSWD's registry of SWDA.

2. Licensing - the process of assessing the qualifications and authorizing a registered SWDA to operate as a SWA or as an Auxiliary SWDA.

3. Accreditation - the process of assessing a licensed SWA if their SWDA programs and services are compliant to DSWD's set of standards.

Requirements for Registration

Any private SWDA that intends to engage in SWD shall apply for registration with the concerned DSWD office within six (6) months from registration with the SEC. Those already engaged in the implementation of SWD programs and services must simultaneously apply for registration and license to operate.

Requirements	(X)/ (/)	Remarks
1. Duly Accomplished and Notarized Application Form		
2. Processing fee of One thousand Pesos (P1,000.00)		

<p>3. Updated Copy of Certificate of Registration and latest Articles of Incorporation and By-laws</p> <ul style="list-style-type: none"> Indicating that the organization's primary purpose is within the purview of social welfare and development issued by SEC that gives a juridical personality to a non-stock non -profit organization to operate in the Philippines 		
<p>4. Copy of any of the following:</p> <ul style="list-style-type: none"> a. Handbook or Manual Operations of its programs policies and procedures to attain its purposes b. Brochure c. Duly signed Work and Financial Plan for at least two (2) Years by the Head of Agency 		

Process Flow

1. All applicants intending to apply for registration that are intending to operate within one (1) region shall file their application at the concerned Field Office (FO), while those that are intending to operate in more than one (1) region shall file at the Standards Bureau.
2. Only the application for registration with complete prescribed requirements shall be officially received and processed by the DSWD.
3. The concerned DSWD office shall review and assess the documentary requirements submitted.
4. Upon finding that the applicant is compliant to all requirements, the DSWD shall issue a Certificate of Registration.
5. The qualified SWDA shall then be included in the DSWD list of registered SWDAs.



Important Note:

The Certificate of Registration does not yet provide a legal authority to operate as SWDA. For those that would like to operate as soon as possible, they have to work and comply with the licensing prior its operation to prevent from being delisted from the registry of SWDAs and/or be imposed with sanctions. Otherwise, they have one (1) year to work on their license.

Requirements for Licensing

All registered private SWDAs which are not yet in operation upon registration, shall apply for a license to operate within one (1) year after issuance of Registration Certificate. Those already engaged in the implementation of SWD programs and services must simultaneously apply for registration and license to operate.

Requirements	(X)/ (/)	Remarks
FOR APPLICANTS INTENDING TO OPERATE		
1. Duly Accomplished and Notarized Application Form		
2. a) A certification of plan to hire the required Registered Social Worker (RSW) or staff complement; or b) Profile of Employees and volunteers, whichever is applicable		
3. Manual of Operation containing the SWDAs program and administrative policies, procedures and strategies to attain its purpose/s among others.		
4. Profile of Board of Trustees		
5. Certified true copy of General Information Sheet issued by SEC		
6. Notarized certification from the Board of Trustees and/or the funding agency to financially support the organization's capacity to operate for at least two 2 years		

7. Work and Financial Plan for the two (2) succeeding years		
8. Applicable processing fee		
FOR APPLICANTS ALREADY IMPLEMENTING PRIOR TO ITS APPLICATION		
1. Duly Accomplished and Notarized Application Form		
2. Manual of Operation containing the SWDAs program and administrative policies, procedures and strategies to attain its purpose/s among others		
3. Profile of Board of Trustees		
4. Profile of Employees and Volunteers		
<p>a. For the Social Work Agency, to consider the following staff requirement:</p> <ul style="list-style-type: none"> • a.1 At least one (1) RSW to supervise and take charge of its social work functions for residential care agencies and community based agencies that caters to beneficiaries that requires social case management. • a.2 For Center Based (Residential Based), to observe the caseload requirement of client ratio of the social worker and house parent 		

<ul style="list-style-type: none"> • a.3 For Center Based (Non-Residential Based), to observe at least one full time social worker for drop in center, processing center, and vocational rehabilitation center while for senior citizens center and the like, a part-time social worker is considered. • a.4 For Community Based, implementing community development or community organizing, any of the following shall be hired in full/part time basis per region: <ul style="list-style-type: none"> ◦ a.4.1. Graduate of Bachelor Degree in Social Work or Community Development; or ◦ a.4.2. Other professionals who have at least three (3) year work experiences in the field of social welfare and development • b. For Auxiliary SWDA, at least one (1) full time staff who will manage its operations 		
5. Certified true copy of General Information Sheet issued by SEC		
6. Certification of no derogatory information issued by SEC (for those operating more than six (6) months upon filing of the application)		
7. ABSNET Membership Certification from the Regional ABSNET (RAB) President or Chairperson of the Cluster ABSNET (CAB) or the authorized ABSNET		

Officer attesting the active ABSNET membership of the applicant SWDA. (Not applicable for first time applicants)		
8. Declaration of Commitment from the applicant SWDA of no support to tobacco in compliance with provisions of Executive Order No. 26 of 2017		
9. Duly signed Work and Financial Plan for the two (2) succeeding years		
10. Notarized certification from the Board of Trustees and/or the funding agency to financially support the organizations to operate for at least two (2) years		
11. Annual Accomplishment Report of the previous year		
12. Audited Financial Report of the previous year. Audited Financial Report submitted to SEC and/or Bureau of Internal Revenue (BIR) shall be accepted. However, financial report based on the DSWD template shall also be submitted. For those SWDAs with a total revenue of less than Five Hundred Thousand Pesos (P500,000.00), an unaudited financial statement prepared by the Financial Officer and concurred by the Head of Agency may suffice.		

13. Profile of clients/community being served for the preceding and current year		
14. Applicable processing fee		

Process Flow

1. All registered SWDAs that will operate within one (1) region shall file their application at the concerned Field Office (FO), while those that are intending to operate in more than one (1) region shall file at the Standards Bureau.
2. Only the application for licensing with complete prescribed requirements shall be officially received and processed by the DSWD.
3. The concerned DSWD office shall review and assess the documentary requirements submitted.
 - a. At least a one (1) day validation visit shall be conducted to further assess the compliance of the SWDA to the licensing requirements and criteria. The validation visit shall be based on the agreed schedule between DSWD and the applicant SWDA.
 - b. Upon finding that the applicant has administrative, technical, and financial capacity to operate and implement SWD programs and services, the DSWD shall issue a Certificate of License to Operate.
4. The qualified licensed SWDA shall then be included in the DSWD list of registered and licensed SWDAs.

SWD programs and services being implemented by SWAs shall be required to be accredited within the three (3) years validity period of the issued license to operate.



Important Note:

All licensed SWDAs shall submit an annual accomplishment report within the 1st quarter of the succeeding year using the DSWD template. Failure to submit the said report for two (2) consecutive years shall result to sanctions as provided under as provided under DSWD Memo Circular no. 17 series of 2018.

Requirements for Accreditation

The SWD programs and services to be assessed for accreditation shall include but not limited to: (1) Center-based and (2) Community-based.

1. Duly accomplished and Notarized Application Form		
2. Pre- Accreditation assessment conducted by concerned FO		
3. Duly Accomplished Pre-Accreditation assessment tool signed by the SWA's Head of Agency or Authorized Representative		
4. Certification of no derogatory information issued by SEC (except those operating for less than six (6) months upon filing of the application)		
5. ABSNET Membership Certification from the Regional ABSNET (RAB) President or Chairperson of the Cluster ABSNET (CAB) or the authorized ABSNET Officer attesting the active ABSNET membership of the applicant SWDA.		
6. Duly signed Work and Financial Plan for the two (2) succeeding years		
7. Notarized Update Certification from the Board of Trustees and/or the funding agency to financially support the organizations to operate for at least two (2) years		
8. Annual Accomplishment Report of the previous year		

9. Audited Financial Report of the previous year		
10. Profile of clients/community being served for the preceding and current year		
11. Certification from the SWA's Head of Agency on their observance and compliance to the provisions of Executive Order No. 26 of 2017 (Providing for the Establishment of Smoke- Free Environments in Public and Enclosed Places) and RA No. 9211 (Tobacco Regulation Act of 2003)		
12. Processing fee of One Thousand Pesos (P1,000.00) per program/area of operation		
Additional Requirements		
1. Manual of Operation		
2. Profile of Board of Trustees or its equivalent		
3. Profile of Employees and Volunteers <ul style="list-style-type: none"> • Staff requirement shall be based on Staff Client ration per standards on accreditation of specific programs and services 		
4. Certified true copy of General Information Sheet issued by SEC or any regulatory agencies		

<p>5. For Center Based (Residential Based and Non-Residential Based) Copy of the valid safety certificates namely:</p> <ul style="list-style-type: none"> • Occupancy permit (only for new buildings) or Annual Building Inspection/Structural Safety Certificate (for old buildings) • Fire Safety Inspection Certificate • Water Potability Certificate or Sanitary Permit 		
<p>For applicant with past and current partnership with the DSWD that involved transfer of funds:</p> <ol style="list-style-type: none"> 1. Certification from DSWD Office and/or other concerned government agencies that the applicant is free from any financial liability /obligation 		

Levels of Accreditation

Level 1 - compliant to mandatory indicators which should be complied to meet the accreditation standards. Accreditation certificate valid for three (3) years.

Level 2 - compliant to mandatory and higher set of indicators required for its work areas. Accreditation certificate valid for five (5) years.

Level 3 - compliant to mandatory indicators to meet the accreditation standards. Accreditation certificate valid for seven (7) years.

Process Flow

1. Pre-Assessment for Accreditation - for first-time application of accreditation, pre-assessment shall be administered by the concerned Field Office prior to the actual accreditation assessment of the SWD programs of the applicant SWDA by the Standards Bureau.

The existing accreditation tools shall be used as the pre-assessment tools in determining the readiness of the SWDA to meet the set standards on SWD programs and services being delivered to its clients.

2. All SWAs shall file their accreditation of their SWD programs and services at the Standards Bureau.

3. Only the application for accreditation with complete prescribed requirements shall be officially received and processed by the DSWD.
4. The Standards Bureau shall review and assess the documentary requirements submitted.
 - a. Accreditation assessment visit shall be conducted to applicants found with submitted complete requirements. The assessment visit shall be based on the agreed schedule between DSWD and the applicant SWDA.
 - b. Upon finding that the applicant meets the set standards, the DSWD shall issue the Certificate of Accreditation.
5. The qualified SWA shall then be included in the list of SWDAs with accredited SWD programs and services.

Benefits and Incentives of Licensed and/or Accredited SWDAs

Licensed SWDAs

- Eligible to become a member of the Area Based Standards Network (ABSNET), a strategy of the DSWD with the end goal of institutionalizing collaboration with SWDAs that are registered, licensed, and accredited by the Department. It aims to provide participative and consultative mechanisms in the areas of standards development; registration, licensing, and accreditation; capacity building; and technical assistance.
- Participation in DSWD's capability building and skills enhancement.
- Endorsement for duty-free entry of foreign donations subject to compliance with the requirements for the availment of foreign donations.
- Others as may be deemed appropriate by the DSWD.

SWAs with Accredited SWD Programs and Services

- Financial subsidy or resource augmentation for program implementation subject to availability of funds and compliance with the other DSWD guidelines and requirements.
- For Residential and Non-residential SWAs catering to senior citizens: Recommendation for at least 50% discount on service utilities subject to compliance with the DSWD and utility service providers.
- Letter and plaque of recognition

Additional benefits for Levels 2 and 3

- Nomination for local and foreign travel to participate in relevant training/conferences as part of the Philippine delegation, if any.
- Grant of cash incentive, depending on the availability of funds. The cash incentive shall be used to augment the SWDA's program expenses and funds shall be charged against the DSWD SB's budget.

- The amount of cash incentives shall not be lower than Thirty Thousand Pesos (P30,000.00) for Level 2.
- Minimum of Fifty Thousand Pesos (P50,000.00) for Level 3.
- Recommended for trainings and research e.g. Lakbay Aral (for Level 3).

Penalties

Any person, corporation, or entity operating as a SWDA without the corresponding Certificate of Registration and License to Operate issued by the DSWD shall be penalized with a fine of not less than One Hundred Thousand Pesos (P100,000.00) but not more than Five Hundred Thousand Pesos (P500,000.00) and/or imprisonment for not less than one (1) year but not more than three (3) years, at the discretion of the court. These penalties shall be without prejudice to the seizure of equipment, instruments, and other facilities of the SWDA.

Requirements for the Accreditation of CSOs to Implement DSWD Projects and/or Programs Using DSWD Funds

a. Overall Requirements

1. Must be a Social Work Agency (SWA) and must have operated for at least (3) three years;
2. Must be a licensed SWA with a validity period of at least (1) one year before it applies for accreditation as implementing CSO and the social welfare programs and services it is applying for is accredited in its geographical area(s) of activity;
3. Must not have any trustee, director, officer, or key personnel related within the fourth civil degree of consanguinity or affinity to any DSWD official involved in the processing of its accreditation or to any official or personnel of the DSWD funding or implementing the program and/or the project to be implemented or co-implemented by the applicant SWA;
4. Must be in good standing, has no default or delay in liquidating funds received from DSWD and/or any government agency as the case may be; and
5. Must not be concerned with any Tobacco Company in compliance with Administrative Order No. 11 series of 2019.

b. Documentary Requirements:

Requirements	(X)/ (/)	Remarks
1. Accomplished and Notarized Application Form (DSWD-SB-CSOA-001A)		
2. Proof of existence or presence of the CSO in its stated address and area of operation or organization: <ul style="list-style-type: none"> • Pictures of the Office and location (direction) sketch; and • At least one of the following documents: Barangay Certification or Certification or endorsement from at least two publicly known individuals in the community, other documents showing proof of existence 		
3. Proof of Organization, namely: <ul style="list-style-type: none"> • Organizational chart or governance structure; and • Date of organization, list of officers and members with complete names, date of birth (if known or registered), complete address, and contact numbers, if available 		
4. Photocopy of the Audited Financial Statements as received by the BIR/Authorized collecting bank for the past three (3) years		

Requirements	(X)/ (/)	Remarks
5. Data Sheet of the Directors, Trustees, Officers, and Key Personnel of the applicant CSO (DSWD-SB-CSOA-003A)		
6. Certificate of good standing from the government agency or agencies from which it has received such public funds, specifically stating liquidation following COA regulations, all fund transfers due for liquidation		
7. Certificate of Good Standing or Certificate of No Derogatory Information Issued by SEC		
8. One (1) Original Copy of the Duly Accomplished Declaration of Commitment according to AO No. 11 series of 2019		
9. DSWD website https://www.dswd.gov.ph/download/Documentsrelated-to-CSOAccreditation/list_of_forms_for_the_accreditation_of_csos_as_implementing_entities_of_government_or_public_funds/Declaration-of-CommitmentPursuant-to-AO-no.-11-s-2019.pdf		

Accreditation Committee

DSWD Central Office or DSWD Field Office

Process Flow

1. Submit the application form with other documentary requirements to the Standards Bureau (SB) of the DSWD Central Office.

If the application documents were filed at the Field Office (FO), the FO (Standards Section) shall provide the necessary technical assistance in terms of providing a checklist of the requirements (DSWD-SB-CSOA-007A) and advise the applicant to submit its application.

2. Wait for a notification relative to the application

a. If found complete, the SB will request the Field Office to conduct a Virtual/On-Site Validation Assessment. Posts notice to the public or invitation to submit the derogatory report (Within three (3) working days from the receipt of a derogatory report, the Standards Bureau, through a formal letter shall notify the applicant and require the same to submit an explanation/ comment within ten (10) working days from the receipt thereof. Please also refer to Section VI. No. 2 of MC 13 series of 2019);

b. If found incomplete, the SB will return all submitted documents to the applicant CSO with a letter and attached checklist (DSWDSB-CSOA-007A) indicating the lack of required documents;

c. If found with irregularities, documents will not be returned to the applicant which shall serve as evidence and a ground for blacklisting.

3. Conduct Virtual/ On-Site/ Validation Assessment of the applicant CSO's address or location

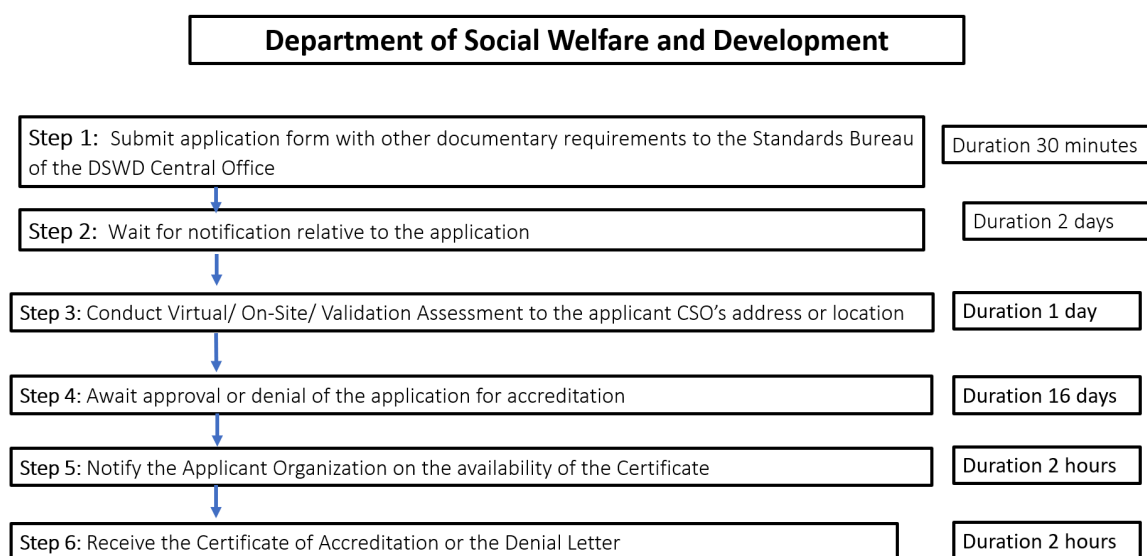
(If the applicant recently received its accreditation (as SWA) within six (6) months before the date of its application as an Implementing CSO, there is no need for a Virtual/ On-Site Validation Assessment, unless the declared projects and programs applied for accreditation requires further verification as per the assessment of the Standards Bureau staff);

4. Await the approval or denial of the application for accreditation

a. Prepare and submit the Virtual/On-Site Validation Assessment report to SB;

b. Conducts assessment and examination of application;

- c. Final Review and Evaluation (An Applicant may be required by the SB to submit additional sets of requirements that are deemed necessary to verify doubtful information and to establish compliance with appropriate policies);
 - d. Confirmation letter on the result of the evaluation;
 - e. Approval of the Certificate of Accreditation.
5. Notification of the Applicant Organization on the availability of the Certificate
 6. Receive the Certificate of Accreditation or the Denial Letter



Submit to:

- a. Standards Compliance Monitoring Division (SCMD) – Standards Bureau, DSWD Central Office
- b. Any DSWD Field Office - Standards Section (Regions I, II, III, IV-A, V, VI, VII, VIII, IX, X, XI, XII, CAR, Caraga, MIMAROPA & NCR)
- c. DSWD website
[https://www.dswd.gov.ph/download/Document s-related-to-CSOAccreditation/ list_of_forms_for_the_accreditation_of_csos_as_implementing_entities_of_gov ernment_or_public_funds/edited3.12.19DSWD-SB-CSOA-001A-ApplicationForm- Implementing-CSO.doc](https://www.dswd.gov.ph/download/Document%20s-related-to-CSOAccreditation/list_of_forms_for_the_accreditation_of_csos_as_implementing_entities_of_government_or_public_funds/edited3.12.19DSWD-SB-CSOA-001A-ApplicationForm-Implementing-CSO.doc)

H. The Philippine Government Electronic Procurement System (PhilGEPS)

Overview

The PhilGEPS is the single, centralized electronic portal that serves as the primary and definitive source of information on government procurement. Government agencies, as well as suppliers, contractors, manufacturers, distributors, and consultants, are mandated to register and use the system in the conduct of procurement of goods, civil works, and consulting services. Through the use of the PhilGEPS, transparency in government procurement is enhanced since opportunities to trade with the government and the ensuing transactions are provided online.

Under the Government Procurement Reform Act (GPRA) that was passed in 2003, the PhilGEPS became the single portal to serve as the primary source of all government procurement information. Since then, the system has grown to support over 9,000 government-procuring entities at the national and local levels and over 50,000 registered suppliers nationwide. Many stakeholders continue to benefit from the use of the PhilGEPS. The government has saved millions in advertising costs alone. It is also getting better prices and substantial savings in procurement administrative costs and time. With the continued increase in participation, it is providing greater opportunity to a growing number of small and medium enterprises and organizations and seeking to be a critical part of the overall national agenda for transparency and accountability.

The participation of non-state actors in monitoring public procurement has been in place before Republic Act 9184 or the Government Procurement Reform Act (GPRA) of 2003. The Local Government Code (LGC) in 1991 for example requires NGOs to be voting members of the pre-qualification bids and awards committee (PBAC), a local special body in the local government units (LGUs) that procures for that LGU (provinces, cities, and municipalities). The GPRA shifted the role of NGOs from being members to observers who are mandated to submit reports to the head of procuring entity (HOPE) as well as to other offices. Aside from the observer role of NGOs, the IRR of the GPRA also recognized NGOs as possible service providers under negotiated procurement (Sec. 53.11). The government also identified under Administrative Order No. 17 series of 2011 the development of monitoring tools within PhilGEPS for CSOs as a means to improve procurement services.

Currently, the PhilGEPS opens online registration for CSOs to attend procurement proceedings given the transparency measures in all stages of the government procurement process per section 13 of Republic Act 9184.

The agencies' Bids and Awards Committee (BAC) must invite at least two (2) observers. For the BACs to send out online invitations during the creation of the procurement activities in the system, observers must be registered users.

Requirements

CSOs may register online at www.philgeps.gov.ph and must fill out the online registration form by providing the required information. Upon approval of registration, an email notification will be sent to the registered email address which contains the User ID and password. A valid and existing email address must be indicated to receive an email notification consisting of the User ID and temporary password.

Organizations that wish to register can be categorized into three (3) main types: NGOs, POs, and CBOs. Associations of professional individuals/groups, corporate foundations, private research centers, and the like can be classified as NGOs with many of these possessing SEC registration. These NGOs often operate at the national, local, and even international levels providing specific services, including support to POs and CBOs. People's organizations on the other hand are often sectoral in nature and operate at the local level. These POs are often accredited/registered with LGUs and NGAs in the implementation of programs and projects or to represent their sector in special bodies. At the community level, there are also loosely organized groups of individuals advancing their interests and being recognized by barangays/villages.

Accreditation Committee

PhilGEPS Team

Process Flow

1. Access www.philgeps.gov.ph.
2. Under the Signup tab, select Observer Registration
3. Fill out the fields and provide the details
 - Login details:
 - Username
 - Password
 - Confirm Password
 - Hint Question
 - Hint Answer
 - Organization details:
 - Observer type (Choose one; NGO, PO or CBO)
 - Observer Name

- Nature of Organization
- Field of Interest
- Registration number (either from SEC, CDA, NGA, or LGU)
- Proof of Registration (Minimum Registration Requirements for Different Types of CLOs)

Categories of CSOs	Minimum Registration Requirement
NGOs	SEC or CDA
POs	NGAs or with LGUs
CBOs	LGUs

During the registration process in the CSO/NGO module, the corresponding proof of registration based on the table above can be required to complete their registration in PhilGEPS. The different CSOs will have to indicate their corresponding registration numbers or possibly attach a scanned copy of their certificate of registration with government agencies.

- Coverage/Presence (Note: Please choose one - nationwide, regional, provincial, city/municipality)
- List of Officers/Incorporators
- Business Address
- Country
- Region
- Province/State
- City/Municipality
- Street Address
- Zip Code
- Contact Information Details
- Gender
- Salutation

- First name, Middle Name, Last Name
- Position, Country Code, Landline Area Code, Landline Extension, Fax Area Code, Fax Number

4. Click Send OTP to Email

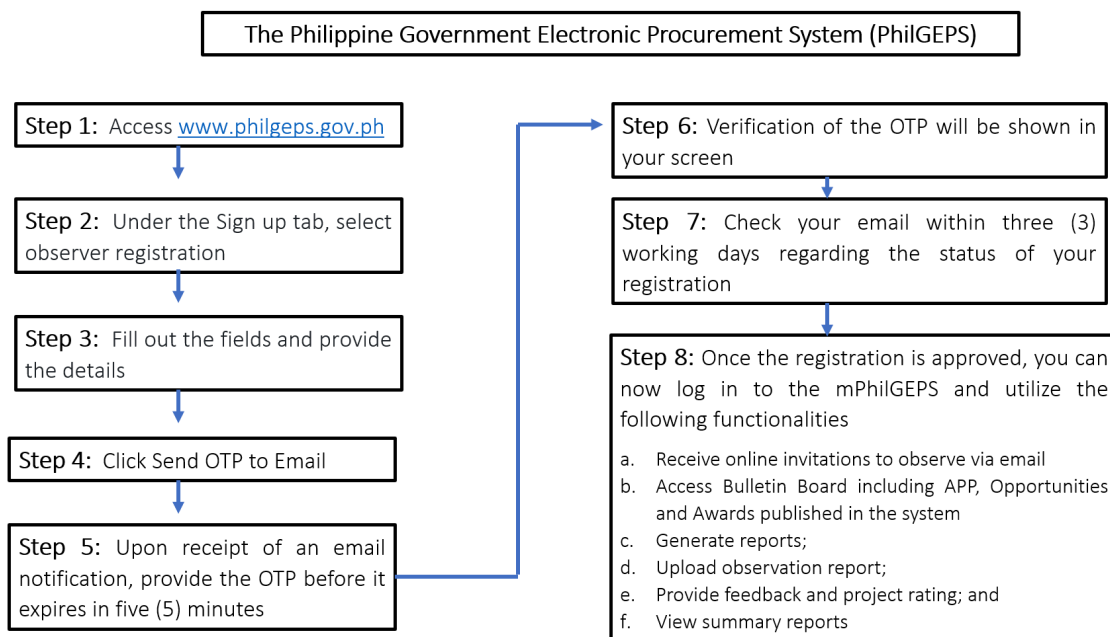
5. Upon receipt of an email notification, provide the OTP before it expires in five (5) minutes

6. Verification of the OTP will be shown on your screen

7. Check your email within three (3) working days regarding the status of your registration

8. Once the registration is approved, you can now log in to the mPhilGEPS and utilize the following functions:

- a. Receive online invitations to observe via email;
- b. Access the bulletin board including APP, opportunities, and awards published in the system;
- c. Generate reports;
- d. Upload observation report;
- e. Provide feedback and project rating; and
- f. View summary reports



Types of Membership

PhilGEPS has two (2) kinds of membership:

Red Membership	Platinum Membership
Lifetime membership is provided at no cost	Payment of Five Thousand Pesos (P5,000.00) valid for one (1) year
Default membership upon registration	Only available to existing Red Members who want to upgrade their membership
Approval is within twenty-four (24) hours from date of successful submission of red registration	Approval is within three (3) working days from the date of successful submission of platinum application

- Platinum members may be downgraded to Red membership due to expiration and non-renewal of the membership.
- Platinum membership is required for Public Bidding, Limited Source Bidding, and Two Failed Biddings.

Differences between Red Membership vs. Platinum Membership

Red members are unable to submit bids directly on the PhilGEPS platform. They can only view bidding notices with small amounts of money involved, usually below a million pesos (<P1,000,000.00). If they want to bid for a project, Red Members need to send their quotations directly to the Bids and Awards Committee (BAC) Chairperson. Opportunities for Red Members are also limited to these procurement modes: direct contracting; take-over of contracts; highly technical consultants; lease of real property; and scientific, scholarly, or artistic work, exclusive technology and media services.

On the other hand, Platinum members can bid on any open notice directly via the PhilGEPS system. Platinum members are also preferred suppliers, because they immediately get a PhilGEPS Certificate of Registration to strengthen their bids. In lieu of this important bidding document, Red members will have to submit more documents, called Class "A" Eligibility Documents such as SEC registration, Audited Financial Statement, PhilGEPS Sworn Statement, etc.

Additional Requirements for Platinum Membership

Scanned copies of the following:

Requirements	(X)/ (/)	Remarks
1. SEC Registration		
2. Valid Mayor's Permit		
3. Audited Financial Statement With stamped received by the Bureau of Internal Revenue (BIR)		
4. PhilGEPS Sworn Statement (notarized) <ul style="list-style-type: none"> Downloaded from their website 		
5. Tax Clearance Certificate Must be issued by the Collection Division under Revenue Regional Offices or Large Taxpayers- Collection Enforcement Division/Large Taxpayers Division-Davao/ Large Taxpayers Division-Cebu or Accounts Receivable Monitoring Division under Bureau of Internal Revenue where the taxpayer applicant is currently and duly registered.		

Submit to

Access www.philgeps.gov.ph and submit all documents via the PhilGEPS facility

CHAPTER 2

LOCAL GOVERNMENT ACCREDITATION PROCESS

Accreditation Process for Selected Sample Cities:

- A. Local Government of Quezon City
- B. Local Government of Mandaluyong City
- C. Local Government of Makati City



Overview

The partnership between the LGUs and CSOs is embodied in the Local Government Code of 1991. The Law's essence is local democratization, which gives the citizens a voice in decision-making based on local needs and aspirations.

The Local Government Code (LGC) of 1991 furthered the aim of the 1987 Philippine Constitution of establishing a role for "people power" at the local level by establishing a process of accreditation for CSOs. The DILG, which is tasked to supervise the LGUs, facilitated various initiatives on the process of CSO accreditation in reiteration of the requirement provided by the Local Government Code of 1991. Local special bodies are mandated under the LGC to be reorganized once the newly elected officials are in place. The DILG issued various Memorandum Circulars that specifically provided guidelines in the accreditation of NGOs, CSOs, POs, and other organized groups, and in selecting their representatives to the local special bodies. The DILG circulars mandated the LGUs to conduct through the Planning and Development Office an inventory of "all POs, NGOs, and business and professional groups, or the updating of such inventory, if already available, within the local government unit."

Each LGU has its own accreditation process. In the following pages are some LGUs with a basic accreditation process and documentary requirements to ensure autonomy in local fiscal administration, and highlight the importance of accreditation in participating in local public administration, pursuing social contracting and networking, and building legitimacy through harmonious relationships within the grassroots level.

The local government accreditation process is intended for the following:

1. CLOs engaged in managing shelters that were funded by LGUs;
2. CLOs who facilitate testing; and
3. CLOs who provide education as resource speakers or provide orientation which entails certification.



A. Local Government of Quezon City

The current, overarching HIV ordinance in Quezon City is the Sangguniang Panglungsod (SP) Ordinance No. 3126, series of 2021 (An Ordinance Providing for the Quezon City Comprehensive STI, HIV, and AIDS Prevention and Control Program and Appropriating Funds Therefor) otherwise known as the Comprehensive Quezon City STI, HIV and AIDS Prevention and Control Ordinance of 2021. The ordinance is a 37-page legislation that traces its origins to various city ordinances, such as:

- Ordinance 838, S-1999 creating the QCSAC;
- Ordinance 784, S-1999 penalizing the owners/operators of entertainment establishments for hiring/ employing children and minors;
- Ordinance 380, S-1995 requiring all applicants for health certificates to undergo HIV and AIDS awareness seminar; and
- Ordinance 78, S-1989 penalizing patrons of live nude shows.

Furthermore, it also cites national legislations as basis for the ordinance and these include RA 11166 (Philippine HIV and AIDS Policy Act of 2018), Executive Order No. 273 (Philippine Plan for Gender-Responsive Development, 1995-2005), the Philippine Constitution, as well as international consensus documents like the Beijing Declaration, the United Nations Convention on the Elimination of all forms of Discrimination Against Women (UN CEDAW), and the UN Convention on the Rights of the Child (UN CRC).

The Quezon City government has been doing initiatives related to HIV service delivery annually. For instance, it opened two (2) additional sundown clinics (KP7/Klinika Batasan) and one (1) SHC (AJ Max), trained 20 Peer Educators on Community-Based HIV Screening (CBS), piloted the First Client-Centered Case Management for PLHIVs, launched the STI, HIV And AIDS Reference Manual for High School Students in all public high schools as part of their Music, Arts, Physical Education, and Health subject, established the first rapid HIV diagnostic algorithm (rHIVda) site in Quezon City (Klinika Bernardo), launched "Zero at 2030", as a commitment to ending the HIV epidemic, during the World HIV day celebration, started providing TLD as first live treatment for PLHIV, and signed a new local HIV and AIDS ordinance.



Requirements

Requirements	(X)/ (/)	Remarks
1. Letter of Intent		
2. Duly filled-up application form		
3. Board resolution signifying intent to apply for accreditation, together with the names of principal representative / alternate representative and their contact numbers		
4. Certificate of Registration with a national government registering agency (ex. DOLE, SEC, DHSUD, CDA, DSWD, PNP, PCUP, NAPC, NYC, etc.)		
5. Barangay certification		
6. The organization's Constitution/ Bylaws		
7. List of officers and members (with their contact numbers, addresses, citizenship)		
8. Quarterly accomplishment report/ list of projects undertaken		

Requirements	(X)/ (/)	Remarks
9. Audited Financial Statement		
10. Minutes of the organization's Annual Meeting, with attached attendance signed by the majority of those who attended such meeting, attested by the Board Secretary		

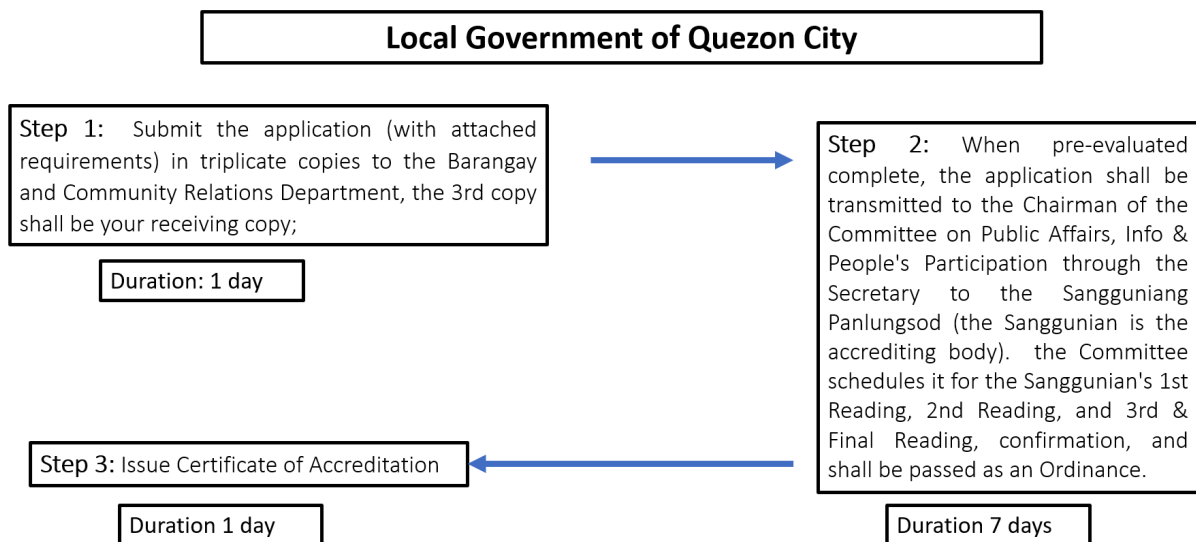
Process Flow

1. Submit the application (with attached requirements) in triplicate copies to the Barangay and Community Relations Department (BCRD), the 3rd copy shall be the received copy;
2. After the CSO is pre-evaluated and all requirements are complete, the application shall be transmitted to the Chairman of the Committee on Public Affairs, Information & People's Participation through the Secretary to the Sangguniang Panlungsod (the Sanggunian is the accrediting body). The Committee schedules it for the Sanggunian's 1st Reading, 2nd Reading, and 3rd & Final Reading, confirmation, and shall be passed as an Ordinance; and
3. A Certificate of Accreditation is issued.



Important Note:

The CSO's Accreditation is co-terminus with that of the accrediting body (The Sangguniang Panlungsod). Also, there are no fees in applying for accreditation.



Submit to:

Barangay and Community Relations Department
Quezon City Hall
Email: ppd.bcrd@quezoncity.gov.ph



B. Local Government of Mandaluyong City

Legislating HIV prevention at the local government level started in Mandaluyong City when the City Council began to contemplate a resolution requiring all applicants for a Mayor's Work Permit/ License or Occupational Health Permits or Certificates to attend an AIDS awareness seminar first. The Mandaluyong City Social Hygiene Clinic is focused on entertainment establishments, massage and spa establishments, and related establishments (e.g., hotels, motels, lodging places).

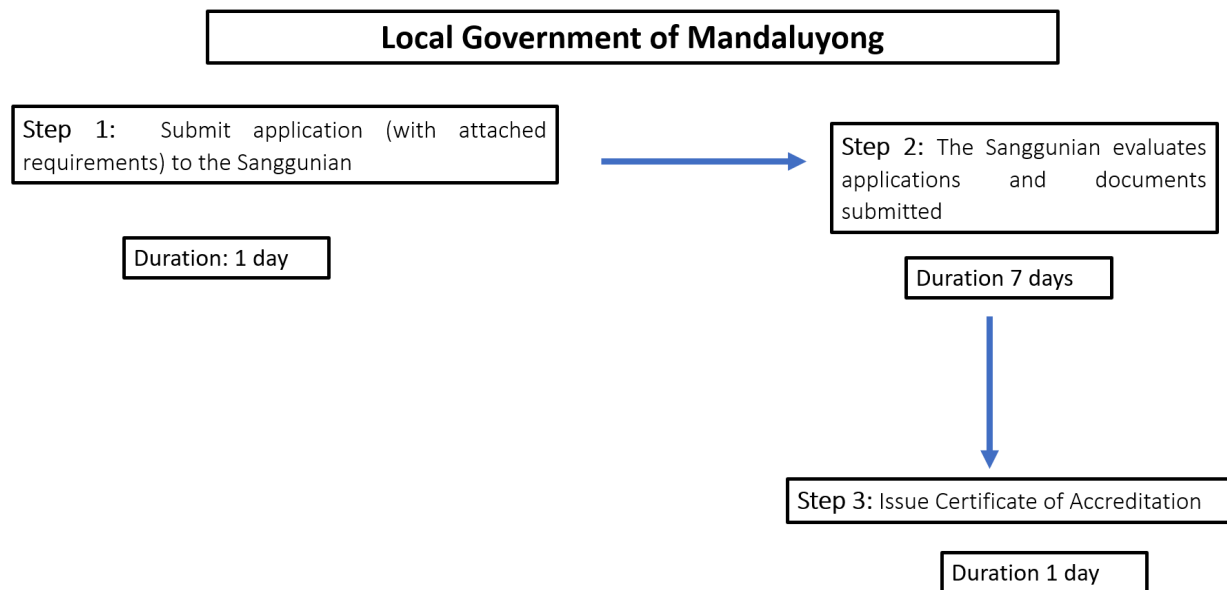
The Mandaluyong government has been doing initiatives related to HIV service delivery annually. For instance, it facilitated the accreditation of its HIV care facility, created and continued its Social Hygiene Clinic services despite COVID-19, and used its social media portfolio for supporting the Young Key Population (YKP) and courier services for Antiretroviral deliveries.

Requirements	(X)/ (/)	Remarks
1. Letter of Application		
2. Accomplished Application form for accreditation		
3. Certificate of Registration/ Accreditation from any NGA		
4. List of Current Affairs		

Requirements	(X)/ (/)	Remarks
Additional Documents if at least 1 year in operation:		
5. Minutes of the latest Annual Meetings certified by the Board Secretary		
6. Latest Annual Accomplishment		
7. Financial Statement signed by Executive Officers of the Organization		

Process Flow

1. Send the documentary requirements to the Sanggunian;
2. The Sanggunian evaluates applications and documents submitted;
3. The Sanggunian issues a certificate of recognition to the CSO. However, it can also issue a notice of non-qualification to CSOs while encouraging them to participate in other avenues for civil society participation in local governance.



Submit to:

Mandaluyong City Health Department

Email: health@mandaluyong.gov.ph / HEALTHcityofmandaluyong@gmail.com
8534-0163 and 532-5001 local 519



C. Local Government of Makati City

The Makati Local Health Department implements an HIV prevention program that highlights the importance of HIV counseling and testing. Its key strength includes existing interventions that draw on international best practices such as peer learning, networked outreach, internet chatting, and connecting risk groups to health services.

Makati City, known for its community health programs, has endeavored to champion discreet and quality HIV counseling and testing that cater to the young professionals of its Central Business District. It has partnered with LoveYourself (LY) in organizing special HIV testing events. In November 2012, LY managed to attract more than 200 sexually active young men at a discreet HIV counseling and testing (HCT) venue in Makati City. In January 2013, they introduced a special ultra-discreet, by-appointment-only HIV testing event called Platinum HIV Testing, which targets the most discriminating of clients requiring extra care and confidentiality. It is being offered twice a month in an undisclosed location, also in the Makati Central Business District. It also continues to provide free HCT services at the Makati Social Hygiene Clinic for anyone who wants to avail it there, but the "special event" HIV counseling and testing centers attract a different set of people.

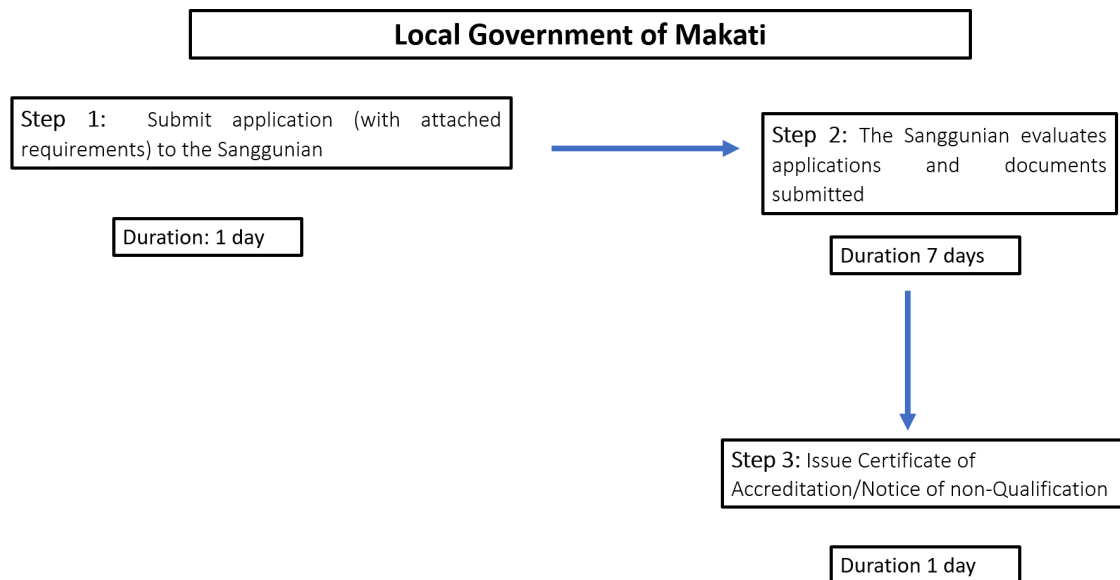
Requirements	(X)/ (/)	Remarks
1. Letter of Application		
2. Duly accomplished application form for accreditation		

Requirements	(X)/ (/)	Remarks
3. Duly approved board resolution signifying intention for accreditation		
4. Certificate of registration or existing valid certificate of accreditation		
5. List of current officers		
6. Information on the primary and other sources of funds		
7. Minutes of the annual meetings certified by the Board Secretary or certification from the Board Secretary		
8. Five (5) year audited financial statement		
9. Five (5) year accomplishment report before application		

Process Flow

1. Submit the application (with attached requirements) to the Sanggunian;
2. The Sanggunian evaluates applications and documents submitted; and

3. The Sanggunian issues a certificate of recognition to CSOs. However, it can also issue a notice of non-qualification to CSOs while encouraging them to participate in other avenues for civil society participation in local governance.



Submit to:

Makati Local Health Department

Email: makati@makati.gov.ph

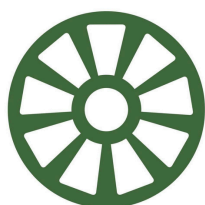
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CHAPTER 3

SPECIAL ACCREDITATION

Philippine Council for NGO Certification (PCNC)





Philippine Council for NGO Certification

The Philippine Council for NGO Certification (PCNC) is a non-profit service organization whose primary function is to certify non-stock, non-profit organizations that meet established minimum criteria for financial management and accountability in their service to underprivileged Filipinos. The BIR gives certified organizations official Donee Institution Status upon recommendation of the PCNC. It is the civil society sector's "self-regulatory mechanism" in ensuring accredited CSOs' integrity, transparency, accountability, and service. As the duly designated "Accrediting Entity", it is the government's partner in determining the qualification of CSOs and Foundations for accreditation and registration by the BIR as donee institutions.

The PCNC accreditation is a six-step process that can be completed within three months, depending on the readiness of the applicant-CSO.

Requirements	(X)/ (/)	Remarks
1. Letter to Applicant Organizations		
2. 2022 Revised PCNC Guidelines		
3. Annex A-Form 101-Checklist of Documents		
4. Annex B- SAPAT (PCNC Self-Assessment and Peer-Appraisal Tool)		

Requirements	(X)/ (/)	Remarks
5. Annex C-SAPAT Rating Sheet		
6. Annex D-List of Supplemental documents		
7. Annex E- SAPAR Guide Questions for PET		
8. Annex G-CSC- Technical Review Panel		
9. PCNC Form 102- Affidavit of Verification		
10. PCNC Form 103- Application Form for PCNC Accreditation		
11. PCNC Form 104- Organizational Profile Form		
12. PCNC Form 105- Statement of Management Representation-Independent Trustee		
13. PCNC Form 106- Affidavit of No Relation		

Requirements	(X)/ (/)	Remarks
14. PCNC Form 108- Affidavit of Modus Operandi		
15. PCNC Form 109- Operations Report		
16. PCNC Form 110- Sample Conflict of Interest Policy		
17. PCNC Form 111- Sample Letter to DSWD Accreditation Not Required		

Process Flow

1. NGO applies for accreditation

The "Checklist of Documents" (PCNC Form 101) lists all the necessary documents that must be submitted to initiate the accreditation process.

All papers must be thoroughly reviewed before submission to PCNC, particularly the Articles of Incorporation and By-laws, to ensure that the required provisions in item No. 6 in the checklist are complied with. Those provisions may not be written verbatim as in the list but should be similar in intent and meaning. Once the PCNC Board approves the accreditation, one set of the documents will be endorsed to the BIR for further review as the NGO's application for registration as a donee institution.

2. PCNC staff reviews the correctness and completeness of documents

Submit four complete documents in hard copies through courier or hand-carry. The applicant CSO will be notified of any deficiencies within two (2) days after receipt of the documents by PCNC. Submit any lacking documents as soon as possible so they can schedule the organization's evaluation. The same documents will be submitted to the BIR once the organization passes the PCNC accreditation.

For a faster review of the documents by PCNC and the BIR, the papers must be sequentially organized as presented in the Checklist and labeled on the side accordingly. Please use a long, green expandable folder for uniformity and easier identification of documents in the BIR office. DO NOT BIND THE DOCUMENTS. DO NOT USE BINDER FOLDER OR CLEAR BOOK, as these will only make the documents bulky and heavier.

3. The Evaluation Team conducts an evaluation

PCNC will constitute the Evaluation Team composed of two (2) volunteer peer evaluators (VPE)—an expert in governance, program/project management, and linkages, and an expert in accounting, financial management, and administration—and a PCNC Certification Officer. PCNC will coordinate the schedule of the evaluation visit by PET with the CSO applicant.

4. PCNC Board deliberates recommendations for accreditation

After the evaluation is completed, the evaluation report is submitted to the PCNC Board for deliberation. The Board may approve, deny, or defer the accreditation of the applicant-CSO.

5. PCNC issues the Certificate of Accreditation

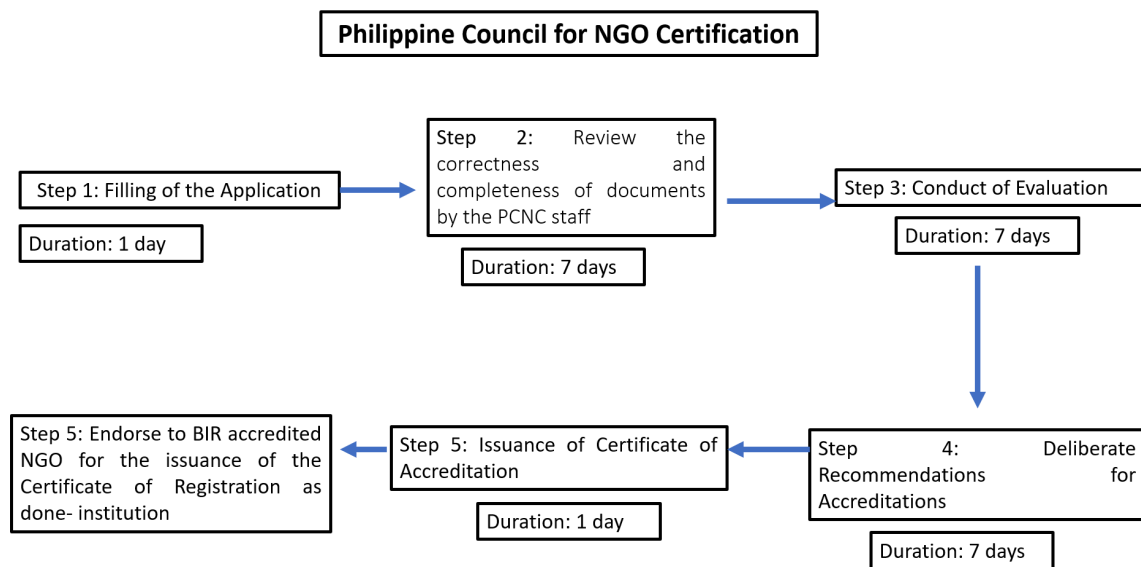
A Certificate of Accreditation is issued to the CSOs whose application has been approved by the PCNC Board. Note that the PCNC Certificate of Accreditation is separate and distinct from the Certificate of Registration as a donee institution to be issued by the BIR.

6. PCNC endorses to BIR the accredited CSO for the issuance of the Certificate of Registration as donee-institution

PCNC-accredited CSO with complete documentary requirements is endorsed to the BIR for further review. If the BIR finds everything in order, it will issue the Certificate of Registration as a donee institution through PCNC.

CSOs with donee institution status can issue a Certificate of Donation for donations received, which the donor can use to claim for tax deductibility of donation given.

The evaluation conducted by PCNC is an opportunity to determine organizational strengths and areas for improvement of an NGO. These are coupled with recommendations from the VPEs of mitigating actions that an NGO may take to improve operations. As one accredited organization shares, "The PCNC certification, including the whole process of having it renewed, encourages us to improve the delivery of our programs and services, as well as strengthen our organizational management systems."



Submit to:

Philippine Council for NGO Certification (PCNC)

<https://pcnc.com.ph/accreditation/#guidelines>

CHAPTER 4

SAMPLE CASE OF SOCIAL CONTRACTING

The Family Planning Organization of the Philippines (FPOP)-Iloilo



Overview

Republic Act 9184 or the Government Procurement Reform Act (GPRA) allows for government agencies and local government units to contract civil society organizations through the provision on Negotiated Procurement. The Government Procurement Policy Board (GPPB) is the one that provides guidance to CSOs on how to engage in contracts with government, particularly through their development of the Guidelines for the Conduct of Community Participation in Procurement through GPPB Resolution No. 18-2021. This includes a simplified eligibility requirements for both Organized and Unorganized Community or Social Groups (CSGs), but is still sufficient to ascertain their legal, technical, and financial capability to undertake the community-based projects. Furthermore, the Implementing Rules and Regulations of the GPRA recognizes that in the interest of project sustainability or to achieve certain specific social objectives, it is more desirable in selected projects, or its components, to call for participation of local communities through CSGs, or members thereof in the delivery of goods and simple infrastructure projects, subject to the provisions of the Guidelines.

In line with this, the GPPB Technical Support Office (TSO) is open to receiving requests from CSOs to be trained on Procurement mechanisms.

The following is an example of how social contracting can be done, as is the case with FPOP Iloilo. This is viable for CSOs whose LGUs or regional government agencies have savings or unexpended budget and are open to contracting CSOs to deliver HIV services or related projects.

The Family Planning Organization of the Philippines-Iloilo



The Family Planning Organization of the Philippines (FPOP) is a non-stock, non-profit, and service-oriented organization providing quality sexual and reproductive health and rights services to all Filipinos, especially the poor and underserved. On August 4, 1969, FPOP was established due to the merger between the Family Planning Association of the Philippines (FPAP) and the Planned Parenthood Movement of the Philippines (PPMP), which shared a common desire to make family planning accessible to the Filipino community. FPOP's founding leaders are Dr. Gregorio G. Lim (FPAP) and Dr. Jose Catindig (PPMP), while Dr. Ruben Apelo served as its first President. The FPOP aims to create an empowered society to decide freely on their sexuality and well-being in a society without discrimination.

FPOP Iloilo Chapter

FPOP Iloilo was established in 1969 by the Family Planning Organization of the Philippines and through time, they have offered integrated HIV health services and public information services most especially for young people in Iloilo and the Western Visayas region. Their office is located in the center of the highly urbanized Iloilo City which is also considered as a high burden area for HIV prevalence. FPOP Iloilo has developed a strong partnership with the local government unit. Together, they provide an enabling environment for key populations and ensure that there is access to health facilities and services provided by FPOP and the local government.

FPOP Iloilo provides comprehensive and integrated sexual and reproductive health and rights services. Their Family Planning services include the provision of combined oral contraceptive and progesterone-only pill, IUDs, and Depot medroxyprogesterone acetate (DMPA) Injectables. In 2016, they also set up secondary laboratory services providing clinical chemistry (lipid profile, uric acid, fasting blood sugar, and SGPT), routine analysis (stool exam, urinalysis, complete blood count, platelet count, blood typing), and serologic testing (Hepatitis B, Syphilis and HIV Testing).

Other projects initiated by FPOP Iloilo seek to provide safe spaces for clients to obtain information, seek consultation, and avail of health and sexual reproductive services. Through online platforms, FPOP Iloilo makes services visible and readily accessible to the public while ensuring confidentiality and privacy.

The various projects that FPOP Iloilo has successfully launched includes the following:

After 5 Center for Adolescent and Youth Clinic (After 5 CANDY Clinic)

The After 5 CANDY Clinic was established in 2016 in partnership with the Department of Health – Region VI. FPOP Peer Educators also launched the After 5 CANDY Facebook page with the support and guidance of FPOP personnel to create public awareness and promote adolescent health and sexual reproductive services that are available and accessible beyond 5:00 in the afternoon. This is a safe and youth-friendly digital space where young people can inquire about their unprotected sexual activity, delayed menstruation, and other reproductive health concerns. Through this initiative, FPOP Iloilo was recognized by the DOH and awarded as the only CSO with a Level III Adolescent Friendly Facility.

Tell Me: Telemedicine and Telehealth

Tell Me is a Facebook page created for online and psychosocial assessment and counseling and services. It manages cases of individuals with mental health concerns. It is a safe space that guarantees confidentiality and privacy to anyone who seeks help and shares their concerns.

iScreen

Through the iScreen Facebook page, clients may avail of an HIV Self-screening kit for free. This would allow an individual to screen privately and determine his/her status.

Mister and Miss HIV Ambassador 2018

The Mister and Miss Ambassador 2018 was organized by FPOP Iloilo to select youth ambassadors who will promote HIV awareness in the community. According to one of the winners, being an HIV ambassador has allowed him to participate in FPOP's public awareness activities as a speaker and a community-based screening (CBS) motivator.

All this hard work eventually paid off as FPOP Iloilo slowly climbed to the top position and became the leading FPOP organization in the country. From being ranked 6 in 2019, and ranked 3 in 2021, now, it has emerged as the No. 1 FPOP chapter since it has garnered the highest program performance rating for 2022.

Funding Mechanisms

The major funding mechanisms of FPOP include Philhealth's OHAT reimbursements, social contracting, and donor-funded projects.

1. OHAT reimbursement

Funding from the Philippine Health Insurance Corporation (PhilHealth) is secured through the Outpatient HIV/AIDS Treatment (OHAT) package. Through Philhealth Board Resolution No. 1331 series of 2009, implementing the OHAT benefit package for confirmed HIV and AIDS cases requiring treatment was approved to increase access to effective HIV and AIDS treatment and patient education services. It is further defined in PhilHealth Circular 011-2015. The OHAT Package now provides a maximum amount of Nine Thousand Seven Hundred Fifty Pesos (Php 9,750.00) quarterly reimbursement per PLHIV on ARV to support personnel and operations of the HIV Primary Care Clinic.

In 2018, FPOP Iloilo expanded its services to treatment and care by establishing an HIV Primary Care Clinic. In the succeeding year, 50 clients filed OHAT claims and received reimbursement (with augmentation). The next three years witnessed a gradual increase in demand for OHAT reimbursement wherein basic treatment services were covered for 300 clients with OHAT claims in 2020, 600 clients with OHAT claims were provided value-added services in 2021, and 850 clients with OHAT claims were reimbursed in 2022. Since then, the thrust of FPOP Iloilo has been geared towards sustainability in HIV financing.

2. Social contracting

FPOP Iloilo has likewise secured national contracts for procuring and delivering Family Planning and HIV-related services through social contracting. In partnership with the Department of Health, the following contracts were successfully fulfilled by FPOP Iloilo:

Secured Contracts	Approved Budget Cost
Procurement of services for the delivery of SRH Services 2016 Family Planning Commodities and Services, HIV and STI Screening	Php 480,000.00
Procurement services for the delivery of SRH Services in 10 GIDA of Western Visayas 2017 RPRH Meet the Unmet, including KRA 4 on HIV, AIDS & STI	Php 2,998,000.00
Procurement of services to set up an After 5 Clinic 2018 SRH Services for Adolescents in Sundown Clinic	Php 1,995,000.00
Procurement of services to set up a mall-based clinic in 2019 KnowTell Health & Wellness Lounge – Integrated ASRH Services	Php 1,997,000.00

In addition, FPOP Iloilo engaged with the Commission on Population and Development to facilitate the project below:

Secured Contract	Approved Budget Cost
Reimbursement of SRH Services delivered to GIDA and FP Hot Spots RPRH Classes and Services – FP, MNCHN, HIV & STI	Php 450,000.00

kNOwTell Mall Based Health and Wellness Lounge

The kNOwTell is a branding of all Western Visayas Center for Health Initiatives towards differentiated client-centric health service delivery. It is coined from the unique combination of “Know and Tell” which relates to peer education wherein information learned from the facility may be shared with peers and “No Tell” which demonstrates privacy and confidentiality.

There are two (2) demonstration projects, and these are (1) the Mall-Based Health and Wellness Clinic and the (2) the Mobile Clinic/Laboratory. This is project aimed to pilot a service delivery model that integrates selected health services for the family. Its main goal is to demonstrate a model new normal delivery of essential health services to families through expanded networks of Public-Private partnerships.

Among the identified limitations of existing government-based adolescent health and development program (AHDP) services include the provision of services only within the traditional work schedule which is from Monday to Friday, 8:00 am to 5:00 pm, and passive service delivery. Even if young people wanted to avail of services, traditional clinic hours limit their access and avail since they are at school at the same time these facilities are open. In response to these challenges, the DOH Western Visayas – Center for Health and Development (DOH WV CHD) initiated a one-year After-5 Clinic demonstration project to test if service delivery uptake will increase if the schedule is adjusted. This move yielded positive results. Service availed for various adolescent services from information, psychosocial risk assessment, and preventive and clinical services increased by 27% from the After 5 Clinic demonstration project. Thus, the CHD further initiated a demonstration project that promotes the improvement of service delivery schedule and adolescent friendliness through alternative service delivery points (non-health facility-based).

The kNOwTell Mall-based Health and Wellness Lounge was made possible through corporate partnerships with Robinsons Land Corporation, Waffle Time Group of Companies, and FPOP Iloilo as the CLO implementing partner.

To operationalize the kNOwTell Mall-based Health and Wellness Lounge and the Mobile Clinic and Laboratory, human resources for health that were employed included doctors, nurses, medical technologists, social workers, psychometricians, peer educators and navigators, and clinic managers.

The services offered in this facility are categorized into the following:

A. Health Service Package for 20 years old and above

- PhilPen Screening & Referral
- Pregnancy Test and Family Planning
- HIV Screening and STI Treatment
- Medical Consultation
- Mental Health Screening and Referral

B. Health Service Package for 10-19 Years old and above

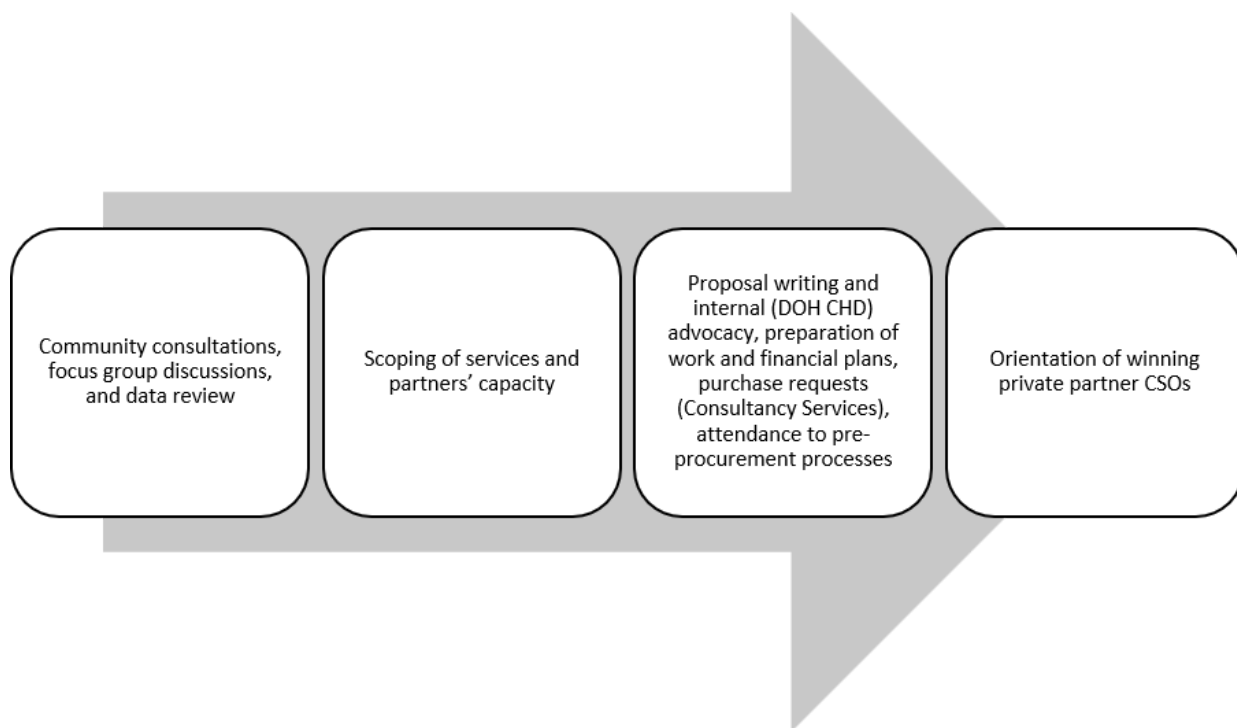
- HEEADSSS Screening and Referral
- Pregnancy Test and Family Planning
- HIV Screening and STI Treatment
- Medical Consultation
- Mental Health Screening and Referral

kNOWTell evolved from a simple need to provide client-centric health services tailored to the needs of adolescents. With support from UNICEF and the local government, the implementation of integrated sexual and reproductive health service, HIV service delivery, and proxy consent protocol for HIV testing for minors without parental consent was made possible. Due to the successful implementation of this innovative program, FPOP Iloilo was recognized by the DOH Central Office as the first CSO Adolescent Friendly Health Facility in the entire country.

Social Contracting Engagement Process

The process of engaging and partnering with CSOs as service delivery partners was outlined by the Department of Health-Western Visayas Center for Health and Development (DOH WV CHD) as follows:

1. Community consultations, focus group discussions, and data review;
2. Scoping of services and partners' capacity;
3. Proposal writing and internal advocacy (DOH CHD), preparation of work and financial plans, purchase requests (consultancy services), attendance to pre-procurement processes; and
4. Orientation of the winning private partner CSO.



In the case of the kNOwTell Mall-Based Health and Wellness Lounge, a Memorandum of Agreement with Robinsons Corporation and Pilipinas Shell Foundation, Inc. was also secured. Upon award of the social contract, the CHD had an orientation with FPOP Iloilo, which included a discussion of deliverables and expectations.

Impact of social contracting on the organization's delivery of health services and programs

In terms of practice, FPOP Iloilo has identified various internal and external strategies that they have employed to develop and implement responsive programs, engage with the government, establish partnerships, and secure funding to further push their advocacies. As an organization, its internal strategies include developing a responsive volunteer program and maintaining a pool of competent support staff; utilizing strategic information to develop, design, implement, and monitor an integrated strategic plan; and improving its services by adhering to Quality of Care (QoC) principles and practices.

To extend its scope and reach, FPOP Iloilo actively participated in government policy and program development and initiated meaningful partnerships that increased their capacity and generated demand for these services. All these measures were done alongside careful compliance with government regulations and maintenance of good housekeeping.

Lessons Learned

The DOH WV CHD outlined the following lessons learned from their experience in engaging and partnering with a CSO in setting up the kNOwTell Mall-based facility for service delivery:

1. Ensure that the Monitoring and Evaluation Plan is embedded in the proposed work and financial plan of the CSO;
2. Level off on the continuous technical assistance of lead CSO during its implementation;
3. Ensure joint regular monitoring and formulation of a Catch-up plan;
4. Regular quarterly meetings with the CSO;
5. Assist CSOs in developing their plans and facilitating their partnership with host LGUs;
6. Assist in the formalization of arrangements with host LGUs;
7. Facilitate the streamlining of processes with DOH CHD on the contracting out of CSOs; and
8. Provide comment on GPPB-related issues (performance bond, PHILGEPS, and frontloading of funds).

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ACHIEVE



Action for Health Initiatives, Inc.