



Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

OCT 30 2014

ADMINISTRATIVE ORDER

No. 2014- 0041

SUBJECT: GUIDELINES ON THE RECOGNITION OF FAMILY PLANNING TRAINING PROVIDERS OF THE DOH

I. BACKGROUND and RATIONALE

Pursuant to Sections 6.02 and 6.04 of the Implementing Rules and Regulations of the Responsible Parenthood and Reproductive Health Act of 2012 (RA 10354), the DOH shall develop guidelines to ensure the training of the SDN skilled health professionals to meet the required clinical competencies. In the process, it may certify specific institutions, whether from the government or from the private sector, to deliver training services. In addition, the DOH shall also develop guidelines to determine the ideal number of skilled health professionals to meet its annual targets for maternal health care and skilled birth attendance.

DOH Administrative Order (AO) no. 2012-0009, otherwise known as the National Strategy towards Reducing Unmet Need for Modern Family Planning, provides the following: training on all modern FP services shall be made available to all public and private service providers; and all DOH regional medical centers are designated as training centers. However, to date, there are currently only 30 medical centers providing BTL-MLLA training nationwide. Despite the order, it has been observed that the difficulty in sustaining the availability of training providers is due to factors, such as; few number of trainers, which mostly come from the public sector only; fast turnover of skilled/ trained health providers; and, in some areas, geographic inaccessibility of training institutions. Moreover, even if trainings have been conducted, only very few trainers have been able to complete the certification process, which extends all the way to post-training supervision in order to validate skills proficiency. As consequence, only a few trained FP providers are deemed proficient enough to cascade training to other service providers.

To address the foregoing concern and comply with the RPRH Law, the DOH needs to facilitate a process for recognizing potential trainers for modern family planning methods. While training processes are in place for BTL-MLLA, NSV, IUD, and FPCBT 1, work is still to be done for new program methods including PPIUD and Subdermal Implants.

This issuance also recognizes the rich experience of DOH in establishing training centers for and certifying BEmONC-capable facilities. From three (3) training institutions conducting skills training in 2008 it has expanded to thirty (30) training centers by 2014. Similar traction is

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needed for training on modern FP services in order to bridge the gap of increasing demand for modern FP and limited access to skilled service level providers.

II. OBJECTIVES

These objectives of this Order are as follows:

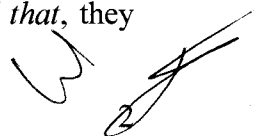
- A. Increase the number of available service delivery points that can provide quality FP services by installing a DOH process that will quickly recognize existing FP training providers - individuals or institutions to augment DOH capacity to cascade training to frontline service staff.
- B. Install a process for DOH to build up a next generation cadre of trainers.
- C. Ensure that this process allows DOH to maintain an acceptable level of quality of its FP training providers.

III. SCOPE and COVERAGE

This Order shall apply to the health sector, from both the public and private sectors, such as, but not limited to, the following: DOH Central Office Units, Regional Offices (ROs), and DOH-retained hospitals; LGUs pursuant to Sections 6.02 and 6.04 of the IRR of the RPRH Act of 2012; Development Partners in the context of their respective strategic agreements for health with the Government of the Philippines; and, Private health care providers. It shall cover all transactions related with the recognition and certification of institutions or individuals that could provide and maintain an acceptable level of FP training to health service providers at the various service delivery points nationwide.

IV. GENERAL GUIDELINES

- A. This issuance reiterates the provision of AO 2012-0009 that “DOH Regional Medical Centers are designated as training centers for permanent methods of FP, such as BTL-MLLA and NSV; and for FPCBT 2 when no other preceptor sites are in the area”.
- B. DOH Regional Medical Centers can engage the services of reputable private sector FP trainers to temporarily augment its own training team, *Provided that*, such engagement shall be implemented pursuant to DO no. 2014-0094 entitled, “*Guideline on the Allowable Rates of Payment for Human Resource Development Activities.*”
- C. Institutions like schools, service providers and training partners can voluntarily apply for recognition as a “Training Center of the DOH on modern FP method,” *Provided that*, they are currently providing modern FP methods and with capable staff that can function as faculty for training activities. The conferment of *Certificate of Recognition as Training Center* shall be in accordance with Sections V and VI below.
- D. Institutions with POGS-accredited OB-GYN residency training programs shall be recognized as “Training Center of the DOH on modern FP method.” *Provided that*, they



submit an application form indicating the institution's interest accompanied by documentary proof of capacity to provide training for a specific modern FP course.

- E. Certificates of Recognition as "Training Centers of DOH on modern FP methods" shall be issued by the DOH and signed by the Regional Director of the Regional Office that covers the locality of the primary address of the applicant institution.

V. SPECIFIC GUIDELINES

- A. New and renewing applicant institutions and individuals for Certificate of Recognition provided under Sections IV.E and IV.F of this Order shall possess the following qualifications at the time of application:

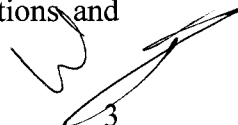
1. Proven track record as clinical provider of the modern FP service(s) that it intends to be recognized for;
2. Staff compliment composed of licensed and trained health professionals on the FP services intended to be recognized for;
3. Documentary proof of proficiency in complying with specifications pursuant to existing DOH Training Manuals for modern FP, as assessed by the Regional Office or its deputized agents in relation to Section VI of this Order;
4. Compliance to DOH protocols for conducting training in its proposed training plan, particularly post-training supervision;
5. Access to available space and equipment for training such as, but not limited, to LCD, laptop, sound system, IV training arm, pelvic model, newborn mannequin; and,
6. Capacity to maintain records of trainings and trainees using DOH specified procedures.

- B. Certified training centers and individual trainers, as contemplated by this Order, shall be bound to utilize the most recent versions of the following training materials, as applicable

1. FPCBT 1 – Family Planning Competency-based Training Basic Course Handbook, DOH;
2. IUD – Family Planning Competency Based Training in IUD insertion 2, DOH;
3. BTL-MLLA – Bilateral Tubal Ligation by Mini laparotomy under Local Anesthesia, Facilitator's Guide and Participant's Handbook, DOH; and,
4. NSV – No Scalpel Vasectomy: A Skills Training Course for Vasectomy Providers and Assistants, Facilitator's Guide and Participant's Handbook, DOH.

These training centers and trainers can include additional modern FP services among its menu of courses, such as, postpartum IUD (PPIUD) and subdermal implants as soon as the guidelines and materials thereof become available.

- C. Certified training centers and individual trainers shall specify the conduct of post-training evaluation (PTE) in their respective training modules and ensure the implementation thereof pursuant to AO no .147 series 2002 entitled, "*Revised Guidelines Governing the Management of Health Human Resource Training and Development Programs in the Department of Health.*" Training institutions can engage the services of individual trainers from other training institutions (i.e. faculty members) to conduct PTE. The concerned Regional Office shall maintain information regarding available training institutions and

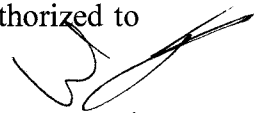


individual trainers of FP services and make them available to those issued with certificates of recognition.

- D. Certificates of Recognition as “Training Centers of DOH on modern FP methods” shall be valid for three (3) year commencing from the date of issuance of the certification.
- E. Beginning January 2017, the DOH shall no longer issue Certificates of Recognition as “Individual Trainers of DOH on modern FP methods.” Henceforth, individual trainers shall be encouraged to join or establish recognized training centers instead.

VI. PROCEDURES FOR RECOGNITION AS FP TRAINING CENTER OF THE DOH

- A. The DOH Regional Offices shall, within thirty (30) working days, process and approve or deny applications for Certificates of Recognition as “Training Centers of DOH on modern FP methods” for its catchment areas. The Regional Office shall set up a *Recognition Committee* composed of representatives from the HRDU, Licensing Unit, Family Health Cluster, and the Assistant Regional Director and/or Regional Director. The committee shall meet, on an as needed basis, to process applications for recognition and decide on administrative concerns of training centers.
- B. Applicants shall access the pertinent application forms (see Annexes A-E) from the Regional Office or download the same from the DOH website (www.doh.gov.ph) and submit the accomplished application forms to the appropriate Regional Office.
- C. Applicants for Certificates of Recognition (i.e. new and renewal) shall submit the following requirements:
 - 1. Application form;
 - 2. Certificates of training or its equivalent;
 - 3. Contracts showing availability of key training personnel;
 - 4. Training plan, per method or service;
 - 5. Demand generation plan;
 - 6. Post-training evaluation (PTE) plan; and,
 - 7. Processing fee, as determined by the Regional Office based on pertinent Government rules and regulations.
- D. The Regional Office shall convene a Recognition Committee for FP Services that shall, upon receipt of accomplished application form and payment of fee, schedule and conduct a visit to the facility to validate whether or not the requirements of the FP service/s training applied for have been complied with.
- E. The Recognition Committee of the Regional Office shall deliberate and decide on approval or denial of Recognition. The deputized individuals or institutions shall recommend the approval or denial of Recognition to the Regional Director or his designate.
- F. Certificates of Recognition as “Training Centers of DOH on modern FP methods” with the signature of the Regional Director shall be issued to training institutions or individual trainers that have satisfactory complied with the qualification set by this Order.
- G. The Regional Office, on recommendation of the Recognition Committee, shall periodically issue a Regional Memorandum announcing the names of the institutions that are recognized as “Training Centers of DOH on modern FP methods”. Said institutions are authorized to sign training certificates of their respective trainees.



- H. Applications for the renewal of Certificate of Recognition shall be filed thirty (30) calendar days prior to the expiration thereof.
- I. Applications with incomplete or insufficient documentary requirements shall be denied without prejudice to the re-filing of deficiencies within 90 days after the denial thereof.

VII. GUIDELINES FOR THE REMOVAL OF RECOGNITION

- A. The Regional Office can *motu proprio* revoke the Certificates of Recognition as "Training Centers of DOH on modern FP methods" based on the following grounds:
 - 1. Inability to conduct PTE in accordance with submitted PTE Plan pursuant to Section VI.C.6 of this Order;
 - 2. At least 10% of trainees of the training institution in conducted trainings have failed their respective PTE;
 - 3. Failure to maintain required key trainers; and,
 - 4. Failure to comply with requirements of Section VI.C of this Order.
- B. A training center or individual trainer can apply for Temporary Certification, upon removal of Certificate of Recognition as "Training Centers of DOH on modern FP methods", which shall be valid for 3 months; on the condition that the training center submits of a plan to correct deficiencies. A new Certificate of Recognition, valid for 3-years, shall be issued upon correction of deficiencies.
- C. Removal of Certificate of Recognition as "Training Centers of DOH on modern FP methods" shall be final in case the 3-month validity of Temporary Certification has lapsed without submission of required plan. The training center under this provision shall undertake the procedure stipulated in Section VI when applying for a new Certificate of Recognition.

VIII. TRANSITORY PROVISIONS

- A. The DOH Regional Office, until **December 2015** and for expediency in expanding the pool of available institutions that could conduct PTE of trainees, can deputize individual/s or institution/s other those contemplated in Sections IV.E and IV.F above to conduct PTE in order to validate whether or not the applicant institution or trainer has met the proficiency requirements of the FP service(s) and be recognized as Training Centers or Trainer of Trainers; on the condition that the deputized individual/s or institution/s are actual provider/s of the FP method under PTE and that the deputized individual/s or institution/s shall be engaged in accordance with pertinent procurement rules and regulation and standards fees pursuant to existing DOH issuances.
- B. Existing training institutions for FP services shall be issued Certificates of Recognition as "Training Center of the DOH on modern FP method " upon compliance to the following requirements:
 - 1. Submission of a list of no less than five (5) training courses conducted in the last three (3) years; and,

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2. Documentary proof showing the availability and ready deployment of a training team for modern FP methods within the validity of the Certificate of Recognition.

The Certificate of Recognition issued pursuant to this Section shall be valid for three (3) years from the date of issuance. Subsequent application for Certificate of Recognition by the training institution contemplated under this Section shall undertake application for new certification.

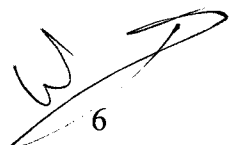
- C. Individual trainers who are recognized training provider on various FP services by the DOH upon the effectivity of this Order shall be provided a Certificate of Recognition valid for three (3) years from the issuance upon submission of a verified list of not less than five (5) training courses that have been conducted within the last three (3) years. Individual trainers contemplated under this Section shall not be issued Certificate of Recognition pursuant to Section V.E above.

IX. FINANCING

- A. Recognized training centers shall be authorized to collect training fees to cover reasonable costs incurred for the conduct of training activities, including those in the post-training period and for payment of honoraria.
- B. Recognized training centers can charge separate fees for training for each FP method such as FPCBT 1, FPCBT 2 (IUD insertion), BTL-MLLA, NSV, PPIUD, insertion and removal of subdermal implants and other training courses that may be endorsed by the DOH.
- C. It shall be the responsibility of the trainees or their sending entity to secure funds for training, which can be sourced from the Regional Offices, LGUs, partners, and private entities.
- D. Training centers shall pay processing fee to the pertinent Regional Office upon application for Certificate of Recognition, which shall cover processing cost, monitoring and support to training centers for PTE, pursuant to pertinent government rules and regulations.

X. IMPLEMENTING ARRANGEMENTS

- A. DOH Regional Offices shall:
 1. Process the application of candidate training institutions.
 2. Depending on need, contract or deputize a third party training providers to conduct the required PTE of those that have implemented training courses for modern FP services to facilitate rapid assessment of institutions or individuals who can be immediately deployed as trainers of service delivery staff.
 3. Assist training centers by providing information on available institutions that can conduct PTE.
 4. Periodically issue a Regional Memorandum announcing the names of the institutions that are recognized as "Training Centers of DOH on modern FP methods".
 5. Conduct monitoring of training institutions for possible cause for removal of recognition on an annual basis.



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6. In collaboration with LGUs, conduct annual Training Needs Assessment (TNA) to ensure adequate number of nurses, midwives and other skilled health professionals for maternal health care and skilled birth attendance to achieve an ideal skilled health professional-to-patient-ratio taking into consideration DOH targets, as provided by Section 6.01 of the IRR of RA 10354.
 7. Routinely discuss with recognized trainers the results of annual TNA to map out a training plan for the region for a given period.
 8. Maintain a database of training institutions, faculty, and trainees and provide regular reports thereof to the HHRDB. This database shall form part of each training needs assessment of the regional offices for specific skills requirements in their respective catchment areas.
 9. As need arise, procure the services of training institutions and individual trainers to provide training to service providers on modern FP services through service contracts.
- B. Disease Prevention and Control Bureau (formerly NCDPC) shall:
1. Review and approve training courses for modern FP and issue guidelines for implementation thereof
 2. Watch out for innovations on conducting training for modern FP services and issue appropriate guidelines, as necessary
 3. Facilitate access of recognized trainers to FP commodities and necessary equipment, when needed, to facilitate proficiency of trainees
- C. Health Human Resources Development Bureau (HHRDB) shall:
1. Build up and maintain a database of existing trainers and trainees for modern FP by consolidating the lists from the DOH regional offices.
 2. Prepare reports on status of the Recognition Process for FP Training Providers for DOH Execom.
 3. Submit approved training courses to PRC for accreditation of the courses in the Midwifery and Nursing boards.
 4. Ensure that the application form is uploaded to the DOH website and is readily accessible to applicants
- D. Local Government Units (Provincial, City and Municipal) shall:
1. Ensure that public and private health facilities in their jurisdiction have trained FP providers.
 2. Mobilize resources (own (e.g. GAD) or otherwise) to finance the training of health service providers in their jurisdiction.
 3. In coordination with the DOH Regional Offices, conduct an annual Training Needs Assessment to ensure "...adequate number of nurses, midwives and other skilled health professionals for maternal health care and skilled birth attendance to achieve an ideal skilled health professional-to-patient-ratio taking into consideration DOH targets" (Section 6.01, IRR of RA 10354)
 4. Ensure that trainees that have completed training on modern FP have adequate stocks of appropriate FP commodities in their health facilities.



E. Partners

1. Support the DOH regional offices in rolling out the scheme for recognition, especially the transitory provisions.
2. Support recognized training centers to maintain their capacity as trainers
3. Assist training centers in conducting PTE.
4. Assist DOH regional offices in monitoring Section VII above for reasons to revoke recognition of a training center.
5. Assist HHRDB in developing a database for trainers and trainees for modern FP methods.

XI. REPEALING CLAUSE

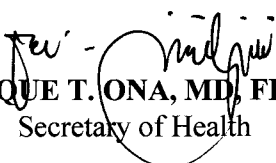
Provisions from previous issuances that are inconsistent or contrary to the provisions of this Order are hereby rescinded and/ or modified accordingly.

XII. SEPARABILITY CLAUSE

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

XIII. EFFECTIVITY

This Administrative Order shall take effect after fifteen (15) working days following its publication in a newspaper of national circulation and upon submission to the University of the Philippines Law Center.


ENRIQUE T. ONA, MD, FPCS, FACS
Secretary of Health

ANNEX A: TEMPLATE APPLICATION FOR DOH RECOGNITION AS A TRAINING CENTER for FAMILY PLANNING SERVICES

Date of application: _____

[Name of DOH Director]
 The Director
 Department of Health Regional Office _
 [Address 1]
 [Address 2]

Sir/Madam:

I, _____, of legal age, _____ with
 (Position/Designation)

address at _____ and the duly authorized
 representative to act for and in behalf of _____, hereby
 (Name of Institution)

applies for recognition as training institution based DOH AO 2014-____. For this purpose, I hereby
 submit the following pertinent information and documentary requirements.

Type of Facility:
 Hospital, License Level - _____
 Others, specify _____

Training method applied for:
 FPCBT 1
 FPCBT 2 (including IUD insertion)
 BTL-MLLA
 Non-Scalpel Vasectomy
 Post-partum IUD insertion
 Subdermal Implants (insertion and removal)

Type of Application:
 Initial
 Renewal

Name of Institution: (Please print legibly)		
Mailing/Billing Address:		
No/St/Brgy:		
Municipality/City:	Province:	Zip Code:
Other Contact Information:		
Telephone no:	Fax no:	Email Address:
Medical Director/Chief of Hospital/Hospital Administrator/Head of Facility:		Owner of the Institution:
FOR DOH-Regional Office Use Only		Control No. <input type="checkbox"/> Processing fee paid
Date received (dd/mm/yy): ____/____/____		Date encoded (dd/mm/yy): ____/____/____
By:		By:

_____ (Name and Signature)	_____ (Name and Signature)
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Acknowledgement

REPUBLIC OF THE PHILIPPINES)
CITY/ MUNICIPALITY OF _____) S.S.

I, _____, _____, of legal age, _____, a resident of _____, after having been sworn in accordance with law hereby depose and say that I am executing this affidavit to attest to the completeness and truth of the foregoing information and the attached documents required for the *Recognition of Family Planning Training Centers* pursuant to _____.

Before me, this _____ day of _____ 20__ in the City/ Municipality of _____, Philippines, personally appeared _____, *Owner Community Tax Number Issued at/ on* _____ known to me to be the same person/s who executed the foregoing instrument and they acknowledge to me that the same is their free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hands this _____ day of _____

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Page No. _____
Book No. _____
Series of _____

NOTARY PUBLIC
My Commission Expires
Dec. 31. 20__

CHECKLIST OF REQUIREMENTS FOR APPLICATION AS TRAINING CENTER FOR FAMILY PLANNING SERVICES

- Application form
- Processing fee
- Certificate of POGS-accreditation as OB-GYN Residency Training Institution, if applicable
- List of key training personnel (refer to form below)
- Training plan for the FP method or service
- Demand generation plan
- Post-training plan

Supporting Documents for Application
<p>List of Key Personnel (List the names of the proposed key personnel –technical faculty and administrative staff -- that will manage the activities of the training center for the specific training method intended. Provide a brief background of each such as educational attainment and previous work experience, particularly relating to training and provision of family planning services. Include a description of the proposed task of the staff.)</p>
<p>[Key Personnel 1] [Brief description of background] [Proposed area of responsibility for the training center]</p> <p>[Key Personnel 2] [Brief description of background] [Proposed area of responsibility for the training center]</p> <p>[Key Personnel 3] [Brief description of background] [Proposed area of responsibility for the training center]</p> <p>[Key Personnel 4] [Brief description of background] [Proposed area of responsibility for the training center]</p> <p>[Use additional sheets as necessary.]</p>
<p>Training plan for the FP method or service (max 5 pages) – Discuss your technical plan, methodology, including personnel, equipment, etc. for accomplishing the intended training.</p>
<p>Demand generation plan (max 5 pages)</p>
<p>Post-training plan (max 5 pages) – Discuss your plan for post-training supervision/evaluation methodology, including personnel, equipment, etc. to check for proficiency of trainees.</p>
<p>I certify that the above information is true and correct.</p>
<p>_____ (Name and Signature) Medical Director/Chief of Hospital/Hospital Administrator/Head of Facility Date (dd/mm/yy) _____ / _____ / _____</p>

ANNEX B: TEMPLATE TOR TO CONTRACT A PRIVATE INDIVIDUAL AS TRAINING FACULTY

TOR for External Faculty for FP training	
Contract No.	
Date	
Contemplated engagement	General services as faculty for FP training
Objective	
Background information	AO 2012-0009, <i>National Strategy towards Reducing Unmet Need for Modern Family Planning</i> , states that DOH Regional Medical Centers are designated as training centers for permanent methods of FP, such as BTL-MLLA and NSV; and for FPCBT 2 when no other preceptor sites are in the area. However, due to various constraints DOH Regional Medical Centers may at times need to engage the services of recognized private sector trainers to temporarily augment its own training team.
Information on factors such as personnel, environment, and interfaces that may constrain the results of the effort	<input type="checkbox"/> Quick (within 24 hours or less) turnaround of urgent inputs/documents; <input type="checkbox"/> Periodic monitoring/reporting meetings at HPDP; [a] Local travel to field implementation sites; <input type="checkbox"/> Others: _____
General Tasks	<ul style="list-style-type: none"> • Assist the training team of the contracting hospital in conducting training activities of the center • Perform other tasks as may be assigned by the Chief of Hospital.
Reporting Requirements and Schedule of Deliverables	<ul style="list-style-type: none"> • Training materials appropriate for the training topic [specify date] • Report on attainment of training objectives and recommendations for improvement [specify date]

ANNEX C: TEMPLATE TOR TO CONTRACT A PRIVATE INDIVIDUAL AS DEPUTIZED AGENT TO CONDUCT PTE

TOR for Deputized Agent to conduct PTE	
Contract No.	
Date	
Contemplated engagement	General services as deputized agent to conduct post-training evaluation of trainers
Objective	To augment capacity of DOH Regional Office/ Training Center to conduct PTE of trainees
Background information	DOH AO.147 series 2002, <i>Revised Guidelines Governing the Management of Health Human Resource Training and Development Programs in the Department of Health</i> , requires trainers to ensure that post-training evaluation is conducted, as specified in training modules. Ideally, the training center that conduct the training also conducts the PTE of trainees. However in some cases, time and manpower constraints necessitate that the training center contract the services of other trainers (faculty) of other training centers to conduct PTE.
Information on factors such as personnel, environment, and interfaces that may constrain the results of the effort	<input type="checkbox"/> Quick (within 24 hours or less) turnaround of urgent inputs/documents; <input type="checkbox"/> Periodic monitoring/reporting meetings at HPDP; [a] Local travel to field implementation sites; <input type="checkbox"/> Others: _____
General Tasks	<ul style="list-style-type: none"> • Conduct field visits to trainees on modern FP training(s) to assess their on-the-job capacity to provide skilled modern FP services. • Based on the results of the evaluation, make recommendations to the DOH Regional Director [or the Hospital Director] if the trainee that was evaluated can henceforth perform the task of trainer. • Perform other tasks as may be assigned by the DOH Regional Director [or the Hospital Director].
Reporting Requirements and Schedule of Deliverables	<ul style="list-style-type: none"> • Draft of PTE report and recommendations for improvement [specify date] • Final PTE report and recommendations for improvement [specify date]

ANNEX D: TEMPLATE CONTRACT BETWEEN THE DOH REGIONAL OFFICE AND PRIVATE INDIVIDUAL

SHORT TERM FIXED-COST CONTRACT FOR CONSULTANCY SERVICES

KNOW ALL MEN BY THESE PRESENTS:

This contract made between:

DOH-RO, a government agency under the Department of Health (DOH) formed and existing under Philippine laws with office address at _____, herein represented by **NAME OF REGIONAL DIRECTOR**, herein after referred to as the "**DOH RO -**
____"

And

NAME OF CONTRACTING PARTY/IES, Filipino, of legal age, and with residential address at _____ (hereinafter called "Consultant").

WITNESSETH

WHEREAS, the DOH-RO ___ has continuously responded to the health needs of Filipinos with respect to their Reproductive Health and Family Planning needs by providing appropriate training for various FP services that are medically-safe, non-abortifacient, effective, legal, and accessible including Voluntary Surgical Sterilization methods;

WHEREAS, the DOH-RO ___ while in the process of building **NAME OF REGION**'s capability to provide training for long acting and permanent methods of family planning such as IUD insertion, Non-Scalpel Vasectomy (NSV), Bilateral Tubal Ligation (BTL) and/or subdermal implants, saw the need to collaborate with the private sector to conduct on-site post-training evaluation and supervision on [**specify FP method**];

WHEREAS, **NAME OF CONSULTANT** has the capacity to provide on-site post-training evaluation and supervision on [**specify FP method**];

WHEREAS, all/both contracting parties, recognize the importance of coordinating their efforts and resources in promoting and providing FP outreach services that are medically-safe, non-abortifacient, effective, legal, and accessible including Voluntary Surgical Sterilization methods to the constituents;

WHEREFORE, and in consideration of the foregoing premises the **NAME OF DOH-RO AND CONSULTANT** hereby agree:

1. The effective date of this contract is [**INDICATE PERIOD COVERED**]. The estimated completion date is [**INDICATE DEADLINE**], unless terminated earlier in accordance with the Default provision of the **DOH RO-___ guidelines**.

2. **DOH RO-** ___ hereby obligates the total amount of **[INDICATE AMOUNT]** PESOS, Philippine Currency (Php _____) as a fixed fee for this contract, for the term shown in the paragraph above

3. Contract obligations:

DOH-RO ___:

- shall designate key personnel who will directly coordinate and plan with **NAME OF CONSULTANT**;
- shall allocate sufficient funds to support the conduct of post-training evaluation and supervision;
- shall arrange/coordinate with **NAME OF CONSULTANT** (e.g. DOH-retained medical hospital/center or DOH-recognized private provider of LAPM or LGU-managed hospital) for the deployment of the consultant;
- shall monitor and record PTE activities conducted by the contracting party/ies within the region

NAME OF CONSULTANT:

- shall conduct PTE of FP trainees upon the request of DOH-RO _____;
- shall assess the capacity of FP method trainees on IUD insertion, Non-Scalpel Vasectomy (NSV), Bilateral Tubal Ligation (BTL) and/or subdermal implants based on the FP clinical standards 2014 edition;
- shall provide one-on-one supervision to the trainees to make appropriate improvements in their skills set;
- shall submit report to **DOH-RO** on the outcome of the PTE activities conducted, including support given to trainees, if any; and recommendations on readiness of trainees to become faculty trainers themselves.

All parties do hereby agree to fully comply with the terms and conditions set forth in this Memorandum of Understanding.

THEREFORE, this Memorandum of Understanding will take effect from _____ to _____ subject to renewal after all contracting parties have made an assessment of this partnership.

IN WITNESS WHEREOF, all/both contracting parties have signed this Agreement this _____ day of _____, 2014, at _____, Philippines.

NAME AND SIGNATURE OF DOH-RO
DIRECTOR

NAME AND SIGNATURE OF
CONTRACTING PARTY/IES

ACKNOWLEDGEMENT

REPUBLIC OF THE PHILIPPINES }

CITY OF _____ } SS

BEFORE ME, a Notary Public in and for _____ [locality] _____, this ___ day of _____, 2014, personally appeared _____ with (any government issued license) no. _____ issued at _____ on _____ 2014, known to me and to me known to be the same person who executed the foregoing instrument and acknowledged that the same is his own free and voluntary act and deed.

WITNESS MY HAND AND SEAL, on the date and place first above written.

Notary Public

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ANNEX E: TEMPLATE CONTRACT BETWEEN AN FP TRAINING CENTER AND PRIVATE INDIVIDUAL

SHORT TERM FIXED-COST CONTRACT FOR CONSULTANCY SERVICES

KNOW ALL MEN BY THESE PRESENTS:

This contract made between:

[NAME OF HOSPITAL], a [characteristic of contracting party (e.g. non-stock not for profit organization/non-government organization/government attached agency/DOH-retained medical center/hospital or LGU managed hospital)], duly created, organized and recognized under Philippine laws with office address at _____ represented herein by **NAME OF CHIEF OPERATING OFFICER OR HIS DULY AUTHORIZED REPRESENTATIVE**, herein referred to as "**NAME OF CONTRACTING PARTY**"

And

[NAME OF CONSULTANT], Filipino, of legal age, and with residential address at _____ (hereinafter called "Consultant").

WITNESSETH

WHEREAS, the **[NAME OF CONTRACTING PARTY]** has continuously responded to the health needs of Filipinos with respect to their Reproductive Health and Family Planning needs by providing appropriate training for various FP services that are medically-safe, non-abortifacient, effective, legal, and accessible including Voluntary Surgical Sterilization methods;

WHEREAS, the **[NAME OF CONTRACTING PARTY]** while in the process of building **NAME OF REGION's** capability to provide training for **[specify FP METHOD]**, saw the need to collaborate with the private sector to conduct on-site post-training evaluation and supervision;

WHEREAS, **NAME of CONSULTANT** has the capacity to provide on-site post-training evaluation and supervision on **[specify FP method]**;

WHEREAS, all/both contracting parties, recognize the importance of coordinating their efforts and resources in promoting and providing FP outreach services that are medically-safe, non-abortifacient, effective, legal, and accessible including Voluntary Surgical Sterilization methods to the constituents;

WHEREFORE, and in consideration of the foregoing premises the **NAME OF HOSPITAL AND CONSULTANT** hereby agree:

1. The effective date of this contract is **[INDICATE PERIOD COVERED]**. The estimated completion date is **[INDICATE DEADLINE]**, unless terminated earlier in accordance with the Default provision of the **DOH RO-__ guidelines**.

2. **DOH RO-**___ hereby obligates the total amount of **[INDICATE AMOUNT]** PESOS, Philippine Currency (Php _____) as a fixed fee for this contract, for the term shown in the paragraph above

3. Contract obligations:

NAME OF HOSPITAL:

- shall designate key personnel who will directly coordinate and plan with **NAME OF CONSULTANT;**
- shall allocate sufficient funds to support the conduct of post-training evaluation and supervision;
- shall arrange/coordinate trainees that will be visited by **NAME OF CONSULTANT** for the conduct of PTE by the consultant;
- shall monitor and record PTE activities conducted by the consultant

NAME OF CONSULTANT:

- shall conduct PTE of FP trainees upon the request of **[NAME OF HOSPITAL];**
- shall assess the capacity of FP method trainees on IUD insertion, Non-Scalpel Vasectomy (NSV), Bilateral Tubal Ligation (BTL) and/or subdermal implants based on the FP clinical standards 2014 edition;
- shall provide one-on-one supervision to the trainees to make appropriate improvements in their skills set;
- shall submit report to **[NAME OF HOSPITAL]** on the outcome of the PTE activities conducted, including support given to trainees, if any; and recommendations on readiness of trainees to become faculty trainers themselves.

All parties do hereby agree to fully comply with the terms and conditions set forth in this Memorandum of Understanding.

THEREFORE, this Memorandum of Understanding will take effect from _____ to _____ subject to renewal after all contracting parties have made an assessment of this partnership.

IN WITNESS WHEREOF, all/both contracting parties have signed this Agreement this _____ day of _____, 2014, at _____, Philippines.

NAME AND SIGNATURE OF DOH-RO
DIRECTOR

NAME AND SIGNATURE OF
CONTRACTING PARTY/IES

ACKNOWLEDGEMENT

REPUBLIC OF THE PHILIPPINES}

CITY OF _____ } SS

BEFORE ME, a Notary Public in and for _____[locality]_____, this ___ day of _____, 2014, personally appeared _____ with (any government issued license) no. _____ issued at _____ on _____ 2014, known to me and to me known to be the same person who executed the foregoing instrument and acknowledged that the same is his own free and voluntary act and deed.

WITNESS MY HAND AND SEAL, on the date and place first above written.

Notary Public

Doc. No. _____

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