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Strengthening Partnerships for Health

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Strengthening Partnerships
for Health
DOH Annual Report 2003



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Annual Report

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Message



The Department of Health was able to lead the health sector to achieve major accomplishments and world class recognition, with collaborative efforts and strengthened partnerships. Nowhere was this synchronized efforts more evident than in the strong surveillance and information dissemination in the combat against the SARS epidemic which the country was able to contain.

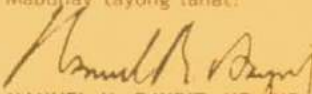
Despite ensuing government budget deficits and the very limited and dwindling resources for health, we were able to forge a stronger networking strategy with the private sector, civil societies and other Government Offices. The successful implementation of major activities such as the Expanded Program on Immunization; the nationwide launching of the national healthy lifestyle campaign thru the synchronized 20-minutes mass aerobic exercises and attaining the pro-poor program objectives, such as the Gamot na Mabisa at Abot Kaya with a 50% reduction in the prices of drugs and medicines most commonly used by the poor; and Greater Medicare Access Program which enrolled 500,000 urban poor beneficiaries to the National Health Insurance Program, are just some of the significant results.

The One Script Systems Improvement Program was established to orchestrate unity, synchronicity and focused targeting of priority public health programs that would provide the biggest impact to attaining equity, efficiency, access and quality health care in the land. A major breakthrough was achieved in providing fiscal autonomy on its 68 retained hospitals with the approval of a special provision of FY 2003 GAA which authorized 100% retention and the use of hospital income for upgrading of health facilities and services. Another feather on its cap was added when the International SASAKAWA Health Prize for 2003 was won by the DOH Center for Health Development for Eastern Visayas for its successful implementation of its Geographically Isolated and Disadvantaged Areas Project. We were able to attain a 100% nationwide coverage of Directly Observed Treatment Shortcourse Chemotherapy. The Philippine National Health Research System which would consolidate research efforts in the country, was established in partnership with the Philippine Council for Health Research and Development.

External sources were able to provide for more focused health investments responsive to national policies and investment priorities. A total of 9 HSRA convergence sites were developed through the financial assistance from World Bank and Asian Development Bank.

We have achieved our major goals and targets, with concerted efforts and continued collaboration from our partners. A strong partnership with both the public and private sectors will enable us to achieve more in the Philippine health sector.

Mabuhay tayong lahat!


MANUEL M. DAYRIT, MD, JMSC
Secretary of Health

DOH CENTRAL LIBRARY

Strengthening Partnerships for Health

HIGHLIGHTS OF ACCOMPLISHMENTS FOR THE YEAR



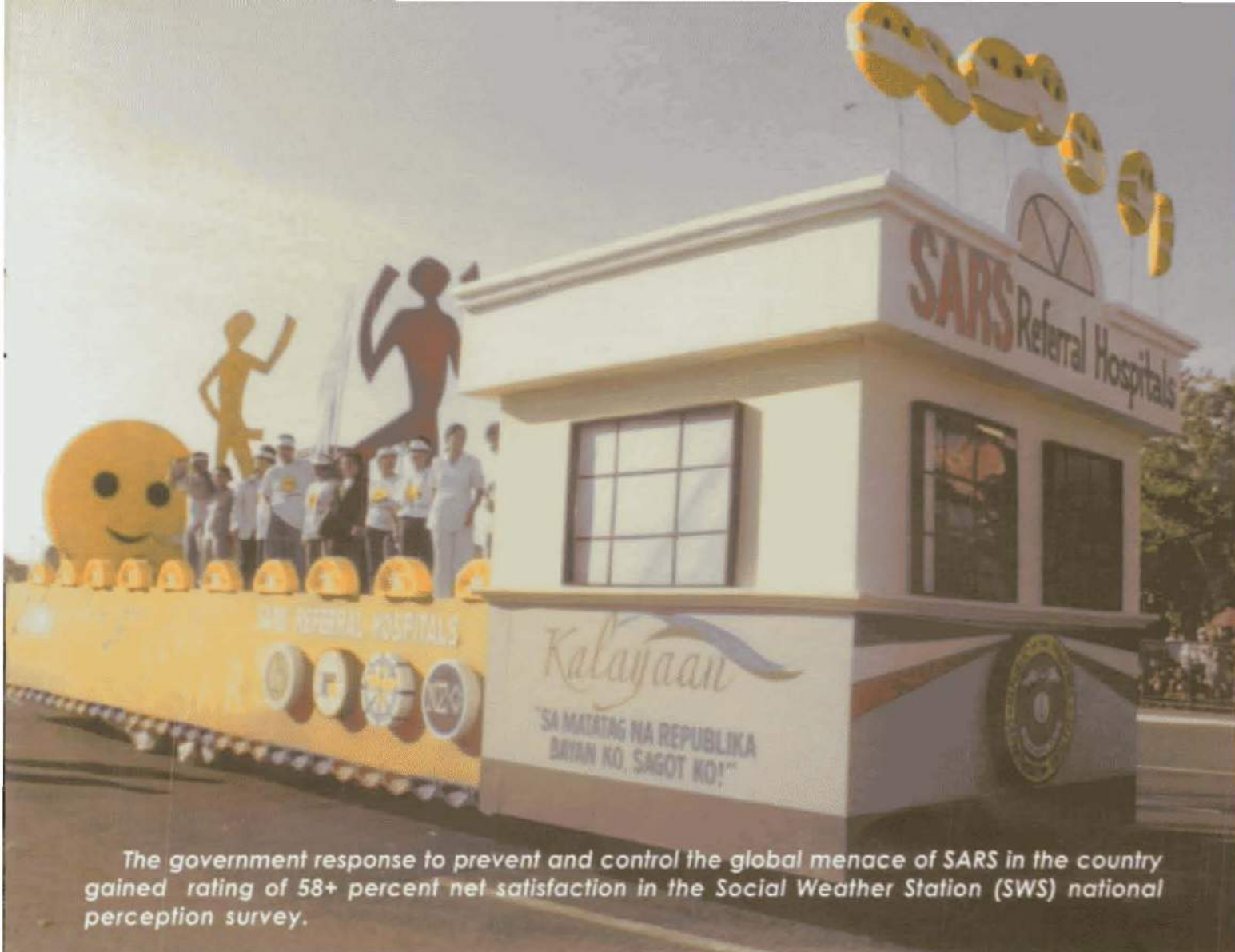
**SARS
SARS**

■ Prevention and Control of Severe Acute Respiratory Syndrome (SARS)

When SARS emerged as a disease that caused global alert, the DOH reporting and surveillance system facilitated quick response. With the first suspected case in Philippine soil, the President signed Executive Order No. 201, designating the Secretary of Health as the Crisis Manager for SARS granting power and authority necessary to contain, control, prevent and restrict the spread of SARS in the country. Several agencies were also tapped to provide assistance to the Secretary of Health.

The DOH has intensified efforts to strengthen the quarantine functions and international health surveillance. It intensified advocacy campaigns. Triaging of cases was established. A SARS expert panel was convened. Technical assistance for logistic preparedness for hospitals and other health agencies were also provided as well as public health information campaign that created strong awareness on the basic information on SARS.

With the help of the World Health Organization (WHO), the Philippines was removed from the list of SARS-afflicted countries. There were 14 reported SARS cases in the Philippines, 2 of whom died. Seven of these cases were imported cases while the other seven (7) cases were locally acquired from the two imported cases. "Five Strategic Action on SARS", was implemented by the DOH with help from WHO, resulting in the following: Imported cases were minimized; Local transmission of cases was averted; SARS death was minimized; and, Economic and non-health consequence of SARS was controlled.



The government response to prevent and control the global menace of SARS in the country gained rating of 58+ percent net satisfaction in the Social Weather Station (SWS) national perception survey.

One Script System Improvement Program

A One Script System Improvement Program was developed to unify and focus resources on priority public health programs that used up to 80 percent of health budgets and which contributed the greatest impact to vital health indices. The priority programs are Tuberculosis and Rabies Control, EPI and Food Fortification, Safe Motherhood and Family Planning, and Healthy Lifestyles, GMA 50, Gamot na Mabisa at Abot Kaya which ensures availability of quality and affordable essential drugs, and GMA 500 which ensures social health insurance for 500,000 indigents were also marked as priority programs. Targets, system models and resources were focused on these priority programs and functions for improving hospitals and regulations, to ensure impact and better stewardship of resources.

One Script
System
Improvement
Program



Tuberculosis (TB) Control Program

Nationwide coverage of TB-DOTS is now 100%, with a case detection rate of 47.3% and cure rate of 73%. TB Reference Laboratories were established in 5 CHDs namely: CHD Ilocos, CHD Bicol, CHD Central Visayas, CHD Northern Mindanao and CHD Davao. A total of 41,037 TB cases were treated this year.

Rabies Prevention and Control Program

Intensified Rabies Prevention and Control Program was launched specifically in Metro Manila with the support and auspices of civil organizations such as the Rotary Club which provided rabies billboards and 5,000 CDs. An Anti-Rabies Bill is in the drawing board of the two seats of legislature in the country. About 32,000 vials of dog vaccine was given to Department of Agriculture-Bureau of Animal Industry and LGUs to augment their supply of vaccines. Anti-rabies vaccine and immunoglobulin were also distributed to animal bite treatment centers through the regions.



**child
HEALTH**

■ Expanded Program on Immunization

Because of the decline of full immunization coverage among infants, a memorandum was disseminated to validate coverage reports, analyze causes for the decline, identify high risk areas and conduct Supplemental Immunization Activities (SIAs) in the identified high risk area. The purpose is to catch children who missed their routine immunization. Priority shall be given to areas with low immunization coverage, hard-to-reach-areas, densely populated urban areas and tribal communities.

■ Project Proposal for Follow-up Measles Campaign for 2004

The project proposal for the Measles Follow-Up Campaign in year 2004 was approved by the Government of Japan. The total Japan Grant Aid project cost is JY881,000,000 (approximately US \$ 7.8 million). This will come in the form of supplies, i.e. measles vaccine, auto-disable syringes, mixing syringes, and safety disposal boxes. Bidding procedures were done in Japan. Expected delivery of the supplies is from September to December 2003. The campaign will utilize the door-to-door strategy used during the successful Balik Patak Kontra Polio campaign.





■ Family Planning ✓

In support of the major pronouncements of the President during the 4th World Meeting of the Families, the DOH has adopted 4 major principles. These are: (i) Responsible Parenthood, the family has the right and duty to decide on the number of children they will have; (ii) Respect for Life, the government protects the sanctity of life and abortion is never considered a family planning method; (iii) Birth Spacing, interval between pregnancies which is ideally 3 years; and (iv) Informed Choice, upholding and ensuring the right of couples to determine the number and spacing of their children according to their life's aspirations.

Initial launch of the Responsible Parenthood Movement was included during the celebration of International Women's Day/Women's Health Day last March 8, 2003 at Marikina Sports Center. The President focused on the promotions of Natural Family Planning, emphasizing the BBBB methods; Birth Spacing through Billings or Cervical Mucus methods, Basal body temperature and Body signs or symptothermal method.

As a follow-up activity, the DOH launched the Responsible Parenthood Campaign, in cooperation with the Inner Wheel Club of the Philippines, Inc. District 381 and the City Government of Manila. A mass ballroom dancing was organized last June 7, 2003 at Rajah Sulaiman Park, Malate, Manila. It was attended by parents, government and LGU officials, NGO, partner agencies representatives, and about 10,000 couples. The Responsible Parenthood campaign seeks to empower families to make truly informed choices on family planning.

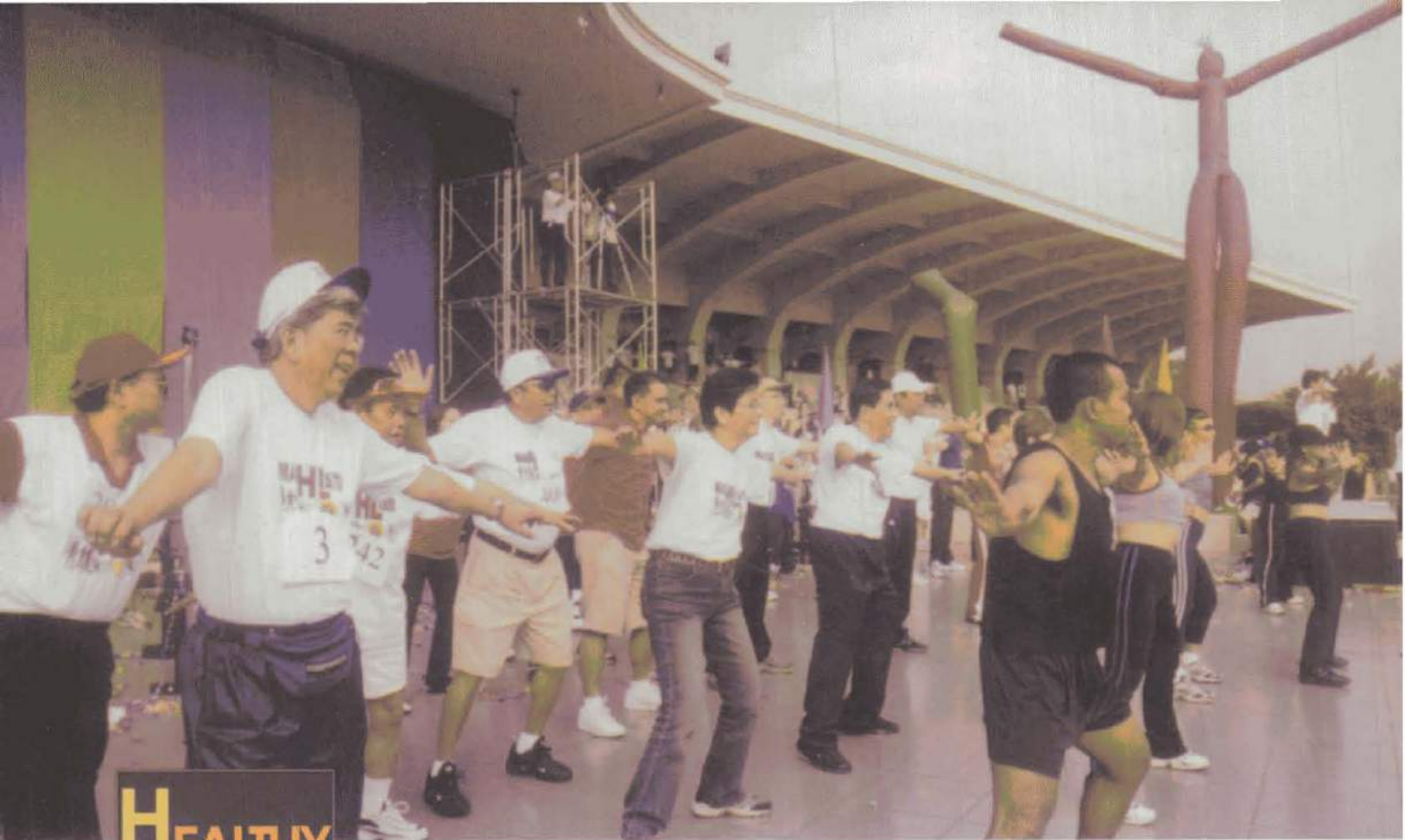


Launching of Responsible Parenthood Campaign in Manila

Safe Motherhood

Philhealth has recently embarked on New Maternity package to ensure safe pregnancy: Outpatient consultation and diagnostic benefit package through Accredited Rural Health Units (RHUs), Health Centers, Private Clinics or Authorized Hospitals for prenatal and baby care are now part of Philhealth's outpatient services packages.

The 2nd Women's Health and Safe Motherhood Project (2nd WHSMP) has taken off with the aim of providing quality women's health and safe motherhood services which are important elements for local governments to deliver health service package to women. This project will ensure that structural, health facility and human resource capacities necessary to deliver health services currently not available in the WHSM service package are installed and maintained at appropriate levels of the local health care delivery system.



HEALTHY Lifestyle

The National Healthy Lifestyle Campaign to increase people's awareness and consciousness was launched on February 16, 2003 at the Luneta Grandstand. A synchronized 20-minutes mass aerobics exercise attended by more than 100,000 participants from the Greater Metro Manila area, televised and aired on national TV and radio highlighted the event. The activity was conducted simultaneously in the various regions of the country. IEC materials were produced and disseminated focusing on the six key messages: Don't Smoke, Do Regular Exercise, Eat a Healthy Diet, Watch your Weight, Practice Stress Management and Have Regular Health Check-ups.





National Socio-Economic Summit Pledges

Gamot na Mabisa at Abot Kaya (GMA 50)

In response to the call of the president to reduce by half the prices of medicine commonly used by the poor to benefit millions of Filipinos, GMA 50 (Gamot na Mabisa at Abot Kaya) was created. This project aims to ensure that affordable, high quality, safe and effective drugs and medicines are always available, especially for the poor.

Using parallel drug imports of 42 drugs including antihypertensives and antibiotics, an average of 50% price reduction was achieved. These medicines are being sold in 72 DOH hospitals and 3 LGU hospitals.

Greater Medicare Access Program (GMA 500)

The total members of the National Health Insurance Program now covers more than 54.3% of the country's population.

President Gloria Macapagal-Arroyo's pledge of enrolling 500,000 urban poor beneficiaries by the end of June 2002 served as the catalyst for the massive enrollment. PhilHealth launched Plan 500 and surpassed the target as it enrolled 506,770 families or 2.5 M beneficiaries. As of end of December 2003, PhilHealth has enrolled about 8.8 million beneficiaries nationwide or 1,762,116 indigent families in its Sponsored Program. The Individually-Paying Program now has about 1.77 M members as of December 2003.

ACHIEVEMENTS in HSRA REFORM AREAS

PUBLIC HEALTH



1st Philippine TB Summit

The DOH in partnership with the Philippine Coalition Against Tuberculosis (PHILCAT) conducted the First Philippine Tuberculosis Summit on March 7, 2003 at the EDSA Shangri-la Hotel, Mandaluyong City, with support from the Philippine TB Initiatives for the Private Sector. Presented during the Summit were the

following: TB in the Philippines: Findings of the 1997 National Prevalence Survey; Measuring the Economic Burden of TB in the Philippines; and, Highlights of the Comprehensive and Unified Policy (CUP) for TB Control in the Philippines. Declaration of Support for the CUP from other government representatives and other stakeholders from the private sector was also done.

Public Health Development Plan

A roundtable discussion addressing required public health reforms was held at the Pearl Manila Hotel on July 10-11, 2003 to lay the groundwork for a Public Health Development



Plan. Various technical working groups (TWGs) composed of different stakeholders were created for each disease cluster on Infectious, Degenerative, Family Health and Environmental and Occupational Health.

The TWGs have held workshops to validate policy gaps, issues, and developed resolutions. They have prioritized key policy issues considering the limited resources; defined the

strategies that will reform public health service delivery in the country, and translate it into a framework for developing sustainable programs and activities. The framework for public health reform is set on redefining how service delivery for priority public health programs should be organized, financed and regulated at all levels of public health facilities and to include the private sector at all levels. It also includes the perspective of inclusion of all public and private stakeholders in the health sector, in the organization of technical expertise in the country.



■ **Garantisadong Pambata**

This is an annual campaign held twice a year in April and October. The Campaign serves to highlight routine health services for children under five years old and provides another opportunity for children who "missed" their routine services, on immunization, Vitamin A supplementation, weighing, oral health and other services. Last April 2003, a total of 9 million children were provided with Vitamin A capsules. Other child health services were also provided during the week long campaign.

■ **Food Fortification Program**

The Philippine Food Fortification Strategic Plan (2000-2004) aims to increase intake of Vitamin A, iron and iodine fortified foods by at least 50% of the Recommended Dietary Allowance (RDA) of the vulnerable groups particularly women and children. At present, 26 companies have availed of the Sangkap Pinoy Seal (SPS) for processed foods, 55 food products with SPS are already available in the market. The DOH through BFAD has forged partnerships with private sectors in the implementation of the Food Fortification Program. Among the DOH partners in the private sectors are: the Philippine Chamber of Commerce and Industry; Philippine Chambers of Food Manufacturers, Inc., Coconut Oil Refiners Association; Rotary International; and Kiwanis.



■ **Patak sa Asin**

Patak sa Asin (PSA) is a market to market salt testing for iodine campaign to promote salt iodization with the end-view of increasing utilization of iodized salt nationwide. The campaign also aims to intensify awareness on the Asin Law, to enhance understanding of the public on the benefits of iodized salt and to promote consumption of iodized salt by the general public. Salt testing is being conducted in all markets nationwide. Results of the 3rd quarter PSA report showed that 78.1% of salt tested is positive for iodine.



TRAINING ON SENTRONG SIGLA CERTIFICATE PHASE II FOR TECHNICAL ASSISTANCE



LOCAL HEALTH SYSTEMS

■ Sentrong Sigla Standards Development

The Sentrong Sigla is a program for ensuring quality assurance for public health facilities. Year 2003 saw the transition of Sentrong Sigla (SS) from Phase I certification of public health facilities using input quality standards heightened by financially-driven recognition scheme, to Phase II aiming at total quality systems approach coupled with purposive technical assistance. Relative to this, Administrative Order No. 17-B series 2003: Philippine Quality in Health Program 2003-2007, Five Year Strategic Plan was issued. Moreover, Administrative Order, No. 100 s. 2003 was issued to Strengthen SS Certification. The Phase II Quality Standards List for level 1 Basic Certification was finalized. Seven (7) batches of Training of Assessment Teams at the Central Office and CHD levels were also completed.

For 2003, P28.7M was allocated to upgrade 12 core referral hospitals and 54 non-SS certified RHUs in 4th-6th class municipalities in 12 Inter-Local Health Zones (ILHZ). About P27M was also allocated as technical assistance package to meet the requirement for SS certification of 132 non-SS certified RHUs in 4th-6th class municipalities in 19 convergence sites.

■ **Award for GIDA implementation**

The Philippines won the Sasakawa Health Prize for 2003, besting several entities coming from a number of Member States. The award was accepted by Sec. Manuel M. Dayrit, on behalf of the DOH Center for Health Development – Eastern Visayas. It is a recognition of the successful implementation of their Geographically Isolated and Disadvantaged Areas (GIDA) Project in six (6) pilot municipalities of the said region. The GIDA Project is a comprehensive health program especially designed to respond to the unique health problems of the people in these areas within the context of their geography, culture and socioeconomic condition. The program consists of strengthening district health systems, upgrading local health facilities, and improving referral and health information systems.

■ **Inter-Local Health Zones**

A total of 91 ILHZ in 36 convergence sites have signed Memorandum of Agreements (MOAs), and formed ILHZ Boards and Technical Management Committees. There are now 70 ILHZ and 460 Local Health Boards that are functional.

HOSPITAL REFORM

■ Hospital Income Retention

Currently, there are 68 DOH retained hospitals using up to 70% of the annual health budget. Since the national government spending on hospital personal health care, which has very limited impact on health status was already too high, a special provision in the General Appropriations Act (GAA) was initiated. This was designed to enable DOH hospitals to collect and retain a portion of their income, in order for them to have funds other than the national government budget subsidy, for improving and upgrading services and equipment. Progressively, income retention ceilings have increased from 30% in FY 2001 to 60% in FY 2002. For year 2003, special provision # 6 of the GAA for FY 2003 (Republic Act 9206) authorized 100% retention and use of income for all DOH hospitals.

DOH-DOF-DBM issued Joint Circular No. 2003-1 dated July 16, 2003 which prescribes the guidelines on the implementation of the said special provision. It specifically provides that the hospital income shall be used to augment the maintenance and other operating expenditures including repair and maintenance of existing hospital facilities. It also provides that at least 25% shall be used to purchase and upgrade hospital equipment used directly in the delivery of services. Furthermore, no amount of the said income shall be used for the payment of salaries and other allowances and benefits whether in cash or in kind.

■ Hospital Corporate Re-structuring

The Executive Order for the hospital restructuring of the Quirino Memorial Medical Center and the Ilocos Training and Regional Medical Center is now being finalized after incorporating the comments of the Department of Budget and Management. Drafting of its Implementing Rules and Regulations is also ongoing.

HOSPITAL PROFILE YEAR 2003

DOH RETAINED HOSPITALS

HOSPITAL PROFILE	CLASSIFICATION OF HOSPITALS											GRAND TOTAL
	SPECIALTY HOSPITALS	SPECIAL HOSPITALS		RESEARCH	MEDICAL CENTERS	DISTRICT HOSPITALS	REGIONAL HOSPITALS	SANITARIA HOSPITALS	EXTENTION HOSPITALS	SUB-TOTAL		
		REGULAR	MENTAL							HOSP. W/ REGULAR BEDS	MENTAL & SANITARIA HOSPITALS	
Authorized Bed Capacity (ABC)	559	2,185	4,700	75	7,300	275	3,275	1,120	60	13,729	5,820	19,549
Occupancy Rate	76.47	74.34	148.6	33	97.13	66.78	77.35	57.3	65.76	81.44	102.95	-87.09
Implementing (Actual) Bed	563	1,840	3,621	57	6,838	214	2,820	702	42	12,374	4,323	16,697
Occupancy Rate	70.2	83.77	84.09	39	96.44	64.04	68.53	76	63.98	67.72	80.04	81.98
Total Admission	22,999	86,244	8,186	1,345	427,813	16,932	188,771	711	2,747	746,851	8,897	755,748
Total No. of Patients Days	116,717	563,646	944,440	7,876	2,359,271	61,139	809,392	126,230	7,661	3,925,702	1,070,670	4,996,372
Ave. Number of Inpatients/Day	132.87	258.33	1,294	11	294.55	168	130.41	85	10.38	143.64	689.69	298.11
Total Newborn	0	33,586	3	0	121,513	6,616	33,950	67	366	196,031	70	196,101
Total Discharges	22,939	87,073	8,115	1,356	436,112	16,943	182,246	764	1,243	747,912	8,879	756,791
Total Deaths	1,020	4,243	141	65	26,088	771	9,293	35	29	41,509	176	41,685
Ave. Length of Stay (3-8 days)	7	6.47	114.43	12	5.27	3.25	4.15	741.14	2.63	5.82	427.78	5.82
Autopsy	1	5	5	7	57	0	24	0	0	94	5	99
Gross Death Rate (-3%)	6.8	3.39	1.63	11.42	5.66	3.25	4.16	4.58	1.86	5.22	6.21	5.34
Net Death Rate (-5-2.5%)	4.22	1.96	1.52	4	2.46	1.47	1.84	2.94	0.9	2.4	2.23	2.66
Total Surgery	9,308	50,934	176	0	184,027	12,096	47,304	4,203	1,342	305,011	4,379	309,390
Total Outpatient Served	105,900	521,518	60,370	63,740	2,341,927	108,375	709,210	34,424	22,111	3,872,781	94,794	3,967,575
Total Prescription Filled	526,110	1,676,674	139,138	90,066	10,777,053	82,100	987,429	36,238	3,364	14,142,796	175,376	14,318,172
Total Radiological Procedures	88,483	145,060	6,692	3,069	626,643	19,288	143,820	552	4,918	1,031,281	7,244	1,038,525
Total Laboratory	1,056,959	915,606	111,290	72,617	7,216,852	199,755	1,844,863	9,520	8,981	11,315,633	120,810	11,436,443

Source: 62 DOH Hospitals

*"A Unified and Stronger Partnership with the Government in
Pharmaceutical Healthcare"*
APPMAN, CFDM & ADIP
DOH Sec. **MANUEL M. DAYRIT**
DTI Sec. **MANUEL A. ROXAS**
Her Excellency **GLORIA MACAPAGAL-ARROYO**



HEALTH REGULATION

■ **Botika ng Barangay**

Approximately 500 Botika ng Barangay (BnBs) are now existing. These BnBs are now selling over-the-counter drugs and medications and two (2) prescription drugs (amoxicillin and cotrimoxazole). A Special License to Operate was recently granted to BnBs and there are now 22 Licensed BnBs. About 4,800 BnBs are targeted to opened by 1st semester of 2004, 200 of which will be opened by mid January 2004. There are also 516 NFA Rolling Stores selling over the counter drug and herbal medications (Lagundi and Sambong).

■ Drug Consignment

Administrative Order No. 5 s. 2003 institutionalized Drug Consignment as a means of drug procurement. To ensure that only high quality drugs and medicines will be made available to the public, all prospective suppliers were pre-screened and required to have a Certificate of Good Manufacturing Process from BFAD. The public can be assured that the prices for these medicines are at least 10% cheaper as compared to retail price. At present, 4 local drug companies have been awarded consignment rights and are in the process of executing consignment contracts with the DOH Hospitals.

■ Quality Seal Award for Retail Drugstores

BFAD continues to provide incentives to drugstores, for providing quality but affordable drugs, through the awarding of quality seal. The seal is given to encourage drugstores to improve community service to highly professional pharmaceutical care. It is a challenge to drugstore owners and pharmacists to continue their efforts in safeguarding public health by ensuring that drugs sold are of good quality, safe, effective and affordable.

This year, three (3) batches of awarding ceremonies were done, 1 each for Luzon, Visayas and Mindanao. A total of 98 drugstores under the single category and 82 drugstores under the chain category were recognized and given the award.



HEALTH CARE FINANCING

■ Expansion of Philhealth Enrollees

As of end of December 2003, PhilHealth has enrolled about 8.8 million beneficiaries nationwide or 1,762,116 indigent families in its Sponsored Program. The Individually-Paying Program now has about 1.77 M members. Recently, PhilHealth launched the registration of Filipino pensioners and retirees to the Non-Paying Program. A total of 76,209 members nationwide have registered to the program.

■ Benefit Enhancement

Inpatient benefit ceilings have increased by as much as 34% for drugs and medicines and 45% for x-ray and laboratory examinations effective 1 January 2002. In April 2003, benefit ceilings of room and board has been increased. The number of LGUs implementing the outpatient diagnostic packages increased from 162 in April 2003 to 249 in December 2003. There are 1,534 accredited hospitals nationwide (includes 15 Ambulatory Surgical Clinics) and 573 accredited RHUs extending health care services to the members.

New benefit packages such as maternity care package for normal spontaneous deliveries, SARS package and outpatient treatment of Tuberculosis (TB-DOTS) package have been added in Philhealths' benefits as of March 2003.

Some benefits such as increased In-patient benefits, better dialysis benefits and low-priced quality drugs are currently being developed.



Institutional Development for HSRA Implementation

HEALTH POLICY DEVELOPMENT AND PLANNING BUREAU

■ HSRA Technical Coordinating Group

The Technical Coordinating Group (TCG) for the Health Sector Reform Agenda (HSRA) conducted eight (8) meetings in 2003, to update reform managers on reform activities, donor agencies on HSRA activities and training opportunities. Revision of the Guidelines for the Operationalization of the Health Sector Reform Agenda Implementation Plan (HSRAIP) at the Convergence Sites was also done.

Pursuant to Department Order No. 227-G series 2002, the TCG for the HSRA Implementation was reconstituted. Among its functions are: overall technical management and coordination of the HSRAIP; coordinate all programs, projects and activities based on HSRAIP timelines; facilitate the preparation/updating and review of necessary investment plans and packages as well as research, policy and legislative agenda in support of HSRA; put in place a monitoring and evaluation system to track HSRAIP progress; and provide periodic feedback to the Steering Committee.

■ Essential National Health Research Forum

The 4th Health Research for Action National Forum held in August 6-7, 2003 at the Westin Philippine Plaza showcased 19 research studies, which represented the theme of this year's forum on "Public-Private Sector Participation in Health Development". Major featured researches included presentations of the Philippine Millennium Development Goals, Philippine Health Human Resources: Issues and Challenges" and the Philippine National Health Research System". Poster Exhibit contest which was participated in by eight (8) budding researchers in the country, was introduced in this forum. It also featured Dr. Somsak Chunharas, a representative from the Commission on Health Research (COHRED). There were over 400 participants from private and public research groups and health policy makers who participated in the forum.

■ Health Research System

In partnership with the Philippine Council for Health Research and Development (PCHRD), the DOH established a system for managing research in the country through the institutionalization of the Philippine National Health Research System (PNHRS). A Memorandum of Understanding (MOU) was signed by and between the Secretary of Health and the Secretary of Science and Technology, which served as basis for succeeding activities under the PNHRS. Some of the activities conducted were the unification of agenda, organization of technical working groups, which will look into the country's uniform research system, and drafting of bill on research fund.



Online moderated discussion

The Legislative Advocacy Project was jointly undertaken by the Health Policy Development and Development Bureau (HPDPB) and the Philippine Institute for Development Studies – National Economic Development Authority. An on-line moderated discussion on the specific items of the DOH Legislative Agenda was held from March 16 to April 30, 2003. Participants included the legislators and their respective staff from both Houses of Congress, members of the academe, NGOs, and other stakeholders. It encouraged an online exchange of views as well as questions and answers among stakeholders and people who are interested in the specific legislative proposals of the DOH.

Led by designated moderators from the Department of Health, the online discussion featured 3 major topics under the HSRA, namely: (a) HSRA Implementation Act; (b) Health Regulation; and (c) Government Hospital Corporate Restructuring. The Legislative Agenda was based on the legislative needs of the health sector as identified in the HSRA.



HSRA WEBSITE

A website which aims to provide information on the progress of implementation of the Health Sector Reforms in the country, was developed. The website is an online presentation of all activities and information about HSRA progress and implementation as well as the different actors and stakeholders in its development. It also provides an opportunity for interaction of all partners in HSRA. It was published within the DOH main website in July 2003 and is now accessible.

NHPC 3-Year LGU Strategic Plan

The National Health Planning Committee (NHPC) through the HPDPB formulated and disseminated Guidelines for LGU Strategic Health Plan for CY 2004-2006. This was the recommendation during one of the NHPC meetings to come-up with a three (3) year strategic health plan particularly for all provinces and highly urbanized cities of the country for submission to the Office of the President.

The guidelines aim to guide the LGUs in preparing their 3-Year Strategic Health Plan (2004-2006) and translate this plan into annual operational health plan that are responsive to their health needs.



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HEALTH HUMAN RESOURCE DEVELOPMENT BUREAU

Health Human Resource Information System

Developed the National Health Human Resource Plan, version 1. Installed and utilized Career Development and Management System. Developed and validated DOH core and functional competences, and finalized the profiling of the DOH Management Pool competency.

Health Workers Deployment Program

Thirty-seven (37) new doctors (DTTB), 41 MO III and 95 MS II Part Time (Medical Pool) and 28 allied health professionals were deployed to doctorless and health workerless areas.

Sustainable Training and Development Mechanism

Conducted 10 courses for the retooling/retraining of Central Office personnel. Reviewed/screened 109 training courses that are outside the activities of the Bureau. Provided fund assistance for post-graduate degree to 37 scholars. Developed and coordinated 6 training programs for 44 foreign nationals from the Asia-Pacific Region. Provided Continuing Medical Education to 55 doctors to the barrios. Conducted the 5th Annual Qualifying Examination for Residency Training. 1,039 passed the examination, 879 of whom were matched.

INFORMATION MANAGEMENT SERVICE

Developed and installed in 85% of the more than 800 DOH accredited drug testing centers a computerized system which will give drug test results verification within a month. This is a subsystem of the Drug Testing Operations Management Information System. Continued to implement the Hospital Operation Management Information System in 34 hospitals. Developed a drug mobility monitoring system in support of Pharma 50. This system was able to monitor delivery and consumption of pharmaceutical products, monitor remittances of hospitals, and produce management reports for the hospital concerned.



Center for Health Development

Collaboration with Partners

CHD Metro Manila

Tuberculosis Control Program. Increased case detection rate from 45.8% in 2000 to 79% in 2003, and a cure rate from 69% to 79%. Focused DOTS implementation in CHD MM retained hospitals/LGU hospitals and private practitioners wherein a technical guideline was conceptualized for the use of PPM-DOTS in NCR. **Rabies Prevention and Control Program.** Conducted Rabies Summit and Launched Rabies Free Metro Manila in support of Responsible Pet Ownership. Increased awareness and improved reporting system, which resulted in 15% increased in the number of reported animal bite cases. **Child Health.** Increased FIC coverage from 87% in 2002 to 90% in 2003. Conducted series of program implementation reviews with 17 LGUs to improve immunization coverage in high risk areas. Tsikiting Center was expanded to National Children's Hospital. Patak sa Asin sa Palengke was done quarterly and results showed an increased in the availability of iodized salt from 31.5% in October 2002 to 81% in December 2003. Patak sa Asin sa Warehouses was launched covering more than 100 warehouses. Launched "Go 90 for SIP", an advocacy to increase awareness, demand for and utilization of iodized salt, with support from Robinson's Galleria, DZMM Live and Salinas Foods Inc. The conduct of Garantisadong Pambata campaign showed a 93.3% and 97.3% accomplishments in April and October respectively. **Women's Health.** Three batches of TOT training and 3 batches of NFP training for service providers were conducted to mainstream NFP in the region. **GMA 50.** Established GMA 50 program in DOH-retained hospitals. Established 17 BnBs, conducted training for 67 BnB operators and provided processing fee for the licensing of BnBs.

CHD Ilocos

TB Control Program. Full implementation of DOTS with a cure rate of 85.4% (CY2002), and a case detection rate of 97.5%. Organized and established PPMD partnerships and TB Diagnostic Committee in Pangasinan. Gave awards to NTP Regional Best Performing Health facilities and personnel. **Rabies Prevention and Control Program.** Disseminate Manual of Operation and Management Guidelines to 150 RHUs. Maintained 12 ABTCs in the region and ensured provision of 100% supply of vaccines in all ABTCs. **Child Health.** Increased FIC coverage from 79% in 2002 to 82.7% in 2003. Conducted planning workshops at all levels for the Follow-up Measles Immunization campaign. Provided 100% vaccines and supplies required for routine immunization in all cities and municipalities. Upgraded regional, 12 provincial and city cold rooms with provision of new freezers, refrigerators and generators from KFW grant. Garantisadong Pambata coverage increased from 39% in April to 90% in October for children 6-11 months old and from 98% (April) to 100% (October) for children aged 12-59 months old. Increased household utilization of iodized salt from 63% in 2002 to 93% in 2003 based on rapid assessment conducted on iodized salt utilization. Bantay Asin checkpoints were mobilized in entry and exit points in coordination with PNP. Assisted LGUs in the passage of ordinances and enforcement of Asin Law. Gave awards to outstanding LGUs in implementing the Asin Law. **Women's Health.** Raised fertility awareness of couples by 5% and NFP users to 5%. Maintained the rates of those currently using temporary FP method. **Healthy Lifestyle.** Launched healthy lifestyle campaign simultaneously in 5 cities in the region, with a total of 9,503 participants from various organizations, GOs, and NGOs.

CHD Cordillera

TB Control Program. Established DOTS units in 4 hospitals and a validation center for TB and malaria microscopy. Conducted drug microscopy survey on new TB treatment. Increased case detection rate from 30% in 2002 to 57% in 2003 and cure rate from 55% in 2001 to 65% in 2003. **Healthy Lifestyle.** Advocated healthy lifestyle focusing on healthy diet and increase physical activity. Hataw 2003 was launched in February, participated in by at least 1000 participants from various government offices in Baguio City. Institutionalized Hataw as a regular activity of most government offices in their weekly flag ceremony. **GMA 50** Seven (7) hospitals in the region are procuring GMA 50 drugs. A networking system occurred among the hospitals in the region such that all district hospitals in Ifugao procure GMA 50 drugs from Ifugao Provincial Hospital and Atok District Hospital in Benguet. **NHIP** Enrolled 28,227 indigents under the sponsorship of congressmen, 26,702 indigents enrolled by LGUs and 7,900 indigents sponsored by PCSO. Facilitated the establishment of community based health insurance schemes and the accreditation of 11 RHUs to avail of the capitation fund from PHIC.

CHD Cagayan Valley

TB Control Program. Organized CaVaCAT – Cagayan Valley Coalition Against TB, a local coalition against TB, with members from Medical Societies, concerned retired health personnel and allied professions like PNA, PAMET. Members assisted the TB diagnostic committees organized in Cagayan and was expanded to the provinces of Isabela and Quirino. **Rabies Prevention and Control Program.** Developed prototype rabies ordinance for LGUs. Passed resolutions requesting the Secretary of Agriculture to allocate funds for anti-rabies vaccines, as a result of consultative meetings of the Regional Advisory Committee – Animal Diseases Control and Emergency. **Child Health.** DOH-Representatives teamed up with RHU staff to conduct outreach immunization activities in high risk and far flung areas. Institutionalized monitoring of Salt Iodization Program with the Department of Agriculture, Philippine National Police, Department of Energy and Natural Resources and the local units, especially at the “Bantay sa Asin” checkpoints in Sta. Praxedes, Cagayan and Sta. Fe, Nueva Vizcaya. **Women's Health.** In addition to the regular strategies of training service providers and coordinators and information campaigns, interfaith on NFP and fertility awareness orientation of couples were conducted to mainstream the program. **Healthy Lifestyle.** Launching of healthy lifestyle was conducted on February 16, 2003 which included other activities like BP screening, weight taking and diet counseling for the participants. Regular “Hataw Na” is done every Mondays, Wednesdays and Fridays at the CHD and other offices to sustain this activity. **GMA 50.** Conducted advocacy meetings to Sangguniang Bayan members for Health, media and DOH representatives, to expand coverage and increase awareness for GMA 50. Local radio/TV guestings were also done. **NHIP.** Enrolled 71,925 indigent families to the Medicare Para sa Masa Program. P160,450,799.34 was paid for claims reimbursement of all PHIC members as benefit utilization for the year 2003.

CHD Central Luzon

TB Control Program. Conducted Rapid Appraisal Survey showing a cure rate of 54% and a case detection rate of 44%. Trained medical officers and staff nurses in 3 retained hospitals and 46 LGU hospitals on hospital based NTP was done. A total of 14,874 TB patients were placed under short course chemotherapy using DOTS. Increased case detection rate from 44% to 51.90% and cure rate improved from 54% to 67%. Launched “TB8: A Coalition for Fight Against TB in Central Luzon” in August 2003, to address the TB problem and treat 10,340 TB patients through DOTS in 8 high burden areas in Central Luzon and conducted a strategic planning workshop to effectively carry out the project. **Child Health.** Vaccines were provided to LGUs to sustain high routine coverage. Conducted a Sales Conference and an orientation for Follow-up Measles Elimination Campaign. Ninety percent (90%) or 1,023,834 children received the second dose of Vitamin A capsule during the October round. Conduct of Patak sa Asin in the market and households were monitored. Tests showed that 74% of salt tested from household and 71% of the salt from markets were positive for iodine. **Women's Health.** A total of 580 participants were trained, 270 of which were trained through the initiatives of LGUs. An outreach voluntary sterilization was conducted by Dr. Paulino J. Memorial Research and Medical Center and Jose B. Lingad Memorial Regional Hospital. **Healthy Lifestyle.** With support from the LGUs, about 5,000 delegates from the region participated in the National Healthy Lifestyle Campaign conducted at the Quirino Grandstand, Rizal Park. Promoted simple easy –to-do activities for maintenance of good health to include regular exercise, healthy diet, regular check-up, managing stress and smoking control. **GMA 50.** A total of 46 BnBs were established in the region as of December 31, 2003. **NHIP.** Strengthened advocacy to promote health care financing and encourage LCEs to enroll more indigent individuals to Philhealth.

CHD Calabarzon

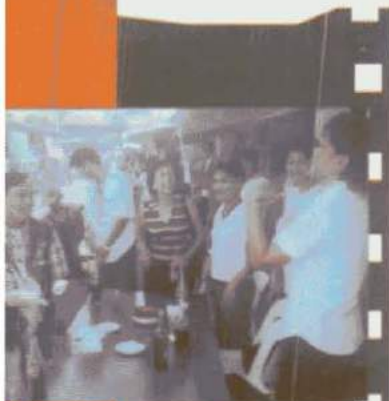
TB Control Program. Conducted TB Alert Awareness campaign, provincial validation for Quality Assurance System on microscopy and testing of Contract Distribution Scheme of TB Drugs and supplies. Organized Regional Inter-Agency Mix on TB and established Public-Private Sector Mix in one province. **Rabies Prevention and Control Program.** Established ABTCs in 5 provinces and 10 cities and disseminated Manual of Operation and Management Guidelines. Conducted Rabies Sales conference and organized Rabies Task Force in areas with new rabies cases. **Child Health.** FIC coverage of 45.8% based on 1st semester reports. All government health facilities are providing immunization. Eighty-seven percent (87%) of children aged 6-72 months old given Vitamin A supplementation. Conducted Patak sa Asin with a 78% availability of iodized salt in the markets. Household salt testing showed a 97% utilization of iodized salt. **Women's Health.** Conducted voluntary sterilization services to 113 clients. Oriented 500 BHWs on NFP and trained 40 participants on CBT. Celebrated Family Planning Day and Natural Family Planning. **Healthy Lifestyle.** Conducted simultaneous exercise in Luneta Grandstand. Developed, and distributed IEC materials to cities and municipalities. **GMA 50.** Procured and distributed GMA 50 drugs for 5 LGUs, and provided technical assistance to 2 provinces in the procurement of drugs from the Philippine International Trading Corporation. Established 10 BnBs and trained BnB aides.

CHD Mimaropa

TB Control Program. Conducted orientation/training on NTP guidelines to MHO's PHN's RHM's, microscopists, treatment partners and other health staff from public and private sector including hospital level. Provided anti-TB drugs, and IEC materials to 5 provinces and 2 cities. **Rabies Prevention and Control.** Distributed anti-rabies vaccines to animal bite treatment centers and lobby for the passage of 2 local ordinances on Responsible Pet Ownership. **Child Health.** Distributed 662,500 capsules of vitamin A to 5 provinces and 2 cities, 36 government and 16 private hospitals are using iodized salt. Increased household utilization of iodized salt from 41% in 2002 to 71% in 2003 and market salt testing from 45% in 2002 to 87% in 2003. 70% of salt stored in warehouses/market are iodized. **Women's Health.** Conducted orientation and awareness campaign on FP methods to BHWs, religious sectors, women's groups, and indigenous groups. Celebrated Women's Health, Family Planning Week and Breastfeeding Month and continued information/dissemination campaign on the different family planning methods. Implemented the use of partograph in 5 provinces and 2 cities. **Healthy Lifestyle.** Conducted healthy lifestyle campaign and joined the mass aerobic exercise held at Quirino Grandstand last February 16, 2003. Celebrated World Hearts Day in Ultra last September 2003. **GMA 50.** Conducted training of BnB operators in 36 barangays in Oriental Mindoro and 69 barangays in Occidental Mindoro. Operationalized 5 BnBs in the municipalities of Victoria, Bongabong, Bulalacao and Gloria. **NHIP.** A total of 121,656 were enrolled to PhilHealth, 60,241 of which were indigents. User's fee was implemented at the provincial level and all district hospitals in Oriental Mindoro.

CHD Bicol

TB Control Program. Attained a case detection rate to 70.3% and cure rate to 78.6%. Sputum Microscopy training was done for 20 newly hired medical technologists. Inaugurated the Regional TB Reference Laboratory, donated by the Spanish government. **Rabies Prevention and Control Program.** There were 63 human rabies cases monitored in the region. This figure is 7% higher as compared to last year's data of 59 cases. **Child Health.** Increased trend on the availability of iodized salt in the market, from 62% in the 1st quarter to 95% in the 4th quarter. This is due to continuous advocacy on the benefits of iodized salt utilization, close coordination with LGUs/NGOs and the successful launching of "Patak sa Asin sa Warehouse" and close monitoring of markets and warehouses. **Women's Health.** Conducted training of 725 health workers on NFP and community assemblies on fertility awareness, participated in by 85 couples and 765 individuals. The NFP user rate was increased to 5% among couples who are not using any FP method. A total of 5,308 bilateral tubal ligation and 212 non-surgical vasectomy were conducted. **Healthy Lifestyle.** Launched healthy lifestyle campaign at the Bicol University Soccer Field on February 16, 2003 with 1,330 participants from various GOs, NGOs, schools and line agencies. **GMA 50.** Expanded GMA 50 project to the LGUs, four (4) LGUs availed of the project: Gubat and Prieto Diaz in Sorsogon and Ligao City in Albay purchased medicines for the RHUs while Catanduanes availed of the medicines through bulk procurement for distribution to the seven (7) district hospitals in the province. Fifty (50) BnB operators were trained, and two (2) regular BnBs were issued Special License to Operate. **NHIP.** Conducted writeshop on training module for Social Health Insurance and intensified advocacy in partnership with PhilHealth.



CHD Western Visayas

TB Control Program. Attained a 100% TB-DOTS with a cure rate of 85% and case detection rate of 82%. A total of 7,775 (82% of target) sputum positive cases were reached. In collaboration with PHILCAT and World Vision, and adopting the Public-Private Mix DOTS (PPMD) approach, the Citizen's Ilonggo Coalition Against Tuberculosis (CICAT) was organized, resulting in the establishment of 3 PPMD TB clinics. **Rabies Prevention and Control Program.** Six roundtable discussions and multi-sectoral conferences were conducted to intensify health promotion and advocacy on Responsible Pet Ownership. An increase in the number of LGUs implementing ordinances was noticed during the monitoring, particularly in Guimaras, the province with the most number of human rabies cases. Technical assistance and augmentation of post-exposure prophylactic agents were provided for the operation of 31 Animal Bite Treatment Centers. **Child Health.** LGUs were provided with vaccines and augmentation of needles and syringes. The new EPI guidelines and policies were disseminated in all provinces and cities. These efforts resulted in the LGU attainment of 80% FIC. Vitamin A capsules were given to 498,437 children, 68% of target and 583,858 children, 81% of target, during the April and October campaign. Conducted Patak sa Asin in the market, results showed that 91% of salt samples tested in markets were positive for iodine. "Patak sa Asin sa Warehouse" showed that 73% (89 out of 11) of those monitored have iodizing machines. **Women's Health.** Intensified health promotion resulting in fertility awareness of 30%, as reported in a recent KAP survey in the region. There were 388 bilateral tubal ligation performed by 2 itinerant teams from Western Visayas Medical Center and Corazon Locsin Montelibana Memorial Regional Hospital. "No scalpel" vasectomy services were also provided in Iloilo and Negros Occidental, and vasectomized 871 clients making the region No. 1 in male involvement in family planning in the whole country. **Healthy Lifestyle.** Launched healthy lifestyle campaign in February 2003, which was participated in by about 5,000 advocates in the region. Conducted orientation of hospital personnel on the establishments of Smoking Cessations Clinics in DOH and LGU hospitals. **GMA 50.** All the four (4) DOH retained hospitals and some LGU-managed hospitals are now purchasing drugs and medicines from PITC. Pursued setting-up of the BnBs specially GIDAs and identified 12 barangays as BnB recipients. **NHIP.** Focus was made on the expansion of the Indigency Program and to reach out to informal sector. Potential members such as the drivers and market vendors were targeted in the advocacy campaign. Local chief executives and officials were oriented in the program, its importance and advantages.

CHD Central Visayas

TB Control Program. The region achieved a cure rate of 86.1% and a case detection rate of 54%. A Reference Laboratory for Mycobacterial Identification and Differentiation was established and tasked to train microscopist in Basic Microscopy and Quality Assurance System. **Rabies Prevention and Control Program.** Reduction of human rabies cases from 3.5/1,000,000 population in 2002 to 1.5/1,000,000 population, due to the intensified information campaign. ABTCs are in-place and functional in major cities of the provinces and strategically located to provide easy access to bite victims. **Child Health.** Promoted Child Health through the implementation of Child Care program. Expanded Program on Immunization, Breastfeeding and Lactation Management and Newborn Screening. Conducted Polio, Vitamin A Deficiency and Measles Elimination Campaign in priority areas as a response to increasing number of measles cases in some municipalities and cities. Massive advocacy on Food Fortification (Asin Law) was done in the entire region. **Women's Health.** Strengthened family planning to increase contraceptive prevalence rate which is currently pegged at 49% based in 2002 Family Planning Survey. **Healthy Lifestyle.** Launched the Healthy Lifestyle campaign highlighted by a mass Hataw exercise activity at the IT Park, Lahug, Cebu City. The launching included information campaign on healthy diet, ill-effects of smoking, importance of regular check-ups and stress reduction. **GMA 50.** Adopted the Parallel Drug Importation and establishment of BnBs. To date, 7 LGUs have opted PDI procurement amounting to P3,040,654.00. **NHIP.** Members enrolled through CHD efforts are 78,872 and 86,605 individuals for Medicare Para sa Masa Program and Individually Paying Program respectively.

CHD Eastern Visayas

TB Control Program. Celebrated World TB Day and Lung Month, with a motorcade, symposia, TV and radio guesting. A National Drug Resistance Surveillance was started in June 2003 and still ongoing, to determine the national prevalence of primary resistance to the four major anti-TB drugs. **Rabies Prevention and Control Program.** Massive information campaigns, in coordination with the LGUs concerned and other GOs and NGOs, were conducted. Consultative workshop with the different ABTC staff and selected MHOs and PHOs was conducted. Free anti-rabies vaccines and anti-rabies serum were provided through the ABTCs. **Child Health.** Conducted preparatory activities for the 2004 Philippine Measles Elimination Campaign. A total of 456,781 (88.27%) and 559,942 (88.89%) children aged 6-59 months old were covered during the April and October Garantisadong Pambata Week, respectively. The salt testing in markets done quarterly, showed an increased in the availability of iodized salt from 86.62% in March 2003 to 94% in December 2003. Household salt testing done in October showed 85.7% household utilization of iodized salt. **Women's Health.** A Dialogue-Consultation was conducted to provide new information to stakeholders on Mainstreaming of Natural Family Planning and Fertility Awareness, participated by GOs, NGOs and private sectors. Major activities include the presentation of the National and Regional Situation on NFP, Simulate Mel and Jay and Press conference, and strategic planning for stakeholders. **Healthy Lifestyle.** A synchronized mass aerobic exercise was conducted in celebration of the Heart month. About 1,000 participants joined the activity at RTR Plaza, Tacloban City. Weekly exercise at DOH office every 4:00 to 5:00 pm is being held.

CHD Zamboanga Peninsula

Rabies Prevention and Control Program. Zamboanga del Sur launched "Bantay Rabies sa Barangay". Organized Barangay Rabies Control Committees to ensure immunization of all dogs against rabies, and to assist in the campaign for responsible pet ownership, to advertise the existence of Animal Bite Treatment Centers and to submit the head specimen of the biting animal to the diagnostic clinic. **Healthy Lifestyle.** A Comprehensive Healthy Lifestyle Advocacy and Health Promotion Campaign was developed to promote public awareness on the need to practice a healthier lifestyle. On February 16, 2003, an estimated 30,000 participants from all over the region participated in the activity. Early morning exercises is being held at the Joaquin Enriquez Memorial Sports Complex through the initiative of the LGUs of Zamboanga City. There is also a continuing activities on healthy lifestyles, diet and physical exercise for all health stakeholders. **GMA 50.** All the 7 DOH-retained hospitals in the region are dispensing GMA 50 drugs. There are also 9 municipal/district/provincial hospitals in Zamboanga del Norte that are dispensing drugs from the GMA 50 project. The region is in the process of licensing 8 BnBs. **NHIP.** A total of 47 LGUs have enrolled 58,359 families to the sponsored program. Reimbursement of medical expenses for indigent BHWs is also implemented in the region.

CHD Northern Mindanao

TB Control Program. Increased TB cure rate from 87.15% in 2002 to 88.29% in 2003, and a case detection rate of 101.4% against the 88% target for the year. Organized the Northern Mindanao Coalition Against TB (NORMINCAT) during a symposium on PPMD, which was attended by 100 participants from the different sectors within Cagayan de Oro City. A Rapid Field Appraisal in 70 LGUs was conducted to assess and evaluate the program implementation. Drug Resistance Survey in selected areas was also done. **Rabies Prevention and Control Program.** There was a 39% reduction in the number of dog bites this year compared to the previous year, that from 5,818 in 2002 to 3,539 in 2003. Established two (2) ABTCs in the province of Bukidnon, making it a total of 7 ABTCs in the region. Camiguin was the 1st island province to be declared Rabies Free after satisfying the criteria of no human rabies death for the last 3 years, and all 5 municipalities implemented the ordinance on Responsible Pet Ownership. Seventy (70) LGUs were provided with the Manual of Operations and Management Guidelines in the Management of Animal Bites. Ninety-three percent (93%) of the 70 LGUs have implemented the ordinances of Responsible Pet Ownership. **Child Health.** Salt testing results showed that 85% of salt tested in the market, and 86.92% of those from the household were positive for iodine. There are 4 salt iodization machine in the region and 2 licensed salt producer/manufacture. The Garantisadaang Pambata conducted in April and October 2003 exceeded the target by accomplishing 102.23% and 99.93%, respectively. **Women's Health.** Provided/distributed drugs and medicines to fifteen (15) hospitals and seven (7) CHOs with sterilization services. Conducted NFP training to 15 participants from Misamis Occidental, Bukidnon, Gingoog City, Northern Mindanao Medical Center, POPCOM staff and FPO nurse. Conducted intensive monitoring and evaluation of modern FP methods, to 35 RHUs and 15 hospitals. **Health Lifestyle.** Conducted a Mass Walk within Cagayan de Oro followed by aerobics at Pelaez Sports Center with an estimated 2,000 participants from the different agencies and NGOs. In celebration of Heart Month and World No Tobacco Day celebration, press conferences, press releases and radio guestings were done.

CHD Davao

TB Control Program. TB cases admitted in 2002 showed a cure rate of 72%. Completed data collection on the Drug Resistance study participated in by 78 TB cases. Three (3) PPMD Centers were organized. A Regional Coordinating Committee for PPMD was created to expand PPMD to private hospitals under the Global Fund. **Rabies Prevention and Control Program.** There were 3,051 bite cases seen in the 14 functional ABTCs in the region. Sustained the enforcement of the ordinance on Responsible Pet Ownership in Davao City, in the Island Garden City of Samal and in the 10 other municipalities/component cities in the region. **Child Health.** Addressed the declining EPI coverage in the region through organization and deployment of the Regional Technical Assistance Teams to the 4 provinces and Davao City to provide assistance to local health units, facilitate monthly performance audit, and formulate catch-up plan per municipality. The quality of EPI records and reports were upgraded through reports validation, active masterlisting of births, and use of CBMIS data to update EPI-CPL. Strengthening of cold chain and logistic management through regular monitoring visits by the Regional Cold Chain Manager. Partial EPI reports in the region showed a 70% FIC coverage for 2003. Availability of iodized salt increased from 51 in October 2002 to 96% in December 2003. There is a 94% utilization of iodized salt in the household. Eighty-one percent (81%) of municipalities and cities have ordinances and resolutions in support of Asin Law. **Women's Health.** Partial Family Planning reports in the region showed a Contraceptive Prevalence Rate of 49%. There were 55 MHOs trained and conducted vasectomy on 78 clients. Standard Days Method was piloted in Lupon and Banaybanay of Davao Oriental wherein the highest number of SDM users was reported. **Healthy Lifestyle.** Launched healthy lifestyle campaign through a mass aerobic exercise at SM City Park in Davao City, with more than 10,000 participants from different public and private organizations. Participated in the "Araw ng Dabaw" with a healthy lifestyle float that won them the third prize in the float contest. **GMA 50.** Four (4) government hospitals are selling GMA 50 drugs. There are 62 functional BnBs, 20 of which were already evaluated for licensing. Conducted training of trainers for 151 BnB Aides, and training on Drug and Therapeutics Committee of secondary and tertiary hospitals.



CHD SOCCSKSARGEN

TB Control Program. Conducted orientation on Fixed Drug Combination and Hospital Based DOTS and Measures to implement in the dispensing of Anti-TB drugs. Rapid Field Appraisal for 52 RHUs and monitoring visits for RHUs with cure rate below 85% was also done. Trained microscopists on Quality Smearing and Staining. Case detection rate is 78.3% and cure rate is 78.2%.

Rabies Prevention and Control Program. Conducted training on the Management of Animal Bite Victim and advocated Responsible Pet Ownership to LGUs. Verorab/Erig Vaccine were allocated and distributed to different ABTCs. Established 1 ABTC. A total of 3,231 animal bite cases were seen. 2,655 (82%) patients were given post exposure treatment.

Child Health. Conducted orientation on PMEC, on the use of auto-destruct syringes among health workers and its proper disposal and monitoring and inventory of cold chain management among LGUs. Conducted survey on household utilization of iodized salt, quarterly salt testing activities in markets, food establishments/restaurants sari-sari stores and groceries, monitoring visits to food industry/manufacture, and program implementation reviews.

Women's Health. Conducted Competency Based Training Course among health care providers. Provided CDLMIS recording forms to 55 LGUs, and grants amounting to P2,150,000 to 18 LGUs. Mobilized BHWs in the promotion of FP with emphasis on no scalpel vasectomy.

Healthy Lifestyle. Launched "Healthy People for a Strong Republic", a mass aerobic activity, and conducted Sales and Command Conference on HL, orientation on Smoking Cessation among LGUs, and symposium on REDCOP. Advocated HL to NGOs. **GMA 50.** Conducted advocacy campaigns including radio plugging to LGU hospitals, and regular monitoring of 2 retained hospitals on the implementation of GMA 50. Provide essential drugs and medicines to 50 LGUs. **NHIF.** Conducted consultative meeting with PHIC, and advocacy campaigns to LGUs. Tri-media campaign on Indigency Program was also conducted.

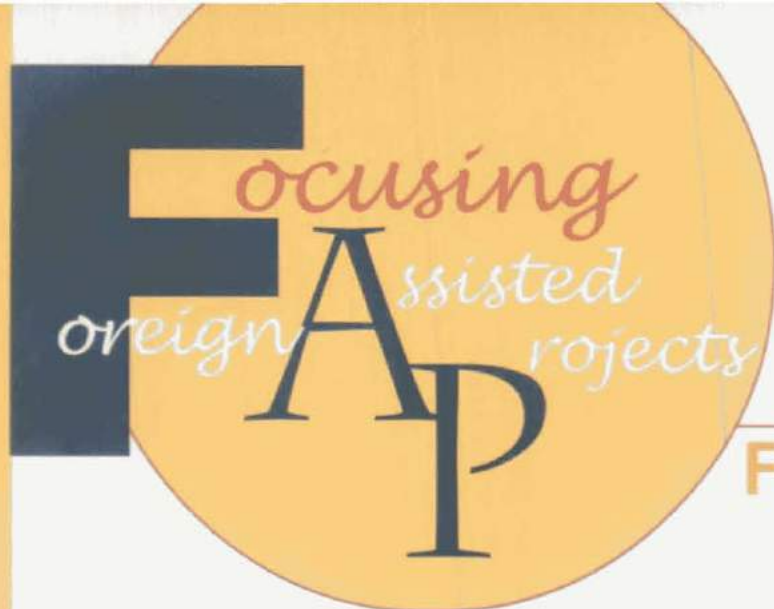
CHD CARAGA

TB Control Program. Established TB clinics in retained hospitals. TB cure rate of 89.10%. Conducted World TB Day and National TB Day. **Rabies Prevention and Control Program.** Conducted advocacy to LGUs and partners agencies in Agusan del Norte. Maintained 9 ABTCs. Attained support of 100% LGUs in the enforcement of Responsible Pet Ownership.

Child Health. Conducted orientation on the 2004 Philippine Measles Elimination Campaign. Ninety-six (96%) of children aged 12-59 months old given Vitamin A supplementation during the April Garantisadong Pambata. Patak sa Asin conducted in 2nd Quarter of the year showed that 95.5% of samples were positive for iodine. Eighty-nine percent (89%) of household are utilizing iodized salt.

Women's Health. Conducted orientation training on the use of partograph among hospital and RHU staff. Conducted consultative workshop on family planning and reproductive health.

Healthy Lifestyle. Conducted healthy lifestyle campaign in Butuan City Sports Complex, with health Fair and booths displaying food products with Sangkap Pinoy seal. The PHA, Agusan del Norte Provincial Hospital, and Butuan City Medical Center conducted diabetes and blood cholesterol screening, and taking of blood pressure.



For Health Sector Investments

Health investments have become more focused in 2003. This was supported by an Administrative Order No. 189 S, 2002 that provided the directions for investments in the health sector. Unified GTZ Support for HSRA continued implementation of HSRA in Southern Leyte while the preparation studies for several comprehensive projects like the Health Sector Development Project (HSDP) supported by the ADB, the Health Sector Reform Project (HSRP) and the 2nd WHSMP assisted by World Bank and JICA support to the HSRA have looked at the Health Sector Reform Agenda as the policy framework.

Unified GTZ Support for HSRA included assistance in areas of policy advocacy, systems development, commodity support, capacity building and social mobilization in areas of Family Planning and Reproductive Health, Social Health Insurance, drug distribution through social franchising and Local Health Systems. This assistance covers various levels of the health sector, from the national and regional DOH, Population Commission, Local Government Units in Region 8 particularly Southern Leyte and civil society.

The preparation studies for the HSDP in the provinces of Ifugao, Nueva Vizcaya, Ilocos Norte, Romblon and Oriental Mindoro have also been started. The project preparation has identified policy areas that are needed to be in place to sustain the gains for health sector including network licensing, strengthening the fiscal autonomy of national and local hospitals and establishing the essential package of services at different levels of health care. HSRP on the other hand developed the a) second peso benefit for the indigents of pilot sites that include Capiz, Agusan Sur, Misamis Occidental and Pangasinan; b) established the drug management system for the ILHZ; and c) identified the mechanisms to identify the poor in the convergence sites.

The 2nd WHSMP preparation studies developed the service delivery models for maternal care, family planning services, STI-HIV and ARH in the context of the Health Sector Reform Agenda in Bukidnon, Ililo City and Surigao Sur.

All project proposals for 2003 have been reviewed and developed along the framework of the institutional and convergence site development articulated in the HSRA Implementation Plan. In addition, the oversight agencies and increasing number of the donor partners of the DOH have subscribed for the implementation of HSRA.



Japan International Cooperation Agency (JICA) Support to the Health Sector Reform Agenda

Among the bilateral donors, JICA started to focus their assistance along the Health Sector Reform Agenda. They have conducted the Training for Policy and Project Development for Health Sector Reform for DOH central and regional personnel and selected LGU participants. JICA also conducted baseline studies for their prospective sites.

Training on Policy and Project Development

The Department of Health, in collaboration with the Social Science and Philosophy Research Foundation, Inc. (UP-Diliman), with funding support from JICA conducted a five-day training on Policy and Project Development for Health Sector Reform. The training aims to enhance staff capacity in LGUs in the implementation of the HSRA. At the end of the training, participants from the different CHDs and LGUs were required to submit their Project Proposal for HSRA implementation. These proposals were the basis for the selection of three (3) HSRA convergence sites to be funded by JICA.

Baseline Data Formation for Three Convergence Sites

Three localities have been identified to be prospective beneficiaries of Japan's assistance; the provinces of Catanduanes and Bukidnon, and the city of Iloilo. Baseline data have been collected for these areas to provide a starting point from which the convergence site planning will advance. The purpose of the baseline data survey is to assess further the convergence sites and determine what assistance can be provided by JICA.

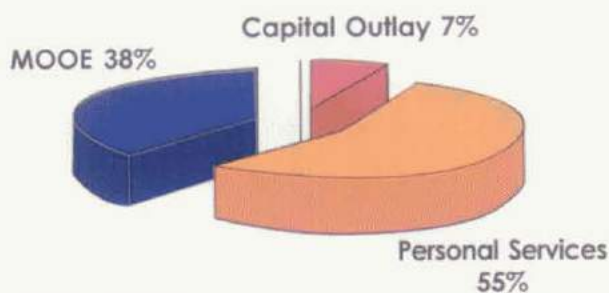
FINANCIAL REPORT

■ The DOH total budget for 2003 is P 9.9 billion. Most of the proposed budget goes to personal services and MOOE, and minimal amount for capital outlay. The budget includes locally-funded projects proposed for: 1) Social Expenditure Management Program (SEMP3) under World Bank (Health Sector Reform Project); 2) Assistance for Improvements for primary/secondary hospitals; and 3) Foreign Assisted Projects.

Some format changes were made in the CY2003 budget. The changes include, Program Activities and Projects (PAPs) for Centers for Health Development (CHDs) in Mindanao were renamed as per Executive Order No. 35, as follows: CHD Zamboanga Peninsula, CHD Northern Mindanao, CHD Davao Region, CHD SOCCSKSARGEN and CHD Caraga.

Likewise, new PAPs have been included. Provision for fire safety equipment for hospitals was added, in compliance to the Fire Safety Code. Under the locally funded projects two line items were included: (1) Health Sector Reform Project, to assist local development of reform projects; and (2) Local Assistance for Primary and Secondary Hospital Care, to assist in the development of primary and secondary hospital care.

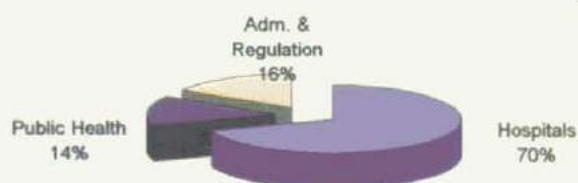
Allocation by Expense Class, CY 2003
(in billion pesos)



● About 55% of the total DOH budget goes to Personal Services (PS), 38% to Maintenance and Operating Expenses (MOOE), and only 7% to Capital Outlay (CO).

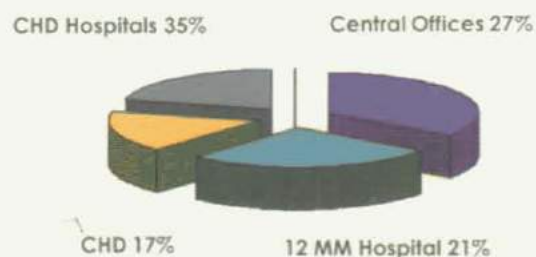
Our budget provides for more funds to (CHDs), such that 52% of our budget is allocated for CHDs and their Regional Hospitals.

Allocation by Function, CY 2003 (in thousand pesos)



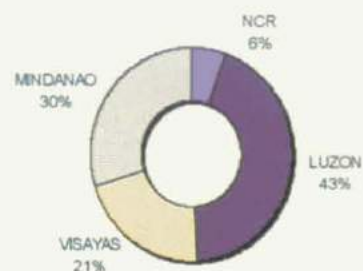
Luzon gets the highest MOOE share for 2003 with 43% share. Mindanao gets 30%, followed by Visayas with 21% and NCR with 6% share.

MOOE Allocation by Administrative Level 2003 CY 2003 (in billion pesos)



Since 2000, more than 50% of the MOOE is allocated to hospital services. For 2003, 70% of our budget is still used up by health facilities because of the high cost of maintaining hospital services. Special provision # 6 of the General Appropriations Act for FY 2003 (Republic Act 9206) authorized 100% retention and use of income for all DOH hospitals.

MOOE Allocation by Geographical Area CY 2003 (in thousand pesos)



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