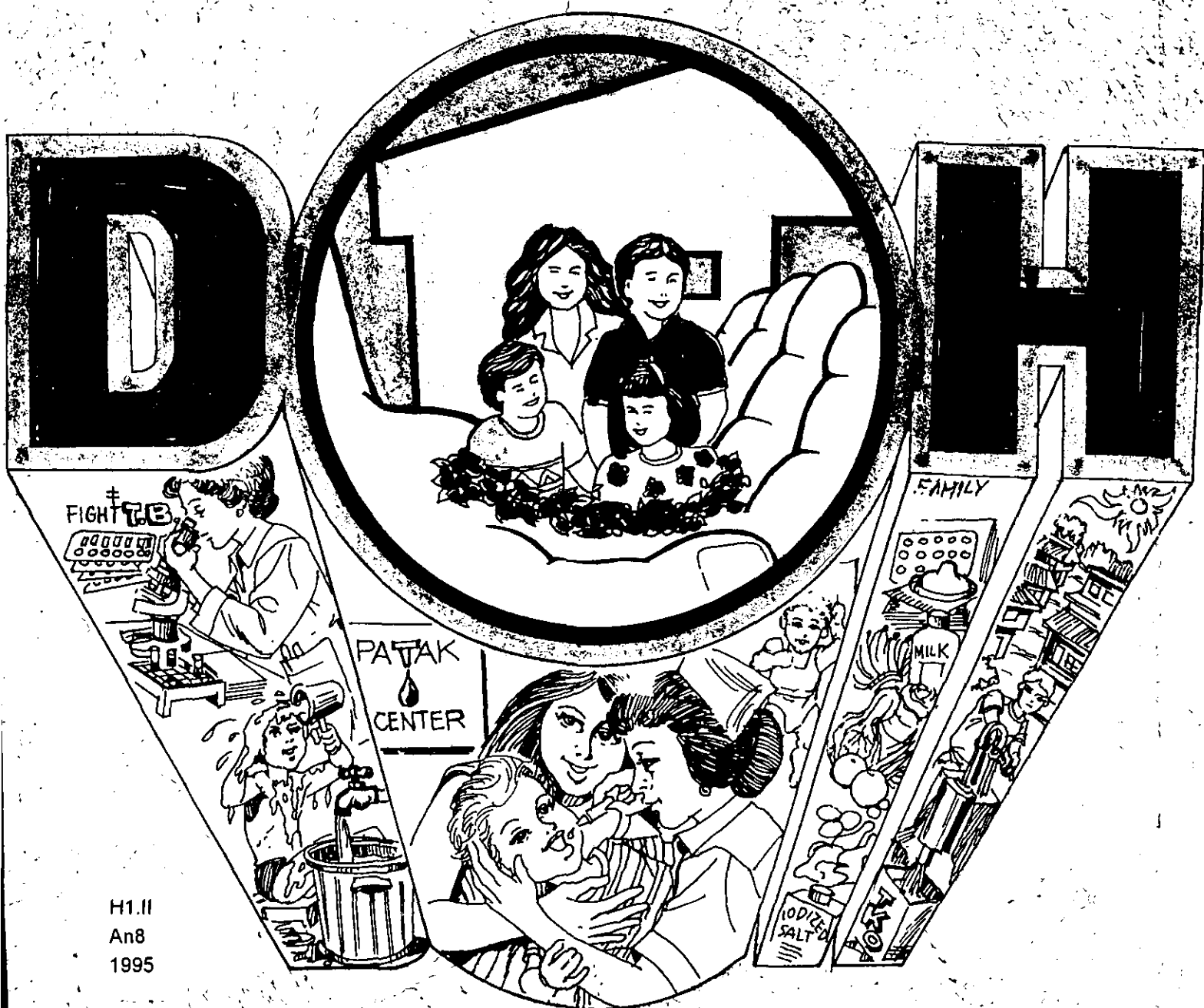


1995  
ANNUAL  
REPORT



H1.II  
An8  
1995

DEPARTMENT OF HEALTH

# E ditorial Board

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# Message

**Health** is a primary concern of all and with this grows the need to focus our efforts to work as one nation. We have, in many instances, manifested this sense of unity.

In 1995, health was promoted under the umbrella of the **Think Health, Health Link** multi-sectoral strategy and was given

The **Think Health, Health Link** was conceptualized to bring health messages to where the people are while the **Five for Life** made the people aware of the five impact programs of the Department, namely **National Immunization Day, Huling Hirit : Tubig, Kubeta, Oresol (TKO): Kontra Kolera; Target : Stop TB; Araw ng Sangkap Pinoy (ASAP);** and Family Planning.



The year 1995 is another example of a concerted effort that will bring us closer towards the realization of a Healthy Philippines 2000. Networking with our partners in the other government, non-government and private organizations also lend invaluable support to all our programs.

media attention through the **Five for Life in '95** package of priority programs.

*Kayang-kaya kung sama-sama tungo sa Pilipinas 2000. Mabuhay tayong lahat.*

DOH



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H1.II An8 1995 / Department of Health annual report 1995

*Carmencita Noriega-Reodica*  
**CARMENCITA NORIEGA-REODICA, MD., MPH, CESO II**  
Secretary of Health

# Office of the Chief of Staff (OCS)

## COMMUNITY HEALTH SERVICE (CHS)

### Mandate:

To provide services related to formulating plans and programs for coordinating with non-government organizations, peoples organizations, the local government units and the communities in health and health-related activities, programs and projects.



### Accomplishments:

#### 1. Policy, Standards and Guidelines Development

- \* Formulation of the Implementing Rules and Regulations of R.A. 7883 otherwise known as "Barangay Health Workers' Benefits and Incentives Act of 1995"
- \* Guidelines/Administrative Issuances prepared in support of the implementation of the following programs:
  - a) Primary Health Care
  - b) Indigenous People's Health Programs

- c) Healthy Barrio Initiative
- d) Health Development Fund for 20 SRA Provinces
- e) Community Health Databoard
- f) DOH-Social Reform Agenda Program Support

- \* Initiated the development of the PHC Policy for Community Health Development
- \* Creation of the Multisectoral Technical Working Group to formulate:
  - a) The BHW Basic Training Curriculum
  - b) Botica ng Barangay Guidelines

#### 2. Capability Building

- \* Leadership Training of 25 officers of National Confederations of BHWs
- \* Minimum Basic Need - Data Board System Integration among 60 National and Regional Health Staff
- \* National Workshop on Program Integration for SRA with 75 DOH national and regional participants

#### 3. Resource Management

- \* Facilitated release of funds/grants for:
  - a) Planning, capability and community projects through NGOs/LGUs for Indigenous People's communities in CAR, Regions IV, VI, X, XI and CARAGA
  - b) Communities in 61 provinces through LGUs to set-up and operate Community Health Databoards
  - c) Proponent NGOs/Academes/LGUs of duly reviewed and approved projects under PHC
- d) Healthy Barrio Initiatives at field level
- e) Support to LGUs, NGOs, POs and BHWs for area-based planning process, community projects and capability-building activities.
- \* Distribution of Logistics and IEC Materials such as:
  - a) Health Data Board Guidebook
  - b) Partnership for Community Health Development Manual
  - c) Barangay Health Workers' Kit

#### 4. Monitoring and Evaluation

- \* Conduct Rapid Appraisal of the year 3 PCHD Implementation in 64 Barangays

- \* Monitored the funds released to concerned units, LGUs, NGOs, POs and Academes

#### 5. Advocacy

- \* Conducted the Third National Congress of Barangay Health Workers on December 10-14, 1995 with 500 participants.
- \* Conducted the Second National Congress for the Partnership for Community Health Development on November 5-8, 1995 with 450 participants
- \* Launching of and development of IEC materials for "Healthy Barrio".
- \* Social Reform Agenda Orientation of 450 National and Regional Health Staff

#### 6. Networking and Linkaging

- \* Established DOH-Save the Children Federation, Inc. Partnerships for the management of the Community Volunteer Health Worker's program.
- \* Facilitated and coordinated the preparation and DBM approval of 1995 and 1996 Operational Plans and budget of line agencies under the newly created CARAGA Region as CORD for CARAGA - assisted 12 line agencies namely: DILG, DSWD, DECS, DOLE, DPWH, DOH, DTI, DOTC, DOST, LTFRB, OSCC and NEDA

### DEPARTMENT LEGISLATIVE LIAISON OFFICE (DLLO)

#### Mandate:

To maintain a strong relationship between DOH and the strategic government offices particularly, the Senate and House of Representatives and to bridge a good working system relative to policy making and the attainment of national objectives through effective legislative liaising

#### Accomplishments:

1. Establishment of the Congressional Response System in the regional level
2. Formulation of the Department Legislative Agenda for the 10th Congress.

3. Legislation coordination for the approval of the DOH 1995 budget

#### 4. Enactment of the following health laws:

- a) National Health Insurance (RA 7875) - February 14, 1995
- b) Barangay Health Workers Incentives (RA 7883) - February 20, 1995
- c) Corneal Transplant (RA 7885)
- d) Salt Iodization

#### 5. Filing/Refiling of the following health bills in Congress

- a) SB 1704 - on AIDS education and prevention program
- b) SB 1893 - Rights of Patients
- c) SB 1254 - Regulation on Smoking
- d) SB 1944 - bill penalizing fake drug/production
- e) SB 1979 - Hospital Licensure Act
- f) Health Facilities Licensure Act
- g) Herbal Medicine Patients
- h) Vesting quasi-judicial powers to BFAD
- i) DOH Reorganization
- j) Botica sa Binhi
- k) Biological Production Corporation
- l) Internal Revenue Allotment (IRA) amendment to improve devolution of health services

### Program: DISASTER MANAGEMENT UNIT (DMU)

#### Mandate:

To lead in the provision of health services and to organize disaster control groups in hospitals clinics and other health facilities

#### Accomplishments :

In 1995, the Disaster Management Unit (DMU) accomplished the following:

1. Responded rapidly and efficiently to fourteen (14) disasters which occurred from man-made disaster to a natural calamity
2. Established linkages with other GOs, NGOs,

- LGUs and international organizations
3. Conducted the First Celebration of the Natural Disaster Consciousness Week
  4. Conducted National Disaster Management Consultative Workshop.
  5. Conducted training in Basic Disaster Management
  6. Went on 24-hour duty for the monitoring of fire cracker-related injuries
  7. Produced and disseminated IEC materials, e.g., newsletter Disaster Watch

2. Orientation of Health Directors/Program Managers on Health Systems Research
3. Training needs assessment among ENHR staff and coordinators
4. Monthly forum for research dissemination/ utilization
5. Production and dissemination of newsletter and executive briefs on research
6. Establishment of one (1) ENHR Library
7. Monitored ENHR/Regional Research Program Plan implementation



## **ESSENTIAL NATIONAL HEALTH RESEARCH (ENHR)**

### **Mandate :**

To direct coordinate support and sustain health research activity in the health sector.

### **Accomplishments:**

To achieve its mandated function, the Essential National Health Research (ENHR), undertook the following activities:

1. Launching of Research Consciousness Week "Tuklas Lunas" Celebration

## **FOREIGN ASSISTANCE COORDINATION SERVICE (FACS)**

### **Mandate:**

To provide staff services related to the development, coordination, monitoring, reporting and assessment of foreign assisted projects of the Department of Health.

### **Accomplishments:**

In 1995, the Foreign Assistance Coordination Service (FACS) coordinated/assisted in the negotiations, implementation and monitoring of 18 foreign-assisted projects funded by 10 foreign institutions. It has also made

representations in 5 inter-agency bodies and was also involved in 3 various intra-DOH committees/task forces. It has also produced nine (9) documentations which were submitted/disseminated to embassies/consulates and foreign-funding agencies.

Medical Missions and other volunteer groups conducted free clinics, surgical operations and other forms of health/medical assistance of which six (6) missions were conducted. FACS also facilitated the release/distribution of foreign donations to NGO recipients.

FACS continued to discharge project coordinating functions for the 1994-1995 WHO Program of Cooperation even as it began start-up activities for the 1996-1997 Program and preparatory work on the formulation of the 1998-1999 Program. As databases on fellowships and other forms of external assistance are updated, FACS also started to focus on its evaluation function, beginning with its annual assessment of the availment and impact of fellowships and post-project evaluation of the JICA project Equipment Upgrading of Provincial Hospitals (Phases I and II). To further improve the evaluation of DOH investment in human capital, FACS prepared a Department Circular requiring returning fellows to work on re-entry plans or on special assignments. It also put together an updated compilation of guidelines on foreign donations under the regular facility of the Office of the President (OP) for donations to calamity areas/victims.

## **FAMILY HEALTH MANAGEMENT BY AND FOR URBAN POOR SETTLERS (FAMUS)**

### **Mandate:**

To provide services related to the improvement of the Health of the Urban Poor.

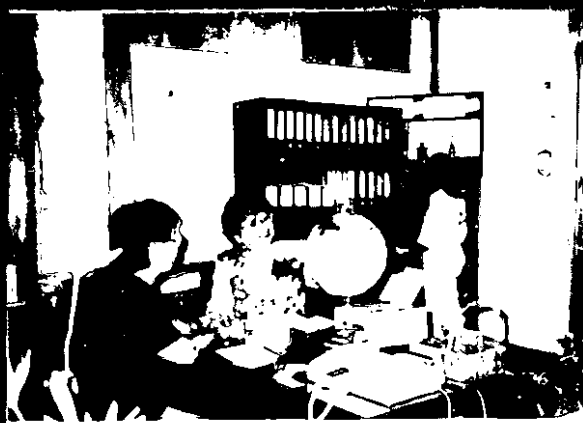
### **Accomplishments:**

For the year, FAMUS coordinated the conduct of operational planning updates in Agusan, Cavite and Quezon and participatory planning with Region 4 and CARAGA Region. Planning and feasibility studies on FAMUS pharmacies was also undertaken.

Training on Comprehensive Family Planning attended by 85 participants was held. A total of 108 barangay health workers and 375 family health workers, including hilots were trained. There was also a training on Botika Binhi.

All public hospitals in Quezon and Cavite were computerized. As to infrastructure, 2 pharmacies were being constructed while 10 botika binhi were made operational in 10 barangays of Cavite and 2 in Lucena.

FAMUS Pharmacy which is the flagship of the program had undertaken the following activities: a) absorptive capacities for drugs studied; b) logistic information system adjusted; c) infrastructure plan done; d) FAMUS specific means-test developed and tested; and e) awareness of community organizations expanded.





## **FIELD EPIDEMIOLOGY TRAINING PROGRAM (FETP)**

### **Mandate:**

- \* Training in Epidemiology - 2 year course and short courses for MHOs
- \* Outbreak investigations
- \* Disease surveillance



### **Accomplishments:**

Among the major achievements of the program during the year are as follows:

- \* Conducted twenty (20) outbreak investigations
- \* Published 1994 Epidemiology Report (FETP Bulletin)
- \* Conducted Basic Epidemiology and Surveillance Courses for MHOs, PHNs, and RHM's
- \* Conducted supervisory visits in all regional sentinel sites
- \* Trained FETP graduates and fellow on cost analysis
- \* Trained National Epidemic Sentinel Surveillance System staff (Nurses and Clerks)

## **FINANCIAL OPERATIONS AND FRONTLINE SERVICES AUDIT (FOFLSA)**

### **Mandate:**

To provide assistance to managers of the Department of Health in the effective discharge of their responsibility by seeing to it that all resources made available to the department are managed and expended/utilized in accordance with laws and regulations and safeguarded against loss of wastage, through illegal and improper disposition with a view of ensuring efficiency, economy and effectiveness in its operation

### **Accomplishments:**

The Financial Operation and Frontline Services Audit (FOFLSA) accomplished the following in 1995:

1. Audited twenty (20) agencies/offices under the DOH
2. Conducted five (5) fact-finding investigation of reported complaints against DOH personnel
3. Evaluated fifty-nine (59) Procurement Monitoring Reports as well as fifteen (15) Progress Reports on the implementation of audit recommendations
4. Validated six (6) inventory reports of equipment submitted by field health agencies
5. Acted on fifty two (52) referrals/requests from Regional Field Offices and two (2) from the office of Ombudsman

## HEALTH AND MANAGEMENT INFORMATION SYSTEM (HAMIS)

### Mandate:

To develop measures so that information and knowledge are utilized for a more efficient, effective and equity-oriented Health Management System.

### Accomplishments:

1. HAMIS Expansion
  - Regional Information Center for Health (RICH) in Region X
  - WINHEALTH in Region XI
2. Development and testing of licensing information system
3. Mini-research contest in Lucena
4. Publication and dissemination of policy papers on community health care financing
5. Upgrading of computer systems at DOH and in some devolved health offices
6. HAMIS Presentations
  - European Tropical Medicine Conference in Hamburg
  - Health Care Financing Seminar in Berlin
  - Regional Conference of GTZ support projects in Asia

## HEALTH INTELLIGENCE SERVICE (HIS)

### Mandate:

To provide services related to the formulation of disease intelligence, assessment of the state of health of the country and development and maintenance of effective and comprehensive health information systems to support planning and implementation of health programs.

### Accomplishments:

1. Conducted FHSIS National Consultative Workshop and Operational Planning Workshop
2. Published 1994 Philippine Health Situationer and 1995 Updates on Philippine Health Statistics
3. Participated in the activities of National Statistics Month Celebration
4. Monitoring and Alternative Data Collection Activities
5. Training of all HIS personnel on Health Facility Survey



## HEALTH MANPOWER DEVELOPMENT AND TRAINING SERVICE (HMDTS)

### Mandate:

To formulate, plans guidelines and standards for Health Manpower Development.

### Accomplishments:

1. Doctors to the Barrios
  - Recruited and deployed 126 doctors in 36 priority provinces
2. Rural Health Practice Program
  - Deployed 15 nurses to serve in depressed and disadvantaged areas of the country
3. Third Country Nationals Training Program
  - A total of 51 Third Country Nationals to attend various fields of studies were oriented on the Mission, Vision, Goals, Objectives as well as the Organization of the Department of Health.
4. Partnership for Alternative Health Sciences Education (PAHSE)
  - This project supports programs that seek to widen the Filipino peoples access to appropriate health care services by providing health workers not only in far flung communities. The DOH supports financially the education of health workers in the community to pursue a ladderized type of education suited for the community like BHW, midwives, nurses and doctors.

## HEALTH POLICY DEVELOPMENT STAFF (HPDS)

### Mandate:

To establish, strengthen and manage the Health Policy process of the department and facilitate the development of Health Care Financing Policies.

### Accomplishments:

During the year, the HPDS undertook the following:

1. Development of a model for a Health Policy Process at the national and regional levels.
2. Development, compilation and maintenance of policy data bases.
3. Linkage and networking with public/private sector.
4. Review and consolidation of DOH position papers on proposed legislation.
5. Publication and dissemination of monographs, policy memos and briefs.
6. Provision of Secretariat support to Management Committee, Executive Committee and National Staff meetings.
7. Technical/Administrative Support to the foundation and/or passage of Healthy Care preventing laws like the National Health Insurance Law.
8. Technical and Administrative Support to the development of operational and administrative support policies.



## INTERNAL PLANNING SERVICE (IPS)

### Mandate:

To provide the Department with necessary services related to planning, programming and project development

### Accomplishments:

In line with its mandate under E.O. 119, the Internal Planning Service (IPS) has continued to function as the central planning unit of the DOH. In 1995, the following major activities highlighted the accomplishments of the Service:

1. Updating of the 1993-1998 Medium-Term Development Plan and Medium-Term Public Investment Program.

In pursuance to Memorandum Circular No. 113, dated March 31, 1995, of the Office of the President, the 1993-1998 Medium-Term Philippine Development Plan (MTPDP) was updated. The updating was necessary to include a realistic program of activities for the remaining three years (1996-1998) of the plan period considering recent developments such as the World Trade Organization (WTO), World Summit for Social Development (WSSD), and the Social Reform Agenda (SRA). The updated MTPDP called for revised targets and priority activities achievable in 1998 and the updating of the Medium-Term Public Investment Program (MTPIP) as its coordinating mechanism for funding requirements.

2. Updating of the 10-Year Public Investment Plan of the Health Sector

The Plan will serve as the main instrument to achieve improvement in government spending on health in order to adequately provide for health interventions addressed to the most important needs of the people through a combination of increases in levels of public spending, sharing of health program costs between national and local government, reallocations within the current budget for national and local expenditures, and better

management of public investments. This Plan covers the major public investment projects for health with funding from the regular national budget, foreign grants and loans.

3. Writeshop on the 1996 Operational Planning and Budgeting.

As a regular function of the IPS, updated guidelines for the 1996 Operational Planning and Budgeting were disseminated to the different services/bureaus/programs, regions and retained hospitals. To provide venue for the presentation and refinement of the respective operational plans by these offices/programs, ten (10) batches of writeshops were conducted by the IPS.

4. 1997 Operational Planning

In order to have a clear and uniform direction in the preparation of the 1997 Operational Plan which shall be the basis of the DOH budget estimate for the succeeding fiscal year, a set of guidelines, embodied in a Department Memorandum, was prepared and disseminated to the different services/bureaus/programs, regions and retained health facilities of the DOH.

5. National Health Plan Formulation.

The formulation of the National Health Plan (1995-2020) is a joint project of the DOH and USAID designed to provide a coordinating mechanism for all levels of planning within and outside the health sector, as well as provide general directions and broad strategies for an effective and efficient future health care system in the country. As a country plan, it emanates from a multi-sectoral effort involving various disciplines from the government, private and non-government sectors.

6. Preparation of the Mindanao Public Investment Plan for the Health Sector (1995-2005)

The 10-year Mindanao Public Investment Plan for the Health Sector was prepared to address the urgent need to accelerate the economic and social development of Mindanao and uplift the standard of living of its people. The Plan specifically aims to determine the 10-

year regional investment requirements for the health sector in Mindanao; prioritize regional health investment initiative for project development and implementation; and formulate integrated investment programs for Mindanao.

#### 7. Performance and Budget Utilization Review

The conduct of performance and budget utilization has proven to be a very useful venue for identifying and eventually addressing problems in implementation and management of resources.

During the year, the Internal Planning Service facilitated and documented the 1994-end-of-year and 1995 first quarter/first semester performance and budget utilization reviews of the central office programs/services, seven (7) regions and their retained hospitals and fifteen (15) Metro Manila hospitals. Panel of reactors representing experts in the fields of public health, organization and management, primary health care advocates, hospital administrators, other government agencies and non-government organizations were invited.

#### 8. Monitoring

Monitoring visits to ten (10) regions including their hospitals were conducted by the service in collaboration with the Hospital Operations and Management Service (HOMS)

#### 9. 1995 Work and Financial Plan Consolidation

In collaboration with the Office of Management Service, the Consolidation Workshop on the 1995 Work and Financial Planning was undertaken during the early part of the year.

#### 10. Improvement of Planning and Budget Process

The IPS drafted and held consultative meetings on the proposed Administrative Order regarding Establishment of Improved Procedures and Systems for a Synchronized DOH Planning and Budget Process.

#### 11. DOH Annual Report Preparation

The DOH Annual Report highlights the accomplishments of the agency that includes the consolidation of information generated from the implementation of DOH programs and projects through its different offices/services/bureaus, regions and retained health facilities. It also contains the current thrust and future plans of the agency. In 1995, it disseminated 3,000 copies of the 1994 DOH Annual Report to various offices within and outside of the DOH.

#### 12. Consolidation of Weekly Situationer Briefs.

Administrative Order No. 12-A s. 1995, was issued to enable the DOH management to effectively manage the department and respond immediately to issues as necessary. This order requires the submission of weekly situationer briefs by the different DOH offices, including the regions and their retained hospitals.



#### LOCAL GOVERNMENT ASSISTANCE AND MONITORING SERVICE (LGAMS)

##### Mandate:

To facilitate the smooth transfer of power and resources to LGUs during the change over phase.

Among the major achievements of the service during the year are as follows:

1. Established Mechanism for Technical Health Coordination;
2. Established Transition Action Team;
3. Organized, established, and operationalized Quick Response System (QRS);
4. Enforced/mandated fifty percent LGU counterpart for Magna Carta benefits;
5. Drafted and deliberated IRR and IRA reallocation to Local Government Units (LGU);
6. Developed, produced, and disseminated Comprehensive Health Care Agreement (CHCA) primer;
7. Developed/Pre-tested LHBAG Monitoring tool;
8. Monitored Local Health Board (LHB)/LGU performance and CHCA implementation

### **MANAGEMENT ADVISORY SERVICE (MAS)**

#### **Mandate:**

on internal control, management systems improvement, and to supervise the establishment of a management accounting system, control procedures and management information system for improved decision making per Executive Order 119.

#### **Accomplishments:**

Among the major accomplishments of the service during the year are as follows:

1. System Development and Maintenance
  - Computerized sub-systems of Logistics Management System (LMS) are now fully developed and ready for implementation.
2. Financial Management System
  - The cashing model has been tested and most reports of the accounting module are already developed. The budgeting module I is being revised to include modification on the government budgeting procedures.

3. Revised Personnel Information System

-The system was installed and also evaluated in all regional offices.

4. Developed and disseminated DOH Directory
5. Revised Field Health Service Information System
6. Tested Health Facilities Licensing System for the local area network version
7. Published copies of the 1995 Field Health Units Directory. This is a listing of devolved hospitals, rural health units and main health centers and barangay health stations.



### **MENTAL HEALTH PROGRAM (MHP)**

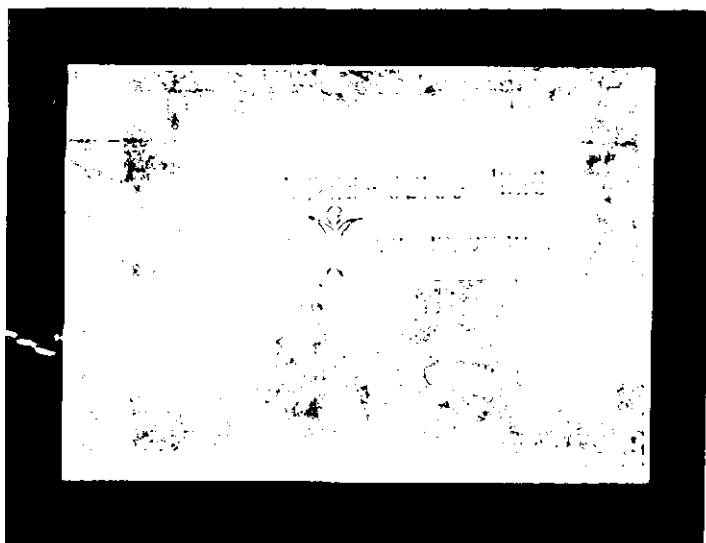
#### **Mandate:**

To serve as a technical advisory and policy making body on Mental Health for the Department of Health.

#### **Accomplishments:**

1. Established eight (8) Mental Health Services/Facilities
2. Celebrated Mental Health/Substance Abuse Prevention Week (Lusog -Isip '95)

3. Developed Space Program and Preliminary Design Standards for a Mental Health Facility in a Regional/General Hospital/Medical Center Setting.
4. Conducted training on Psychosocial Care in Disaster Management in DIRFO III, VIII, and XI
5. Participated in the Emergency Medical Technicians (EMT) Training Course and assisted in the drafting of EMT Training Manual



## **PUBLIC INFORMATION AND HEALTH EDUCATION SERVICE (PIHES)**

### **Mandate:**

To provide leadership in health activities, social mobilization and advocacy initiatives of the different health programs of the DOH.

### **Accomplishments:**

Spearheaded the development and implementation of communication plan for the Five for Life in 95 (TB, TKO, ASAP, NID, FP) Flagship programs and the 15 Philippine Healthy Initiatives Project.

Mobilized all government, non-government, private and business sector, civic and community organizations as well as religious groups in participating in the various DOH campaign.

Managed the DOH-news printed and broadcast in the mass media through the conduct of three time a-week press briefing and conferences; issuance of daily press releases; **coordination of television and radio guesting** for the Secretary and other DOH management staff, and; provision of audio-visual and photography documentation to major field inspection trips and conferences of the Secretary and other management staff.

Provided daily print and radio health news monitoring and monthly news analysis. Part of this media relations task were the issuance of news advisory to the DOH management and responding to adverse publicity and broadcast in media, whenever necessary.

**Established the high technology Audio Visual Unit with the acquisition of latest and state-of-the-art audio-visual equipment and facilities donated by the Japan International Cooperation Agency.**

Produced in-house television and radio advertisements, video documentaries, print and graphic materials for the different DOH campaigns and programs.

Started the implementation of the Multi-Media Center Project which would create training modules and information, education and communication (IEC) materials in CD-ROM.

Served as the clearing house for all DOH-produced IEC materials

Conducted Basic Training course on Health Education for 22 Central and Provincial Health Education and Promotion Officers

Developed and produced 45,000 Family Guide Manual, 20,000 Household Teaching Manual and 2,000 Operational Manual on Teacher, Child, Parent Manual. (Printing is ongoing as of January 1996)

Distributed additional Midwives Integrated Communication Aide for Maternal and Child Health (MICAMS) to 75 provinces.

Provided orientation about the DOH and its services and programs to students, researchers and the general public as well as foreign fellows from Vietnam, China, and Malaysia.

Implemented the TCPM approach in regions with TCPM areas of DECS through TWG orientations in Regions.

4. Distributed flipcharts and manuals on herbal medicine;
5. Organized training on acupuncture for Doctors



## **TRADITIONAL MEDICINE UNIT (TMU)**

### **Mandate:**

To develop, establish and utilize Traditional Medicine in the Philippines

### **Accomplishments:**

In 1995, the Traditional Medicine Unit (TMU) undertook the following activities:

1. Finalized Draft Executive Order on Philippine Traditional Medicine Program;
2. Developed prototype code of Ethics or accreditation system and regulatory mechanism for traditional medicine practitioner;
3. Supported project proposals of NGOs and other GOs Buod-Buhay Foundation - A nationwide study on the Knowledge, Attitude and Practices (KAP) of Multi-Sectoral Groups on Health and Traditional Medicine;

## **HEALTH HUMAN RESOURCE DEVELOPMENT (HHRD) PROGRAM**

The project which started in 1993 prepared together several HHRD policies and program documents which underwent through a series of technical review and multi-sectoral consultations. The first draft of the National HHRD plan was prepared by March 1995 after which it underwent a review by technical experts. The plan was presented in a multi-sectoral consultation in June 1995 after which it was finalized.

The proposed national HHRD plan prepared a Philippine Health System Scenario for the year 2000 which guided the formulation of the HHRD vision, mission, goals, strategies and programs for the next 25 years. The plan also presented a set of recommendations to put the proposed HHRD plan in motion.

Several other documents were prepared together with the National HHRD Plan. Among these are:



1. A proposed model for projecting  
Regional Health Human Resource  
Requirements
2. A proposed HHRD Research  
Agenda
3. A proposed HHRD Legislative  
Agenda

In December 1995, the project made the initial preparations for a Human Resource for Health Information System (HRHIS) to pursue the recommendations set in the National HHRD Plan. The HRH-IS will be the main focus of the project in 1996.

# Office of Management Services (OMS)

## OFFICE OF MANAGEMENT SERVICES PROPER (OMS)

### Description :

Exercised overall supervision and coordination on financial management, administrative, procurement and logistics.

### Accomplishments:

1. Conducted meetings with Service Directors and officers under the Office of Management Services (OMS), 3 dialogues with Regional Directors, consultative meeting on procurement with Program Managers, and facilitated 2 consultative meetings with regional Finance Officers, Budget Officers and Administrative Officers.
2. Attended coordination/consultative meetings with NEDA, DBM, DOJ, NDCC, Office of the President, operational planning and budgeting workshop, technical budget hearings with DBM, congressional/Senate budget hearings, meetings with some congressmen, moral recovery seminar-workshop, and DOH transition meetings.
3. Referred/participated in the evaluation and screening of job applicants at DOH.
4. Initiated the conduct of budget hearing.
5. Attended and participated the conduct of EXECOM and MANCOM meetings.
6. Initiated the conduct of initial activities of Re-engineering the government bureaucracy at DOH.

7. Evaluated Magna Carta of Health Workers - related issues, provided recommendations and appropriate actions.
8. Provided greater assistance and coordination to Finance Service specially prior to any budget hearings.
9. Directly managed the P161.6 million budget for locally-funded projects and monitored implementation of the same.
10. Evaluated, processed, coordinated and monitored Congressional Initiative projects.

## ADMINISTRATIVE SERVICE (AS)

### Accomplishments :

1. Performed 1,947 corrective and preventive repair and maintenance activities including garbage disposal and registration of vehicles.
2. Managed 42,569 DOH administrative issuances, and personnel miscellaneous records.
3. Provided 115,182 outgoing and incoming radio communication services and 23 trunklines for PABX communication system.
4. Conducted 17,827 physical, medical, laboratory, malaria, and radiologic examinations.
5. Provided 24,392 medical consultations and 19,094 immunization services.

## FINANCE SERVICE (FS)

### Accomplishments :

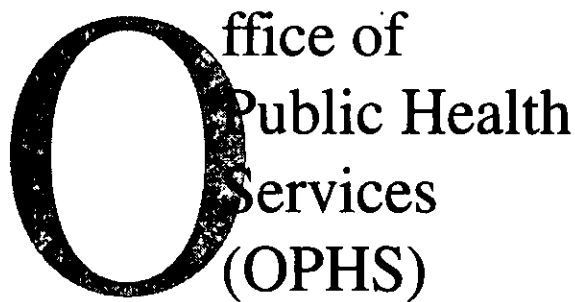
1. Conducted orientation workshops on the preparation of 1996 budget estimates and 1995 DOH Agency Budget Matrix (ABM) with Regional Health Offices and consultative meeting with regional Finance Officers, Budget Officers and Planning Officers.
2. Prepared 1996 DOH agency budget proposals in coordination with IPS and in accordance to DBM guidelines.
3. Assisted preparation of documents during 1995 consultation with DBM and supporting documents for 1996 budget proposals and attended series of Congressional/Senate budget hearings.
4. Spearheaded the execution of 1995 DOH budget under R.A. No. 7845 which included, among others, preparation, review, and recommendation of Special Budgets, requisition of Special Advice Release Orders (SAROs), and Notice of Cash Allocations (NCAs) from DBM, collection of P 121 million, information dissemination of General Advice Release Order (GAROs), SAROs, P 2.2 billion worth of NCAs preparation and release of 75,000 sub-allotments, 180,000 Request of Allocations (ROAs), and 23,414 funding checks.
5. Prepared periodic summary records of released allotments, obligations, and fund balances in relation to monitoring budget utilization.
6. Prepared and processed fund releases of around 15,000 Congressional/Senatorial Initiative and CDF Projects.
7. Conducted reconciliation of sub-allotments together with regional health offices, and special hospitals.
8. Complied periodic reportorial requirements to EXECOM, MANCOM, DBM, Bureau of Treasury, Congress, COA, and coordinative information to GSIS, Land Bank, etc.



## PROCUREMENT AND LOGISTICS SERVICE (PLS)

### Accomplishments :

1. Distributed medical supplies and drugs and provided IEC materials for National Immunization Days, Araw ng Sangkap Pinoy, World AIDS Day, Phil. Healthy Initiatives & other DOH special projects.
2. Delivered needed drugs, medicines, water disinfectants, & water jugs during occurrence of typhoons and tragedies.
3. Procured health care products and supplies amounting to around P 959 million as part of its regular activities. Out of this total amount, around 88% were procurement activities at DOH - Central Office (mostly drugs and medicines) and around 12% were procurement activities done through the Procurement Service (PS) of DBM (mostly office supplies and equipment).
4. Distributed drugs, medicines, equipment, and other commodities based on the submitted allocation plans of different DOH operating units, programs and projects which amounted to around P 275 million.



## **COMMUNICABLE DISEASE CONTROL SERVICE (CDCS)**

### **DENGUE CONTROL PROGRAM (DCP)**

#### **Program Description:**

A program in its pilot stage designed for the prevention of epidemics and control of seasonal outbreaks of dengue fever in areas exposed to both the disease agent and vector.

#### **Accomplishments :**

Developed program policies, guidelines and manual on training; provided technical and logistics assistance to local units in pilot areas and in those reporting dengue outbreak.

The Dengue Control Program package pilot tested in 7 provinces applied the Rapid Response Mosquito project in several areas in 6 regions where dengue fever outbreak was reported, suspected or confirmed.

### **FILARIA CONTROL PROGRAM (FCP)**

#### **Program Description :**

DOH-assisted program for the control of filaria in limited areas of endemicity in four (4) regions of the country.

#### **Accomplishments :**

1. Provided supplies for case finding, drugs for the treatment of 1,288 cases, and public information materials on the prevention and control of filariasis to Regions 4, 5, 8 and 11, which host isolated patches of communities endemic for filariasis.

2. Undertaken a research, "Insecticidal Zooprophylaxis," to determine an adjunct strategy to prevent malaria and filariasis transmission.

### **LEPROSY CONTROL PROGRAM (LCP)**

#### **Program Description:**

Nationwide surveillance, case-finding, treatment and social rehabilitation program participated in by field health units and sanatoria.

#### **Accomplishments :**

1. Launched the extensive information and education campaign to increase society's awareness of the need for concerted action to advocate for the cure of all leprosy patients; conducted active searching and screening of skin diseases in endemic areas.
2. Made bulk shipment of drugs to regional offices and sanatoria all over the country.
3. Provided bicycles to 200 cured leprosy patients who volunteered to motivate, monitor treatment compliance and do surveillance work for currently ill leprosy patients, thus, improving the treatment completion and cure rate of patients identified by the local health workers.

### **NATIONAL RABIES CONTROL PROGRAM**

#### **Program Description:**

A multi-agency program, it intends to make the Philippines a rabies-free country through its Responsible Pet Ownership Campaign. This activity popularizes the benefits of pet vaccination, pet leashing or confinement, and provision of clean pet food in the campaign against rabies and animal bites among the general population particularly the school children.

#### **Accomplishments:**

1. Assisted LGUs in the management of dog bite patients through the provision of 2,060 doses of human anti-rabies vaccine for free post-exposure prophylaxis.

2. Immunized 28,044 dogs against rabies during the Mindanao Anti-Rabies Day (MAD) Campaign in Agusan del Sur and Camiguin in collaboration with the Department of Agriculture, Bureau of Animal Industry (DA-BAD).
3. Trained/Oriented 180 field health staff on the local implementation of the Program and on Management of Animal Bite Patients.
4. Developed awareness among the population on the effects of animal bites and rabies and its prevention thru an Intensified Information Campaign on Responsible Pet Ownership.

## **NON-COMMUNICABLE DISEASE CONTROL SERVICE (NCDCS)**

### **NATIONAL CARDIOVASCULAR DISEASE PREVENTION AND CONTROL PROGRAM (NCDPCP)**

#### **Program Description :**

The program seeks to prevent the emergence of and control the rising morbidity and mortality from cardiovascular diseases through a predominantly health promotion strategy. The target population includes 15 years and over, particularly the 20-50 age groups whose lifestyle and demanding careers make them prone to hypertension and ischaemic heart disease.

#### **Accomplishments :**

1. Trained Regional and Provincial Corps of Trainors as well as field health implementors.
2. Organized Provincial CVD Task Forces.
3. Trained 66 physicians and nurses who are based at Regional Hospital and priority provincial hospital on upgrading of CVD clinical skills at Philippine Heart Center.
4. Upgraded CVD Clinical skills at the Philippine Heart Center for the physicians (internist and pediatrician) and nurses based at Regional Hospitals and priority Provincial Hospitals (2 batches).
5. Integrated the CVD Hospital Based Component to Hospitals as Centers of Wellness Program (pilot areas: Regions I, VI, & XI)

6. Trained industry-based physicians and nurses re : establishment of Heart Friendly Industry.
7. Installed CVD program in some industries/ workplaces.
8. Conducted an orientation workshop with DECS area level supervisors on Guidelines on screening and management of RF/RHD.
9. Approved the DECS proposal on CVD school based program



### **SMOKING CESSATION PROGRAM (SCP)**

#### **Program Description :**

A multi-sectoral approach towards the reduction of the prevalence of smoking and smoking related illnesses through massive information campaign, policy development and legislation.

#### **Accomplishments :**

1. Conducted activities related to World No Tobacco Day & National No Smoking Month
2. Conducted "Yosi Kadiri" Campaign in the schools, community & industry.
3. Produced promotional materials for the prevention and control of smoking and smoking related illnesses.
4. Conducted annual holding of the Tobacco of Health Conference.
5. Formulated policy on Smoke-free Sports.
6. Supported Comprehensive Bill on Tobacco Advertising.
7. Conducted research on Tobacco Economics.
8. Published/circulated National Smoking Prevalence Survey results.

9. Trained Smoking Cessation Counselors for Smoking Cessation Clinics on Specialty Hospitals in Metro Manila and Regional Offices/Hospitals.
10. Purchased/distributed Nicotine Patches as last alternative means in smoking cessation.
11. Conducted Annual Program Evaluation and Planning.

4. Launched information campaign dubbed as "Healthy Workplaces" and "Healthy Workforce" initiatives. 1,473 members of the transport sector availed of free medical/health services provided by the Central Office/DIRFO's/Hospitals nationwide.



## **OCCUPATIONAL HEALTH PROGRAM (CHP)**

### **Program Description :**

Occupational health services will be integrated with the basic health services, utilizing the time-honored Primary Health Care Approach in partnership with the community to promote workers health safety and prevent work-related diseases and disabilities

### **Accomplishments :**

1. Prepared guidelines for the establishment of Regional Occupational Toxicology and Non-Communicable Disease Information Service in Regions 5,7 and 11.
2. 665 DIRFO/hospital based personnel trained on Occupational Health and Toxicology in the Management of Pesticide Poisoning and Geothermal Operations
3. Conducted toxicovigilance and surveillance activities among workers in high risk industries where 15 persons were detoxified for mercury poisoning in collaboration with UP-National Poisons Control and Information Service.

## **COMMUNITY - BASED REHABILITATION PROGRAM (CBRP)**

### **Program Description :**

Community-Based Rehabilitation Program (CBRP) is a creative application of the Primary Health Care (PHC) approach in rehabilitation services. It involves measures taken at the community level to use and build on the resources of the community, including the impaired, disabled and handicapped persons themselves, their families, and their community as a whole.

Among its major activities in 1995 were:

1. Conducted skills training for (a) Local Supervisors in the First Level Training for Physical, Occupational, Speech and Biopsychosocial Therapies; (b) Local Supervisors in Higher Level Training for Physical, Occupational, Speech and Biopsychosocial Therapies; (c) Physical Therapy Assistants; and (d) Brace/Prosthetic Technicians;
2. Advocated for the adoption of the CBR Program by the local government units; and

3. Conducted support program operations through monitoring and evaluation, Documentation Updates, National Disability Prevention and Rehabilitation Week Celebration, and Annual Planning and Evaluation Workshop.

6. Assisted close to 5,000 cancer patients for availment of free anti-cancer treatment, pain-relief or both, through the Program in coordination with partner government hospitals.



### **PHILIPPINE CANCER CONTROL PROGRAM (PCCP)**

#### **Program Description:**

A multi-sector, multi-specialty national program for the prevention of cancer and for the provision of assistance for the early diagnosis, cure, social support and rehabilitation of cancer patients

#### **Accomplishments :**

1. Integrated cancer prevention and control messages in to the secondary curriculum;
2. Trained of 270 health supervisors and department heads of the Department of Education.
3. Celebrated the Cancer Consciousness in coordination with the members of the Philippine Cancer Society; cancer-smart messages were circulated through radio and TV and other information materials.
4. Held the First National Convention on Hospice Care for Cancer Patients, where 390 cancer program implementors and patients convened to have an update on current palliative care for cancer victims.
5. Screened 1.1 million women for breast cancer and 499,311 for cervical or uterine cancer while 254,195 men and women had chest x-ray particularly for screening for lung cancer.

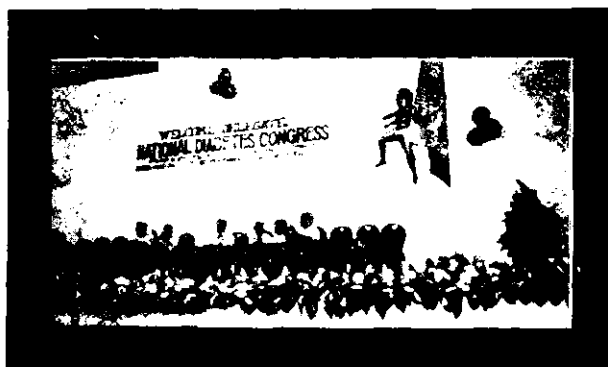
### **NATIONAL DIABETES PREVENTION AND CONTROL PROGRAM (NDPCP)**

#### **Program Description :**

Principally, a preventive program in its developmental stage which is implemented along side NGOs with long established curative, social support and rehabilitation programs for Filipino diabetics

#### **Accomplishments :**

1. Worked for the approval of the framework for the prevention and control of diabetes in the country.
2. Aligned the manual of operations for the hospital-based component of the Diabetes Control Program according to the master plan;
3. Finalized protocol for a national diabetes survey which shall be implemented in 1996.



## **MATERNAL AND CHILD HEALTH SERVICE (MCHS)**

### **Mandate :**

The MCHS is the public health office in the central DOH which oversees and manages six (6) national programs namely: Expanded Program on Immunization, Control of Diarrheal Diseases, Promotion of Breastfeeding and Proper Weaning, Control of Acute Respiratory Infection, Maternal Care Program and Underfives Care.

Altogether, these programs aim to lower overall deaths and illnesses among mothers especially the pregnant women and children aged younger than 5 years old. The main strategy is to provide basic prenatal, postnatal and safe delivery care to mothers and provide preventive and early intervention services against the most common and most serious diseases among children such as measles, pneumonia, diarrhea, undernutrition, neonatal tetanus, poliomyelitis, diphtheria and pertussis, among others.

More than 40% of the Filipino population are women of childbearing age and children under 5 years old. Through more than 15,000 rural health midwives and 2,000 public health nurses and doctors, MCHS hopes to reach more than 2M Filipino mothers and 9M children every year.

### **EXPANDED PROGRAM ON IMMUNIZATION (EPI)**

#### **Program Description:**

A nationwide, multisectoral service focused on the provision of immunization of vulnerable groups: infants, young children and mothers to protect them from seven immunizable diseases and to eventually eliminate these diseases.

#### **Accomplishments :**

- \* Continued to provide the vaccine, syringe and needle requirements nationwide for use in the various immunization activities namely: routine immunization, national immunization days, mop-up operations and outbreak response immunization.

- \* Provided technical assistance through various training conferences, workshops, and formulation and dissemination of program guidelines and policies.
- \* Conducted two rounds of National immunization Days ("Oplan Alis Disease") which resulted in a 90% nationwide coverage for Oral Polio Vaccine (OPV).
- \* Completed cold chain inventory in 73 provinces and 65 cities. Data still undergoing final analysis.



### **CONTROL OF DIARRHEAL DISEASES (CDD) AND PROMOTION OF BREASTFEEDING (BF) AND PROPER WEANING**

#### **Program Description:**

Primary targeting under-five children, the program is a nationwide drive to prevent diarrhea and control its adverse effects in this age group through the provision of technical capabilities and promotion of breastfeeding, correct feeding and weaning practices, use of oral rehydration fluids and measles immunization.

#### **Accomplishments:**

- \* Provided 7.62 M sachets of Oresol and 600,000 hydrite tablets nationwide especially in disaster areas and evacuation centers.
- \* Conducted 6 S.A.V.E.R.S. (Scout's Auxiliary Volunteers Emergency and Relief Service) workshops for the Boy Scouts and Girl Scouts



of the Philippines as part of their commitment in advocating for Oral Rehydration Therapy (ORT).

- \* Conducted combined Program Managers Course for CDD and CARI as part of the Integrated Child Care and Management (ICCM) of common childhood diseases.

- \* Distributed IEC materials nationwide which included radio ads on ORT.

- \* Initiated the Philippine Pharmacy Staff Training Project to improve the treatment of diarrhea at home as a result of the pharmacist's advice to mothers. An ORS Consumer Use Survey involving 500 households and 103 Manila based drugstores; and a focused group discussion involving pharmacists and salesclerks assessed their knowledge of diarrhea and its management.

- \* Conducted a workshop on Milk Code Monitoring with participants from other GO and NGOs to strengthen the implementation of the Milk Code.

management of various ARI cases.

- \* Conducted combined CDD and CARI Clinical Management and Communication Skills Course in line with the Integrated Child Care and Management (ICCM) of common childhood diseases.

## **MATERNAL CARE PROGRAM (MC) AND UNDER FIVES CARE (UFC)**

### **Program Description:**

Preventive, promotive and curative health services for women of the reproductive age, designed to reduce maternal mortality.

Nationwide health service designed to focus on the provision of preventive, promotive and curative care to children under five years of age.

### **Accomplishments :**

- \* Provided Homebased Mothers Records (HBMR) nationwide.

- \* Developing various training manuals and teaching tools including the Hilot Training Manual which is currently undergoing pilot testing revisions and finalization.

- \* Conducted an evaluation of the Hilot Training conducted in Region X, findings of which were used to revise the Hilot Manual.

- \* Held an inter-agency meeting on the Female Functional Literacy (FFL), Project aimed at empowering the women especially in health where a technical working group for FFL was created.

- \* Conducted Health Facility Capability Surveys in the 15 Aus/AID assisted provinces which involved training on encoding and analysis of data.

MCHS was also responsible for the development of Early Child Development (ECD) and Adolescent Health Care.



## **CONTROL OF ACUTE RESPIRATORY INFECTIONS (CARI)**

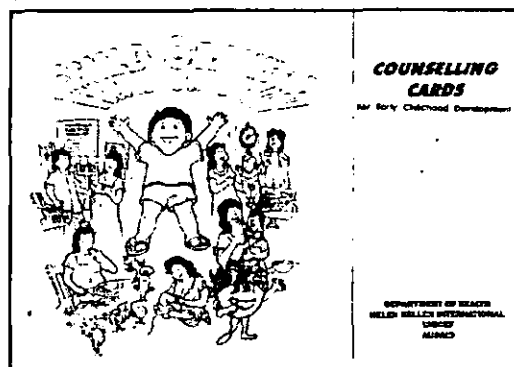
### **Program Description:**

A health care program integrated into the general services of field-based and hospital-based implementing units focused on the reduction of deaths among under-five children caused by pneumonias.

### **Accomplishments :**

- \* Provided essential drugs for the management of ARI cases nationwide namely: cotrimoxazole, benzyl penicillin, chloramphenicol, gentamycin and epinephrine.

- \* Provided otoscope and pediatric resuscitators to various DOH hospitals to support the



## TUBERCULOSIS CONTROL PROGRAM (TCP)

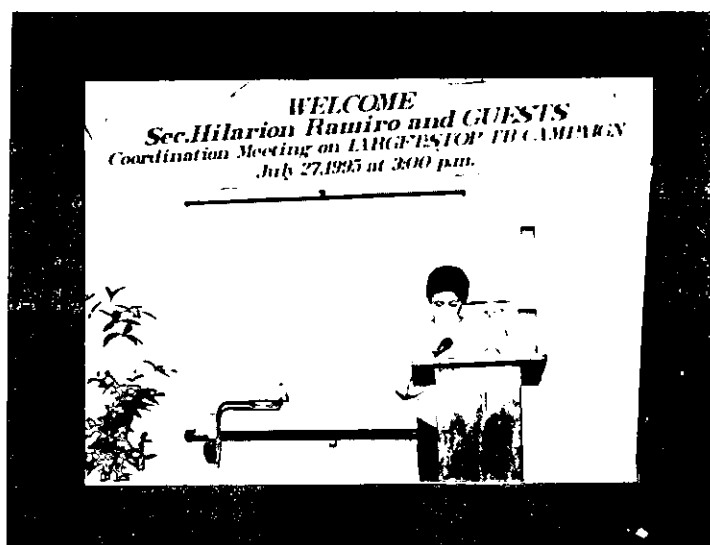
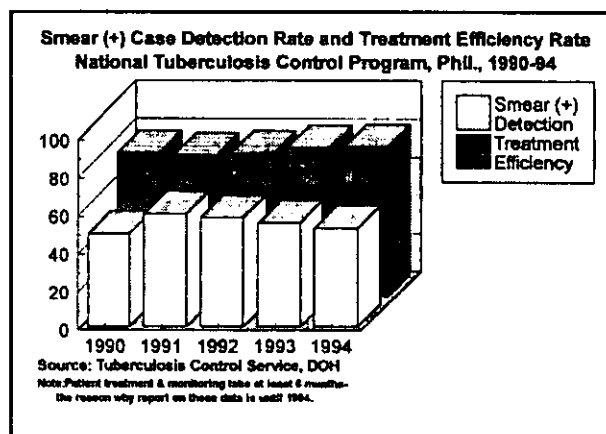
### Program Description :

Nationwide, community-based case diagnosis and case-holding program implemented by local government, field health services and by DOH-retained hospitals in part, with the technical and logistical assistance of the Department of Health.

### Accomplishments :

1. Drafted the NTP policies in consultations with other agencies and field workers.
2. Launched **Target: STOP TB** nationwide by the Secretary of Health in Paranaque for Metro Manila, Antique for the Visayas and Surigao del Sur for Mindanao and in all regions.
3. Conducted training courses for Sputum microscopy (5) and NTP New Guidelines (8) .
4. Distributed anti-TB drugs for 175,000 active cases of TB.
5. Provided 64 brand new microscopes to selected microscopy centers especially SRA provinces to improve the quality of TB diagnosis.
6. Repaired 84 microscopes in different regions of the country.
7. Distributed microscopy supplies and information materials to all implementing units.
8. Conducted two (2) researches.

As a result, about 236,518 cases were initiated into anti-TB treatment in 1995 and they are being monitored closely by the LGUs health workers. Through the participation of DOH-retained hospitals in TB control, some 12,000 special cases of TB were admitted and treated in hospitals where anti-TB drugs were also made available.



## MALARIA CONTROL PROGRAM (MCP)

### Program Description :

Semi-vertical, nationwide malaria case finding and treatment and mosquito vector control program.

### Accomplishments :

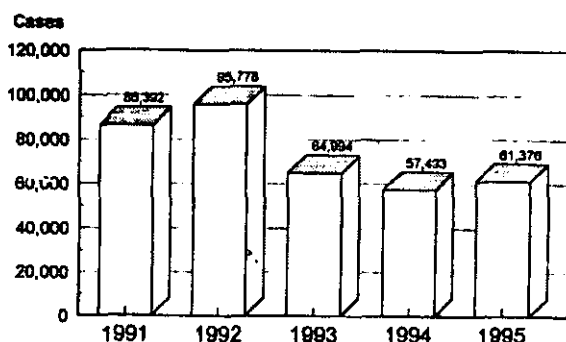
Results of the successfully concluded bi-annual Malaria Control Program review in 1995 became the basis for shifting program priority to the training of field personnel. Program budget was re-aligned to meet the training needs and demands of 291 RHU personnel and local government officials in endemic provinces. Program accomplishments included the following:

1. Initiated evaluation of Aklan, Antique, Biliran, Camiguin, Capiz and Guimaras provinces with low endemicity for malaria, a component of the drive to render these

provinces malaria-free by end of 1996.

2. Worked out operational researches for funding by the "World Health Organization and drawn up the terms for technical cooperation between the Malaria Control Service and the Research Institute for Tropical Medicine (RITM) and the French government.
3. Treated 366,844 cases of malaria.
4. Distributed 224,232 insecticide-impregnated mosquito nets to risk households.
5. Sprayed 350,990 houses and cleared 3,153 kms. and seeded 3,206 streams with larvivorous fish.

**Malaria Control Program Case Finding**  
Philippines, 1991-95



### **SCHISTOSOMIASIS CONTROL PROGRAM (SCP)**

#### **Program description:**

Area-based schistosomiasis case-finding and treatment program concurrent with vector control and environmental engineering measures

#### **Accomplishments :**

1. Screened close to 267,347 suspects and found 25,428 positive and treated for the snail-borne disease.
2. Identified 25,884 cases with common intestinal parasites and given treatment.
3. Inspected 376.3 hectares of snail colonies in endemic areas and treated 67 hectares with molluscicides.

4. Conducted extensive schistosomiasis case finding, aggressive treatment and intensive snail colony liquidation in the island of Siargao achieve schistosomiasis elimination of the island by Year 2000.
5. Undertook 14 researches on program operations and schistosomiasis control technology, 6 of which were completed in 1995 and await analysis for program application



### **COMPREHENSIVE NUTRITION PROGRAM (CNP)**

#### **Program Description :**

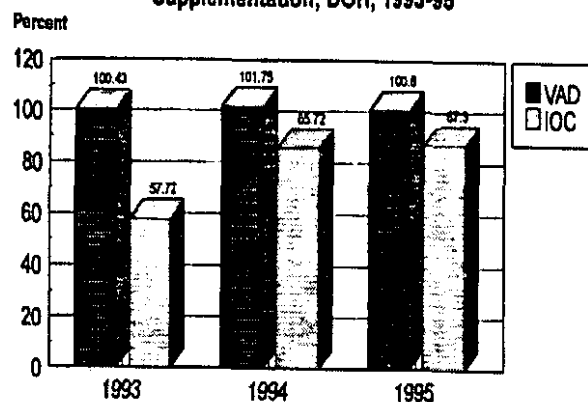
Nationwide and multisectoral nutrition status monitoring and intervention program, with the DOH providing management and development support. Standard nutrition interventions include food and micronutrient supplementation, food fortification, nutrition promotion and advocacy.

#### **Accomplishments :**

1. Mobilized and coordinated with partner agencies nationwide for the *Araw Ng Sangkap Pinoy* (October 17, 1995);
2. Distributed Vitamin A capsules to about 8.5 million preschoolers and iodized oil capsules to at least 11 million targeted women and children.

3. Advocated the passage into law of **Republic Act No. 8172**, the "Act Promoting Salt Iodization Nationwide and for Related Purposes." The law requires all manufacturers and producers of food-grade salt to iodize the salt they produce, manufacture, import, trade or distribute and, mandates all government agencies concerned in health, food regulation, distribution and trade to make sure that the law is enforced.)
4. Installed salt iodization machines in 32 strategic locations nationwide;
5. Pilot-tested the community-based salt monitoring using Lot Quality Assurance Sampling in 4 municipalities in Mt. Province. This system assesses quality and usage of iodized salt
6. Trained 210 personnel from 14 salt farms and representatives of different government agencies on salt iodization technology.
7. Launched the *Sangkap Pinoy Seal* project on food products that contain nutritive value in the right quantities.
8. Trained 4,585 barangay and municipal health workers on community-based planning and management of nutrition programs in 36 selected provinces; and
9. Provided bulgur wheat and green peas and BP -5 Compact Food where necessary. (BP-5 Compact Food is the brand of highly nutritious food mix being distributed in disaster areas to prevent starvation and malnutrition in case of food shortage.)

**Percent Target Accomplishment on Vitamin A and Iodized Oil Supplementation, DOH, 1993-95**



## **FAMILY PLANNING PROGRAM**

### **Program Description :**

Nationwide family planning information and services provided by government and non-government organizations for the protection of the reproductive health of women.

### **Accomplishments :**

1. Developed the critical Five-Year Communication Strategy for the Philippines Family Planning Program.
2. Provided close to 2 million continuing users with services and supplies;
3. Initiated 296,720 to the programs.
4. Distributed Family Planning supplies to 14,839 outlets nationwide.
5. Upgraded the supplies and equipment of 300 selected family planning outlets; and facilitated the setting up of the Center for Mother and Child in the province of Tarlac.
6. Completed the validation of the 1993 contraceptive prevalence survey;

7. Updated the family planning/reproductive health data bank;
8. Reviewed and refined of pre-marriage counselling manual;
9. Developed new training modules focusing on gender sensitivity and integrating HIV-AIDS; and
10. Trained 4,500 personnel on the different aspects of family planning program.

In areas where access to government or private dentists is difficult, barangay health workers were trained and equipped to become barangay dental auxiliaries by the Dental Health Service staff in coordination with regional and provincial dentists. This strategy of training indigenous human resource for dental health care in far-flung areas began in 1993. As of now, there are 500 barangay dental auxiliaries throughout the country who can do oral examination, coronal scaling and can manage common oral infections for people who



## COMPREHENSIVE DENTAL HEALTH PROGRAM (CDHP)

### Program Description :

Nationwide preventive, promotive, curative and restorative oral health services implemented by government hospitals and health clinics.

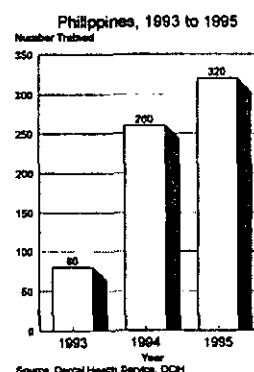
### Accomplishments :

For the first time in Philippine history, a memorandum of agreement among all major influence groups in dental health care was signed on February 9, 1995 to effect a multi-sectoral approach in the prevention and control of dental diseases. The Philippine Dental Association and Colgate-Palmolive Philippines joined government agencies led by the Department of Health in forging this covenant to propagate, promote and utilize *tsaang gubat* as a cheap and natural source of supplemental sodium fluoride. Other signatories to the memorandum were the Department of Interior and Local Governments and the Philippine Information Agency.

otherwise would not have known any dental health care service. On the other hand, 73 dentists based in 45 DOH-retained hospitals, and catering mostly to urban centers, were oriented on the preventive and promotive aspects of dental health care.

Among the vital management initiatives in 1995 are : (1) the review and updating of new dental care standards for hospitals, private schools and occupational health services which shall also hopefully upgrade the standard of care given to the public by these facilities and, (2) the completion of the "Study on the Cost of Dental Treatment in the Dental Health Service Clinic" which makes easily available the estimation of cost of any given dental service.

### Barangay Dental Auxiliaries



## ENVIRONMENTAL HEALTH SERVICE (EHS)

### ENVIRONMENTAL SANITATION PROGRAM (ESP)

#### Program Description :

Nationwide, multi-agency, multisectoral program concerned with the basic components of water sanitation and sanitary disposal of common household wastes.

#### Accomplishments :

To increase the level of awareness of the general public and to stimulate community action to ensure the availability of safe sources of drinking water, sanitary toilet facilities and oral rehydration fluids to all households, the information-action campaign, **TKO or Tubig, Kubeta, Oresol** was launched in 1995. Immediate results of this campaign included construction of safe water sources in 96 communities, installation of 139,525 sanitary toilet facilities, and the distribution and promotion of oral rehydration salts. The tri-media campaign that accompanied this project publicized simple messages like the value of hand washing and the proper use of toilets. As a result, cholera was TKO'd this year. No cholera outbreak of regional or national significance occurred in 1995.

During the Papal visit in early January, DOH sanitation officials and engineers personally coordinated, supervised and provided for the installation of sanitation facilities in strategic camping sites and venues of the millions who gathered to see the Pope. No disease outbreak related to poor sanitation occurred even from among those who camped out for several days in Metro Manila parks.

Aside from the monitoring and technical supervision of sanitation services, the Environmental Sanitation Program laboriously consulted with various agencies and private enterprises to arrive at the final draft of the implementing rules and regulations (IRR) covering Chapters 2,3 and 17 of the Code of Sanitation of the Philippines. The IRR made possible the upgrading of standards on water supply, food sanitation, excreta disposal and drainage and spelled out the responsibilities of

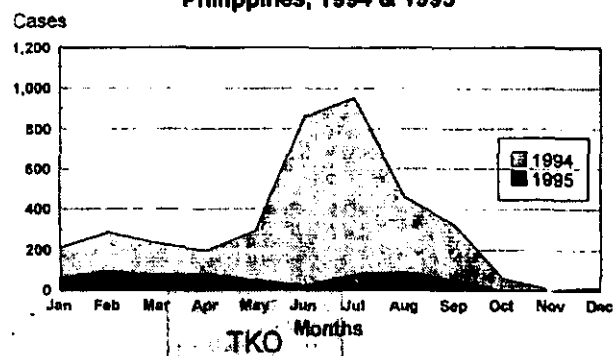
government agencies, private sector, including private citizens, to operationalize the provisions under the said IRRs and maintaining a healthful environment.

Four (4) new IRRs were also been initially drafted pertaining to Massage Clinics and Sauna Bath Establishments; Hotel, Motel and Apartments; Vermin Control and Disposal of Dead Persons. It is expected that the 22 sections of the Code will be provided with IRR by end of 1997.

October 2 and December 18, when Healthy Market and Healthy Moviehouse were launched, respectively, in connection to the Healthy Initiative Program of the Department. Awards were given to the chosen Healthy Market in Manila and the Cleanest and Healthy Moviehouse in Quezon City.

A National Directional Plan (1996-2004) for Environmental Health Impact Assessment was drafted in cooperation with WHO and UP-CPH. The plan is aimed to come-up with activities to guide the Department to face emerging health problems or conditions arising from new and expanding development projects. The Office is also involved in the review of Environmental Impact Statement Documents.

**Cholera Cases Reported by Month  
Philippines, 1994 & 1995**



Source: Environmental Health Service

## **HOSPITAL WASTE MANAGEMENT PROGRAM (HWMP)**

### **Program Description :**

Hospital-based sanitation program

### **Accomplishments :**

The completed study on Hospital Waste Management and Sanitation Practices in DOH Hospitals and Sanitaria, will serve as basis for the development of the Program as it improves waste management in DOH-retained hospitals and as it expands implementation to other government and private-owned hospital facilities.

There is presently a developed manual on Proper Hospital Waste Management and series of training activities has been conducted to central and field hospital personnel.

To initiate the program, logistic support such as color coded bags and bins, sharp collectors, personal protective equipment and IEC materials were distributed to all retained and selected devolved hospitals. Technical and consultative services were likewise provided.



The IACEH was created through E.O. 489 to serve as a venue for inter-agency collaboration and cooperation to better protect the health of the people from growing health problems related to environmental degradation. There are 11 member agencies, chaired by DOH. The EHS serves as the Secretariat to the committee.

There are five (5) working groups corresponding to the major concerns such as: solid waste sector, water sector, air sector, toxic and hazardous substances sector and occupational health sector.

To ensure safety of the consuming public, the following monitoring activities have been continuously undertaken:

- red tide toxin in shellfish and cells in sea water;
- pesticide residue in vegetables;
- antibiotic residue in meat;
- sanitary conditions of landfills in Carmona and San Mateo.

## **FIRST WATER SUPPLY, SEWERAGE AND SANITATION SECTOR PROJECT (FW4SP)**

### **Project Description :**

World Bank funded, multi-agency rural development project begun in 1991 which aims to provide safe and adequate water, sewerage systems and sanitation facilities to rural communities. In the DOH, this is handled by the Environmental Health Service.

### **Accomplishments :**

Aside from its gross appearance, water safety is determined through a series of laboratory tests performed by highly skilled personnel. To ensure the reliability of laboratory tests on water samples and thus, improve the quality of water safety monitoring done by our health offices, the First Water Supply, Sewerage and Sanitation Sector Project provided the logistics and technical inputs to upgrade all 75 water laboratories in provincial health offices and all the 14 water laboratories run by DOH regional offices. The facilities and equipment improvement was coupled with skills upgrading when at least 90 laboratory personnel were made to undergo re-training on the necessary basic laboratory methods and training on new technology in water examination.

A total of 4,220 Rural Sanitary Inspectors completed training under the National and Regional Sanitation Training Programs - Phase I & II. These personnel were trained in support of DOH on-going drinking water quality management programs and rural health and hygiene education program.

To augment our local resources for sanitation facilities, 174,000 families were motivated, taught the technology, and given plastic toilet bowls for the construction of each their household latrine. The family, assisted by the community when necessary, provided the materials for the installation of toilet bowls. For improve sanitation in public places and among vulnerable groups, 1,000 school toilets and 100 public toilets in different underserved provinces which could provide the necessary space and water supply were provided with the materials and assisted with the construction of school toilets.

## **WOMEN'S HEALTH AND SAFE MOTHERHOOD PROJECT (WHSMP)**

### **Program Description :**

The Women's Health and Safe Motherhood Project is a project that aims to improve the health status of women particularly to reduce morbidities in women and maternal mortality. It is contained in the ten years Investment Plan for the Health Sector-Investing in Equity in health. It has four specific objectives addressing its four components namely:

- \* Service delivery-to improve the quality and range of women's health services.
- \* Institutional Strengthening-to improve the capabilities of the LGU to provide women health services and of the DOH to provide policy, technical, financial and logistics support.
- \* Community Partnership-to enhance the effectiveness and sustainability of women's health interventions through partnerships among NGO, local communities, LGU and DOH.

- \* Research-to expand the knowledge base upon which policy and technical guidance can be drawn for women's health programs.

Pre-implementation activities which started in early 1995 showed significant highlights. Among these are the following:

1. Signing of the financial agreements with four of the five co-financiers namely: ADB, AusAid, IBRD and KFW.
2. Development of General Implementation Arrangements.
3. Development of Project Implementation Agreements.
4. Request of Special Budget.
5. Organizational build-up to support Service Delivery, Institutional Strengthening and Community Partnership.
6. Initial activities regarding procurement of technical assistance.





## **HOSPITALS AS CENTERS OF WELLNESS PROGRAM (HCWP)**

### **Program Description:**

The Hospital as Centers of Wellness (HCWP) is the first comprehensive national program in the world in which health promotion,



disease prevention and primary health care have been successfully integrated as major activities of DOH hospitals.

### **Accomplishments:**

The HCWP celebrated its 1st Anniversary with the theme "OSPITAL PINOY: Tugon sa Pilipinas 2000". The celebration was highlighted by the National Awards for Innovations in Hospitals. Of the twenty-one programs which were cited, the following garnered the highest distinction as Lifetime Wellness Awardees for having pioneered innovations which served as models for the rest of the country: **Baguio General and Medical Center's Under Five Clinic**, **Jose Fabella Hospital's Infant Feeding Program**, and **Rizal Medical Center's Adopt a Barangay Program**. Achievement Awards were also given to the following: **Home Oxygen Program** (Lung Center of the Philippines), **Tatak JR.** (Jose Reyes Memorial Medical Center), **Diabetes Organization of E. Rodriguez** (AMANG Rodriguez Medical

Center), **Model Psychiatry Department** (Jose Reyes Memorial Medical Center), **Innovative Program of the Dental Division** (Fabella Hospital), **S.A.K.S.I.** (Diabetes Education - San Lazaro Hospital), **Buhay Pamilya** (Fabella Hospital), **Health in Every Home** (Ilocos Regional Hospital). Wellness citation were given to the following newly established programs: the **Adopt A Barangay** of Ilocos Regional Hospital, the **Voluntary Blood Donation Program**, and the **Pediatric Dentistry Division** of the Philippine Children's Medical Center.

In collaboration with the Non-Communicable Disease Control Service (NCDCS) and other corresponding offices/units of the Department of Health, the HCWP

lent technical and funding support to various promotive/ preventive programs being implemented in DOH-retained hospitals. Among these are the **Hospital-Based Diabetes Control Program**, the hospital component of the **National Cardiovascular Disease Prevention and Control Program**, **Asthma Prevention and Control Program**, **Environmental Health Program**, **Hospital Preventive Maintenance** and **Building Maintenance Program** and **Hospital Based-Dental Health Program**.

The HCWP actively assisted the NCDCS and the Institute for Studies in Diabetes in organizing the **Second Annual Diabetes Congress** where NGOs, LGUs, support groups, diabetics and their families, and the private sector renewed their commitment to the prevention and control of Diabetes in the country. In a similar development, the HCWP assisted the National Asthma Movement in the holding of an **Asthma Fair**.

The program thrust for the second year of implementation centered on the conduct of two workshops for **Chief Nurses**, **Assistant Chief Nurses**, and the **Health Education and Promotion Officers (HEPOs)** of the retained hospitals. The first Workshop was held on July 12 in Baguio City where an **Action Plan** for sustaining the HCWP in their respective hospitals was drawn up. On December 17-18, the same participants convened to assess the progress of HCWP

implementation in hospitals. A network of all Chief Nurses and HEPOs referred to as the NAG (for Nursing Action Group) was organized for collaborative purposes.

The Chiefs of Hospitals, for their part, met for a one-day conference in March and December 1995. The outcome of these conferences was the formal launching of the HOSPITAL NATIONAL NETWORK which expanded its coverage to include not only programs and activities of the HCWP, but all other activities and concerns of retained hospitals nationwide.

The HCWP likewise laid down the foundation for the replication of the program among devolved and private hospitals. In collaboration with the Department Legislative Liaison Office a draft for the HOSPITALS AS CENTERS OF WELLNESS ACT was prepared for presentation to the DOH leadership. The Act mandates the inclusion of all Philippine hospital in the HCWP implementation and outlines the principles, approaches, and features of a Wellness Center.

## **PREVENTIVE NEPHROLOGY PROJECT (PNP)**

### **Program Description:**

The Preventive Nephrology Project is a nationwide project with two phases. Phase I is the mass urine screening of all public school children for urine abnormality through the dipstick method. Phase II is the evaluation and management of those children found to have abnormal urine findings in Phase I. Its ultimate goal is to determine the true incidence of a symptomatic renal disease children and to effect treatment so that end stage renal disease may be avoided.

### **Accomplishments:**

In 1995, eight million plus school children were screened for urine abnormality; 35,656 positive cases were given laboratory work-ups and medical treatment; monitoring and consultative meetings were held in 14 regions; and one training workshop for field implementors was held.



## **DOH- HOSPITAL POISON CONTROL PROGRAM (DOH-HPCP)**

### **Program Description:**

The DOH-Hospital Poison Control Program aims to reduce morbidity and mortality from poisoning throughout the country. It envisions a national network system which includes the DOH, the University of the Philippines, DOH-retained hospitals and other government and non-government organizations which would make available to the people experts in the proper diagnosis, management and prevention of poisoning.

### **Accomplishments :**

In 1995, it set up two (2) poison control coordinating centers, one at the East Avenue Medical Center and one at the Davao Medical Center. It developed and disseminated protocols on paralytic shellfish poisoning, mushroom poisoning, and watusi poisoning. It developed the material for on-site management of mass chemical poisoning that was included in the STOP DEATH Operations Manual. It sent 6 DOH physicians for 6 months fellowship training at the UP-National Poison Control Information Service. It participated in the emergency drill and simulation exercise involving poison gas attack at the Manila light rail transit station on October 28, 1995 in cooperation with STOP DEATH and the Armed Forces of the

## **BIOLOGICALS PRODUCTION SERVICE (BPS)**

### **Program Description:**

The Biologicals Production Service produces vaccines and other biologicals for DOH public health programs. In 1995, BPS had to reduce its activities because of the demolition of some of its building in connection with the development of the Alabang area as a joint venture project of the government and in preparation for the transfer of BPS to its new site at the University of the Philippines-Los Baños.

### **Accomplishments :**

Despite the on-going demolition, the BPS produced the following doses of vaccines: BCG - 1,392,000, purified protein derivative (2 tuberculin units) - 61,250; purified protein derivative (5 tuberculin units) - 14,500 ; El Tor - 156,000; typhoid- 11,000; cobra antivenin - 1,596; and anti-rabies - 514,656.

The BPS also distributed the following vaccines to various DOH regional offices in support of the Expanded Program on Immunization : BCG - 10,061,920; DPT - 8,525,010; oral polio vaccine - 28,981,380; tetanus - 13,634,310; and measles - 6,311,220.

### **Accomplishments :**

In 1995, the BRL did 91,174 laboratory examinations in support of public health programs/projects; evaluated/inspected 1,940 and licensed 1,489 clinical laboratories and blood banks; evaluated/inspected 263 and accredited 223 HIV testing laboratories, medical technology internship training laboratories and laboratories for water analysis; conducted 16 training courses/workshops/seminars; evaluated 2,322 diagnostic kits/reagents; repaired/maintained 21 laboratory equipment items; and published 1 regulatory issuance in the national newspapers.

It established and made operational the TB reference laboratory and mycology laboratory. It completed the following research projects : "Hepatitis C antibody positivity in two major groups: voluntary blood donors and persons with high risk behavior (i.e. commercial sex workers, drug pushers, patients with STDS, etc.) "Prevalence of iodine deficiency disorder through urinary iodine and blood spot TSH (thyroid stimulating hormone) levels"; and "Use of alternative reagent (95% ethyl alcohol) for cytology staining."

## **BUREAU OF RESEARCH AND LABORATORIES (BRL)**

### **Program Description:**

The BRL is tasked to develop and formulate plans, standards and policies for the establishment, licensing and accreditation of laboratories, blood banks and entities handling biological products; to provide consultative training and advisory services to public and private laboratories, and to conduct studies and research related to laboratory procedures and operations.



## THE HOSPITAL OPERATIONS AND MANAGEMENT SERVICE (HOMS)

### Program Description:

HOMS is mandated to formulate and implement plans, programs policies, standards and techniques related to management improvement and quality control of hospital operations; provide consultative, training and advisory services to field offices in relation to the supervision and management of hospital components; and conduct studies and research related to hospital operations and management.

### Accomplishments :

HOMS successfully managed the Mother Baby Friendly Hospital Initiative Program.

It launched in 45 DOH hospitals, the Healthy Hospital Initiative Program (HHIP) which is the advocacy arm of the Hospital as Centers of Wellness Program. The HHIP was able to establish linkages with 12 organizations. It conducted 3 workshops and 2 multisectoral meetings and printed 25,000 primers.

HOMS reviewed 82 hospital applications; reviewed the Five Year Nursing Development Plan; evaluated 106 resident physicians for dispersal; reviewed 45 Quality Assurance Program reports; visited 2 hospitals for validation of QAP reports; drafted 40 protocols for 10 leading causes of discharges for the four major services; rendered 476 consultative and advisory services; did operation research of hospitals on government resident physicians 24 hours duty rotation; conducted 56 orientation training courses on the use of the hospital component manuals; conducted 3 courses on emergency room trainings; evaluated 9 hospital procurement plans; evaluated 16 hospital equipment requests; evaluated Five Year Equipment upgrading programs of 25 hospitals; prepared hospital statistical reports for 3 quarters; assessed 4 hospitals on hospital operations; did 31 fact-finding investigations; evaluated 55 Congressional bills; and evaluated 14 proposals of DOH retained & devolved hospitals for facility improvement.

## THE BUREAU OF LICENSING AND REGULATION (BLR)

### Program Description:

The BLR is the DOH regulatory agency for hospitals, clinics and other health facilities. It recommends accreditation/issuance of licenses of health facilities except for renewal of licenses of primary and secondary level hospitals which had been delegated to the regional health offices.



### Accomplishments:

In 1995, it amended A.O. 68-A, s. 1989. It reviewed and evaluated 271 applications for permit to construct; 4 applications for ambulatory surgical clinics; 145 applications for medical clinics for overseas contract workers; 28 applications for clearance to operate health maintenance organizations.

The BLR processed 421 hospital license applications and 329 dental prosthetic laboratories license applications. It conducted ocular inspection of 414 hospitals, 417 dental prosthetic laboratories, 149 medical clinics for overseas contract workers, and 4 ambulatory surgical clinics.

It authenticated 13,641 medical examinations/AIDS test results and monitored 207 hospitals; 491 dental prosthetic laboratories; and 80 medical clinics for overseas contract workers. It also undertook fact-funding activities for complaints filed against 48 hospitals and 10 medical clinics for overseas contract workers.

It conducted a consultative meeting with the regional health office licensing team and acted as secretariat for the DOH-POEA-MARINA Consultative Committee Meeting.

The BLR continued data-gathering for its baseline survey on capability of lying-in clinics/hospitals, its five-year retrospective study of hospital capabilities licensed in 1988-1992 and its survey on occupational hazards in dental prosthetic laboratories.

## **HEALTH INFRASTRUCTURE SERVICE (INFRA)**

### **Program Description:**

The objectives of the Program are to ensure that licensure and quality standards for physical plants are met by retained hospitals, to provide for their utility and safety requirements, to meet the new and developmental demands of hospital frontline services and to institute a hospital physical plant maintenance system.

### **Accomplishments:**

Under the 1995 Health Infrastructure Program of the DOH (based on the 1993 - 1998 Medium Term Plan for Health Infrastructure), forty (40) retained hospitals and fifteen (15) offices, including Central Office and Regional Health Offices of the DOH, undertook various repair/renovation/completion/new construction projects in 1995 with a total infrastructure capital outlay of approximately one billion pesos. The Program was managed by the Health Infrastructure Service.

In 1995, the preliminary or schematic plans of fifty five (55) projects were prepared and approved. The project documentation (Detailed Architecture and Engineering Plans, Estimates and other Bid documents), bidding and awarding of twenty (20) of these projects were completed. The project documentation of the remaining thirty five (35) projects will be prepared by the private sector through the hiring of consultants based on NEDA guidelines. The corresponding project documentation, bidding and awarding works are expected to be completed by the second

quarter of 1996. The target date of completion of construction of the first twenty (20) projects will be from December 1995 to June 1996, while the target date of completion of the remaining thirty five (35) projects will be from June 1996 to March 1997, all under the continuing appropriations programs.

Six (6) training workshops on Hospital Planning and Design, Hospital Physical Plant Maintenance and Project Implementation were conducted in 1995. Participants to these training workshops were provincial and municipal architects and engineers, and maintenance staff of devolved hospitals.

As a result of INFRA's research activities, five (5) manuals for hospital planning and design (10-bed and 100-bed hospitals), and for hospital physical plant maintenance were finalized and bidded for publication.

Three (3) foreign-assisted projects were provided with technical assistance with regards to civil works component. The projects include the Urban health and Nutrition Project (UHP), the Women's Health and Safe Motherhood project, and the DOH Multi-Media Center Project.



## **HOSPITAL MAINTENANCE SERVICE (HMS)**

### **Program Description:**

The HMS provides hospital equipment maintenance and repair services for DOH retained and devolved hospitals. It undertakes training of hospital equipment users and maintenance technicians. It has technical supervision over the HMS Workshop for Visayas (HMS-V) based in Regional Health Office No. 7 in Cebu City and the HMS Workshop for Mindanao (HMS-M) based in Regional Health Office No. 11 in Davao City.

### **Accomplishments :**

The HMS proper conducted 15 consultative workshops on formulation of health care equipment specifications and on the role of hospital engineers and hospital maintenance units. It repaired 264 laboratory, X-ray, electromedical, and other hospital equipment. It undertook preventive maintenance visits to 156 hospitals during which 583 pieces of equipment were checked and 273 were repaired. Training in preventive maintenance was given to 72 user and technicians. Ten monitoring visits to hospitals were also made. As part of the Think Health Health Link program for 1995, the HMS was responsible for the Healthy Vehicle Initiative for which 2 consultative workshops were held and one IEC material was prepared.

The HMS -V repaired 519 pieces of hospital equipment. It undertook preventive maintenance visits to 120 hospitals during which 660 equipment items were repaired. It conducted 2 users' training courses with 2 participating hospitals. Two skills upgrading courses were also conducted.

The HMS-M repaired 473 pieces of hospitals equipment. It undertook preventive maintenance visits to 144 hospitals during which 2,267 equipment items were repaired. It conducted 5 users' training courses with 117 participants and 2 skills upgrading courses with 54 participants.



## **Mother Baby Friendly Hospital Initiative (MBFHIP)**

### **Program Description:**

The MBFHIP is the DOH program which promotes, protects and supports breast feeding. Its goal is to make all hospitals with maternity and newborn services into Mother Baby Friendly hospitals by the year 2000.

### **Accomplishments:**

In 1995, the MBFHIP conducted 12 lactation management training courses; pre-assessed 438 hospitals; conducted 3 symposia/scientific meetings; assessed 324 hospitals; and monitored 11 hospitals.

It awarded 580 new Mother Baby Friendly Hospitals thus bringing to 805 the total number of such hospitals and exceeding by 32% the targeted mid-decade goal of 612 hospitals.



## **RADIATION HEALTH SERVICE**

### **Program description:**

The RHS is the DOH regulatory agency mandated to protect the workers and members of the public from the hazards posed by ionizing and non-ionizing radiation from electrical/ electronic devices and to promote the safe and efficient use of radiation technologies.

In 1995, the RHS drafted two administrative orders for regulation and control of x-ray devices used in veterinary medicine and in education and research. It issued 44 permits to import radiation devices, undertook for licensing purposes radiation protection survey and evaluation of 1178 government and private x-ray facilities and the work there at, and monitored 31 facilities with quality assurance programs.

The RHS did acceptance testing of 25 ionizing radiation equipment/accessories, did testing/evaluation of 61 non-ionizing radiation devices/facilities, designed 61 radiation facilities, calibrated/repared 31 radiation measuring instruments, calibrated 4 radiation therapy equipment, monitored individual radiation doses of 1255 radiation workers, and conducted 22 training courses in radiation protection/quality assurance in diagnostic radiology.

The RHS with the assistance of three DOH agencies prepared a project proposal entitled the "Upgrading of Radiological Capabilities of Selected DOH Hospitals and Priority Programs." The project was approved by the government's Investment Coordination Committee resulting in its inclusion in the Financial Protocol agreement signed by our government with the French Republic on December 18, 1995.

On September 11-15, 1995, the RHS hosted the International Atomic Energy Agency meeting on the Coordinated Research Project on Determination of Radiation Doses from Diagnostic Radiology examinations. The participants came from Thailand, Malaysia, China, New Zealand, Pakistan, Bangladesh and the Philippines.

Since 1995 was the centenary of the discovery of x-rays on November 8, 1895 by

William Conrad Roentgen, a special exhibit was organized by the RHS to celebrate this historic event. A broadcasters' manual was prepared and several radio interviews were given by the RHS Director. The RHS also held its 2nd Star Awards ceremony and gave 30 STAR awards to deserving hospital radiology departments. The RHS also co-organized several activities together with the various professional associations of radiologists, medical physicists and radiologic technologists which culminated in the holding of the Radiology Centennial Congress on October 11-13, 1995.



## **STOP DISASTERS, EPIDEMICS, ACCIDENTS AND TRAUMA FOR HEALTH (STOP DEATH)**

### **Program Description :**

The Stop DEATH Program is an innovative strategy to consolidate and enhance the resources and capabilities of the DOH towards a coherent and effective response in times of emergencies. It emphasizes the crucial role of hospitals in establishing a national health and emergency services network, and aims at institutionalizing emergency preparedness planning and response in the periphery.

## **Accomplishments :**

Emergency medical services were provided for the:

- a. State visit of His Holiness Pope John Paul II and the World Youth Day 1995
- b. 23rd American Society of Travel Agents International Conference
- c. 9th Anniversary of the EDSA Revolution
- d. 97th Anniversary of the Philippine Independence
- e. Pilgrimage of the Interfaith Pilgrimage of Peace and Life

Disaster response teams provided emergency medical services and psychosocial care to:

- a. Victims of the 04 April 1995 terrorist attack in Ipil, Zamboanga del Sur
- b. Victims (4,000 Filipino Muslims) of the fire that gutted the town of Pulao Gaya, Sabah, Malaysia (May 4, 1995)
- c. An ailing priest stranded in Mt. Halcon, Oriental Mindoro
- d. Victims of the sunken MV Antipolo (Marinduque), and MV Kimelody (Batangas)
- e. Victims of the Mt. Parker Tragedy
- f. Victims of the lahar affected areas
- g. Victims of the typhoon Rosing
- h. Affected families of the Smokey Mountain Demolition

Twenty-seven (27) nurses were trained during the Emergency Medical Technician's and Advanced Life Support Course, 120 midwives from Guimaras, Iloilo and Tanauan, Batangas were trained on Basic Life Support; and 34 Stop DEATH Coordinators from the DOH Regional Health Offices and Retained Hospitals attended the 1st module of the Health Emergency Management Course.

Now on its second year, the relaunching of the **OPLAN TOROTOT** proved to be a successful one. This is the promotion of injury prevention and safe revelry during the holiday season. There was a decline of 50% on the number of firecracker related injury based on our national registry.

The program in coordination with the Philippine College of Surgeons, organized the World Health Organization WHO- sponsored 1st National Trauma Congress, a seminar-workshop which served as a forum for the health sector and other sectors involved in emergency management to discuss emerging concerns and developments in the fields of accident and injury prevention, trauma management and disaster medicine.

With support from WHO, two documents "Emergency Preparedness: A Guidebook on Health Emergencies for the Stop DEATH Program" and "Management Information System for the Stop DEATH Program: Proposed Design and Architecture" were produced. Two IEC materials, the first issue of the Stop DEATH Chronicle and the documentary film about the Stop DEATH Program entitled "The Will To Survive" were also produced.





## **NATIONAL VOLUNTARY BLOOD SERVICES PROGRAM (NVBSP)**

### **Program Description :**

The passage of the National Blood Services Act of 1994 (RA 7719) led to the creation of the NVBSP of the DOH. The NVBSP provides the framework and sets the direction for an integrated national response to the problem of an inadequate and unsafe blood supply through the promotion of voluntary blood donation. It aims to establish a Blood Transfusion Services Network that will efficiently provide safe and adequate blood supply through a non-remunerated blood donation scheme.

### **Accomplishments**

In 1995, the NVBSP participated in the finalization of the implementing Rules and Regulations (IRR) of RA 7719 which was approved by the Secretary of Health and issued as DOH Administrative Order No. 9 s. 1995.

It conducted 3 regional workshops; completed 3 regional consultations and procured reagents and supplies for 26 blood centers.

## **THE NATIONAL QUARANTINE OFFICE (NQO)**

### **Program Description:**

The NQO is the DOH sentinel in all parts and airports of entry into our country. It provides maximum security against the entry and international spread of quarantinable diseases. It promotes health and sanitation in its areas of jurisdiction. It ensures that aliens who are admitted for residency in the Philippines are healthy.

### **Accomplishments**

In 1995, the NQO succeeded in maintaining at safe levels the indices for plague and yellow fever which monitor the possible transmission of these two diseases. Its effective surveillance measures successfully quelled fears of the public arising from the Ebola

hemorrhagic fever outbreak in Zaire.

For its disease surveillance services, the NQO

- inspected 24,385 vessels and aircraft from foreign ports and airports.
- immunized 183,977 travellers and other clients
- undertook the physical examination of 15,540 aliens, stewards and foodhandlers
- tested 7,787 food and water samples from ports, airports, vessels, aircraft, catering and eating establishments and from foodstuff exports prior to shipment.

For its port and airport health services, the NQO

- did 7,735 sanitary inspection of interisland vessels, eating and catering establishments.
- did 2,062 inspections/fumigations of rodent-infested vessels
- did 119,151 rat-trapping/dissecting/poisoning operations for plague surveillance and prevention
- did 8,540 disinsection/larviciding/fogging operations for yellow fever surveillance and prevention
- conducted health education seminars with 2,611 participants

It successfully launched its Healthy Ports Initiative in Manila on February 23 and in Cebu City on November 15 as part of the Think Health -Health Link program of the DOH. This initiative strengthened the partnership between the port authorities and the port users.

Another quarantine station was opened at the Port of General Santos City which has become quite busy due to an upsurge in socio-economic developments in the area.



## BUREAU OF FOOD AND DRUGS (BFAD)

The Bureau of Food and Drugs was created under R.A. 3720 which was amended by E.O. No. 175. It is the regulatory agency mandated to ensure the safety, efficacy, quality and purity of processed food, drugs, diagnostic reagents, medical devices cosmetics and hazardous substances. It is further authorized to administer and enforce:

R.A. 6675 - the Generics Act of 1988,  
R.A. 7394 - the Consumer's Act,  
R.A. 7581 - the Price Act, and  
R.A. 7432 - the Senior Citizen's Act

### 1. Phase-out of Potassium Bromate as Flour Treatment and Dough Improver

The BFAD implemented the phase-out use of potassium bromate as flour treatment agent on a gradual basis after years of consultations and series of public hearings. The schedule of the phase-out from all affected sectors (flour millers, bakers, suppliers of bakery additives/ingredients) was laid down per Bureau Circular No. 1 s. 1995. Monitoring of flour manufacturers, suppliers and distributors was conducted and compliance was found to be satisfactory. Tentative date for the final phase-out was set on December 31, 1995. Thereafter, the use of potassium bromate or potassium bromate-containing ingredient in bread-making shall make the bread or bakery product adulterated and its mere possession will give rise to the presumption that the same will be used in bread-making.

### 2. Guidelines on Food Fortification

In 1995, the Guidelines on Micronutrient Fortification of Processed Foods was issued (Administrative Order No. 44s. 1995) to avoid over-or-under fortification of processed foods that may create an imbalance in the diet as well as to avoid misleading label claims to gain competitive marketing advantage. It shall apply to all fortified foods except dietary supplements and foods for which established standards include specifications for nutrient composition or levels of fortification, e.g., breastmilk substitutes, follow-up formula.

### 3. Approval of Philippine Natural Grade Carageenan as food additive by Codex Alimentarius Commission.

The approval of Philippine Grade Carageenan as a food additive by the Codex Alimentarius Commission of the U.N. FAO/WHO will definitely propel the Philippine seaweed industry as a major export industry. The BFAD and U.P. Diliman conducted toxicological tests on the carageenan in their effort to assist the industry in complying with the requirements for acceptance in the world market.

### 4. Fake and Counterfeit Drugs

The BFAD in coordination with the Criminal Investigation Services Command of the PNP and the pharmaceutical industry conducted several raids in Metro Manila and Metro Cebu against the suspected distributors or sources of fake and counterfeit drug products. The raids resulted in the filing of criminal complaints against the suspects, two of which are now pending litigation in the trial courts of Manila. Two other criminal complaints are pending investigation at the State Prosecutor's Office of the Department of Justice.

### 5. Good Manufacturing Practices (GMP)

A comprehensive training program on Good Manufacturing Practice (GMP) was conducted by an Australian expert with BFAD central and regional inspectors and about 400 representatives of the Philippine Pharmaceutical Industry as participants. The seminar culminated in the drafting of the "Bayanihan Supplementary Notes to the ASEAN Code of GMP" which will greatly enhance the auditing and inspection expertise of the BFAD Food and Drug Regulation Officers. Manufacturing audit was conducted on all drug manufacturers at the National Capital Region (NCR) and Regions I to XII. Eighty (80%) percent of the audited establishments complied with the minimum requirements of GMP while the rest expressed their willingness to comply strictly with the GMP requirements.

6. Seminar/Workshop to define BFAD Vision, Mission and Core Values

Through a series of seminar-workshop at the Development Academy of the Philippines participated in by management staff, the BFAD vision, mission and core values were developed, formulated and defined, concurred by the rank and file employees and finally approved by the BFAD Management Committee.

7. Filinvest Corporate City Development

BFAD finds itself in the midst of a rapidly changing urbanized environment - a corporate city, with the implementation of the joint venture project between the Filinvest Corporation and the Government of the Philippines. The environmental change affecting BFAD is in consonance with the BFAD's vision of becoming a world class food and drug regulatory agency and center of scientific excellence nestled in a clean, green and forested site.

8. Field visit to all regions as part of the preparation to the effort of reengineering the bureaucracy of the DOH

9. WHO Adverse Drug Reaction (ADR) Network

In February 1995, the Philippines through the BFAD was accepted as a member of the WHO Collaborating Centre for International Drug Monitoring, BFAD will play an important role in advance monitoring activities and in providing timely and accurate drug information to the general public. To assist the BFAD in evaluating reports of adverse drug reactions, the National Adverse Drug Reaction Advisory Committee (NADRAC) was created.

10. Cosmetic Regulation Innovation

To facilitate the processing of cosmetic product applications, a list of simple and safe cosmetic products which would require only documentary evaluation and listing prior to marketing rather than a complete laboratory testing and registration was prepared. A dynamic list of permissible and non-permissible claims was also issued to aid in the evaluation of cosmetic products. In consonance with these innovations, a continuous review is being undertaken by

the Joint BFAD-Industry Committee to update the specific standards and requirements for the registration of all cosmetic products.

11. BFAD Laboratory Information Bulletin (BLIB)

The BFAD Laboratory Information Bulletin or BLTB's maiden issue was launched on April 30, 1995 during the 8th Anniversary of BFAD. It was created as a forum for exchanging scientific information within and beyond the confines of BFAD.

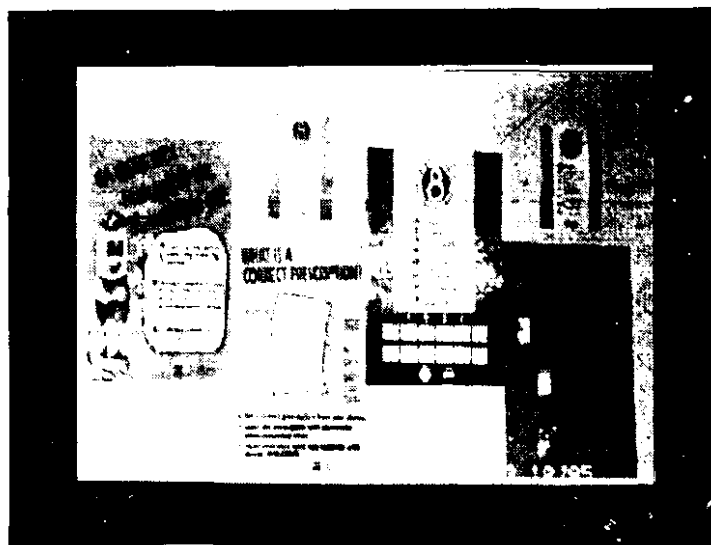


**NATIONAL DRUG POLICY PROGRAM (NDPP)**

1995 was a banner year for the National Drug Policy movement both nationally and internationally. In the Philippines, the eight year of the NDP Program implementation and the 7th year of the Generics Act of 1988 saw the expansion and strength envying of the NDP organizational structure, and formal efforts of external review and impact assessment of NDP and full implementation of the Philippines-Australia NDP Cooperation Project and WHO assisted projects. Internationally, major developments included the holding of a major International Conference on National Medicinal Drug policies in Sydney, Australia, a major revision of the WHO Guidelines for Developing National Drug Policies, the publication of a special issue of DHF Development Journal on National Drug Policy, use of a common set of indicators to assess the impact of NDP in eight countries.

## **Accomplishments:**

1. Upgrading of the 1993 edition of Philippine National Drug Formulary Vol. I or Philippine Essential Drugs List by the National Drug Committee in consultation with affected and interested sectors was done.
2. Nationwide implementation in all 15 regions of the country of activities under the five NDP pillars. Compliance with the Generics Act of 1988 was promoted and monitored with innovative approaches such as the use of Generics Menu Card and Generics Star Rating for Drugstore.
3. Continued implementation of both the Quality Assurance component and Rational Use component of the Philippine-Australia NDP Cooperation Project, including the establishment of Bioavailability Unit at the University of Santo Tomas Hospital to undertake bioequivalence studies of selected products with reported Bioavailability problems.
4. Conduct of a Seminar-Workshop on Drug Price Monitoring and NDP Indicators on Feb. 7-9, 1995 for regional Food-Drug Regulation Officers and NDP Compliance Officers.
5. Conduct of a Seminar-Workshop on Promoting Rational Drug Use held on June 7-9, 1995 for health workers in the field, NGOs and LGUs on Sept. 5-6, 1995, for DOH services and programs.
6. Conduct of a Seminar-Workshop on Tailored procurement on Rational Management of Drug Supply comprising E.O. 49 s. 1993 for health personnel, academe, Filipino drug manufacturers, COA and other government agencies.
7. Conduct of a Seminar-Workshop on Policy Review and Program Evaluation on Generics Law and PNDF conducted by the UP College of Public Administration in all regions.
8. Conduct several training courses/workshops and seminars on antimicrobial resistance, adverse drug reaction, RDU in the medical curriculum and drug use studies as part of activities involving various stakeholders.
9. Conduct by the Philippine Core Group of the International Network for the Rational Use of Drugs (NRUD), in collaboration with the World Health Organization (WHO), Australian Agency for International Development (AusAID) and the Management Sciences for Health of the "7th International Course on Promoting Rational Drug Use" on Nov. 27 - Dec. 8, 1995 with twenty-two (22) delegates from Bangladesh, Cambodia, China, Indonesia, Malaysia, Nepal, Philippines, Thailand and Vietnam. The INRUD course in the Philippines acquired the highest score rating compared to the course held in other countries in the previous years.
10. Monitoring of Generics dispensing and prescribing
11. Price monitoring of 24 essential drugs was conducted quarterly nationwide.
12. Publication of price differentials of eight (8) essential drugs quarterly in leading newspapers.



## HOSPITAL SERVICES

The DOH has 47 hospitals which were retained after the devolution with a bed occupancy rate at 82.51% These hospitals are:

- 1) Four specialty hospitals (Heart,Lung, Kidney, and Childrens);
- 2) Five special hospitals (Maternity, Orthopedic, National Childrens, Mental, San Lazaro);
- 3) Two research hospitals (one in Metro Manila and one in Leyte del Norte);
- 4) Nine medical centers (three in Metro Manila and six in regions);
- 5) Three district hospitals in Manila;
- 6) Fourteen regional hospitals (two in Manila and 12 in regions);
- 7) Eight sanitaria (one in Metro Manila, Palawan, Camarines Sur, Iloilo City, Cebu City, Sulu, Zamboanga del Sur, and Sultan Kudarat).

These hospitals reported a total of 5,098,384 in-patient days, with 535,416 admissions and 877,445 discharges.

The hospitals also performed a total of 131,531 minor and 83,343 major operations; made 6,831,163 prescriptions; and conducted 826,160 x-ray examinations.

Many of these government hospitals reported the following milestones:

- 1) Philippine Heart Center, Quezon City
  - given "Most Outstanding Hospital on Sanitation & Waste Management" award & "National Public Service" award by Kapwa Ko, Mahal Ko Foundation, Inc.
  - restored the Experimental Surgery Laboratory for research
- 2) Northern Mindanao Medical Center, Cagayan de Oro City
  - upgraded into Northern Mindanao Medical Center by virtue of R.A. 7938 last 1 March 1995
  - given the "Two-Star" award by Radiation Health Service (DOH)

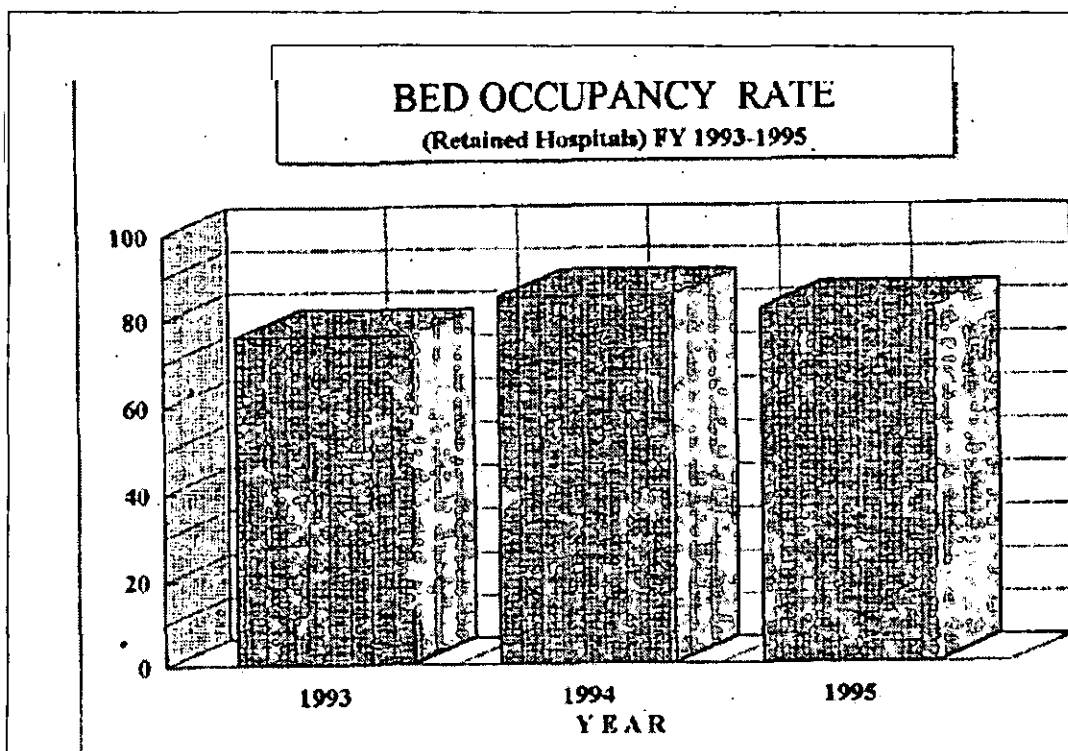
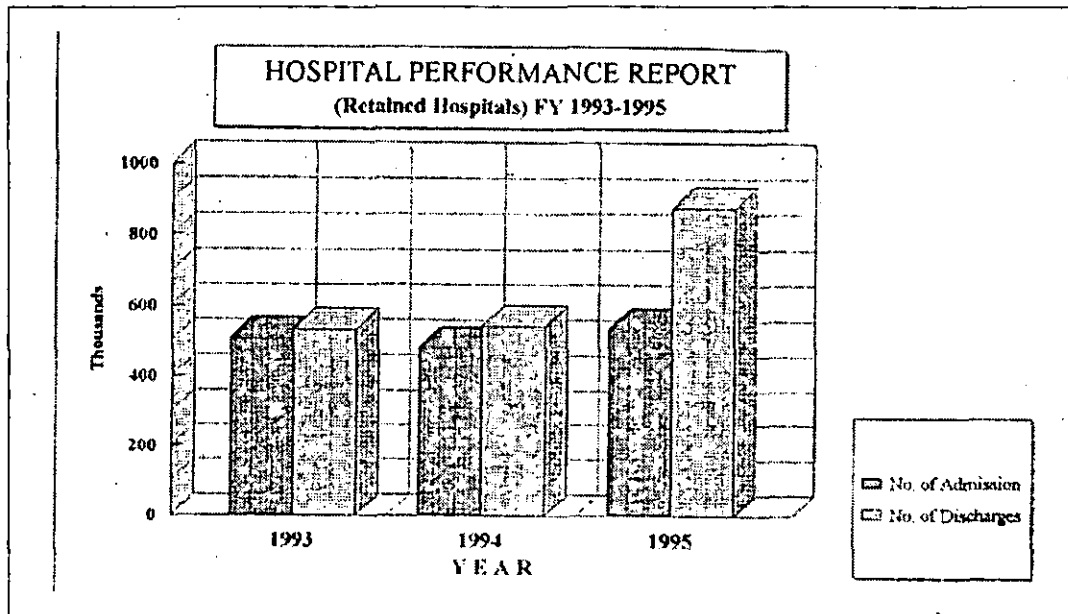
- 3) Eulogio "Amang" Rodriguez St. Medical Center, Marikina
  - upgraded from a provincial hospital to medical center by virtue of R.A. 8019 last 25 May 1995
  - given the Star Award for Quality Assurance in X-ray Service
  - given Special Recognition as one of the Hospitals to Achieve 100% Accomplishment under the Sister Hospital Scheme
- 4) Research Institute for Tropical Medicine (RITM), Muntinlupa
  - set up a Molecular Biology Laboratory for vaccine development
  - conducted the Second National AIDS Research Forum
- 5) Bicol Medical Center, Naga City
  - upgraded from Bicol Regional Training & Teaching Hospital to Bicol Medical Center by virtue of R. A. 8053 last 15 June 1995
- 6) East Avenue Medical Center, Quezon City
  - became the DOH Poison Control Coordinating Center for NCR
  - initiated the Edi-TAI QUIGONG Exercise which is being conducted every 5:30 a.m. Tuesday & Thursday at the hospital grounds
- 7) San Lazaro Hospital, Manila
  - given Recognition for the first Hospital to Respond to the Emergency Call even on Traumatic Situations (Stop D.E.A.T.H. program)
  - given an award and recognition for providing information education and communication (IEC) materials for the S.A.K.S.I. program on (TV or radio???)
- 8) Eastern Visayas Regional & Medical Center, Cebu City
  - was a pilot area for the Quality Control program of the Radiation Health Service, DOH
  - computerized fully the records-keeping & upgraded the library of the Dept. of Orthopedics & Traumatology
- 9) Paulino J. Garcia Memorial Medical Center, Nueva Ecija
  - received Special Recognition from DOH and UNICEF for strong Implementation of Steps 3 & 10 of the Ten Steps to Successful Breastfeeding

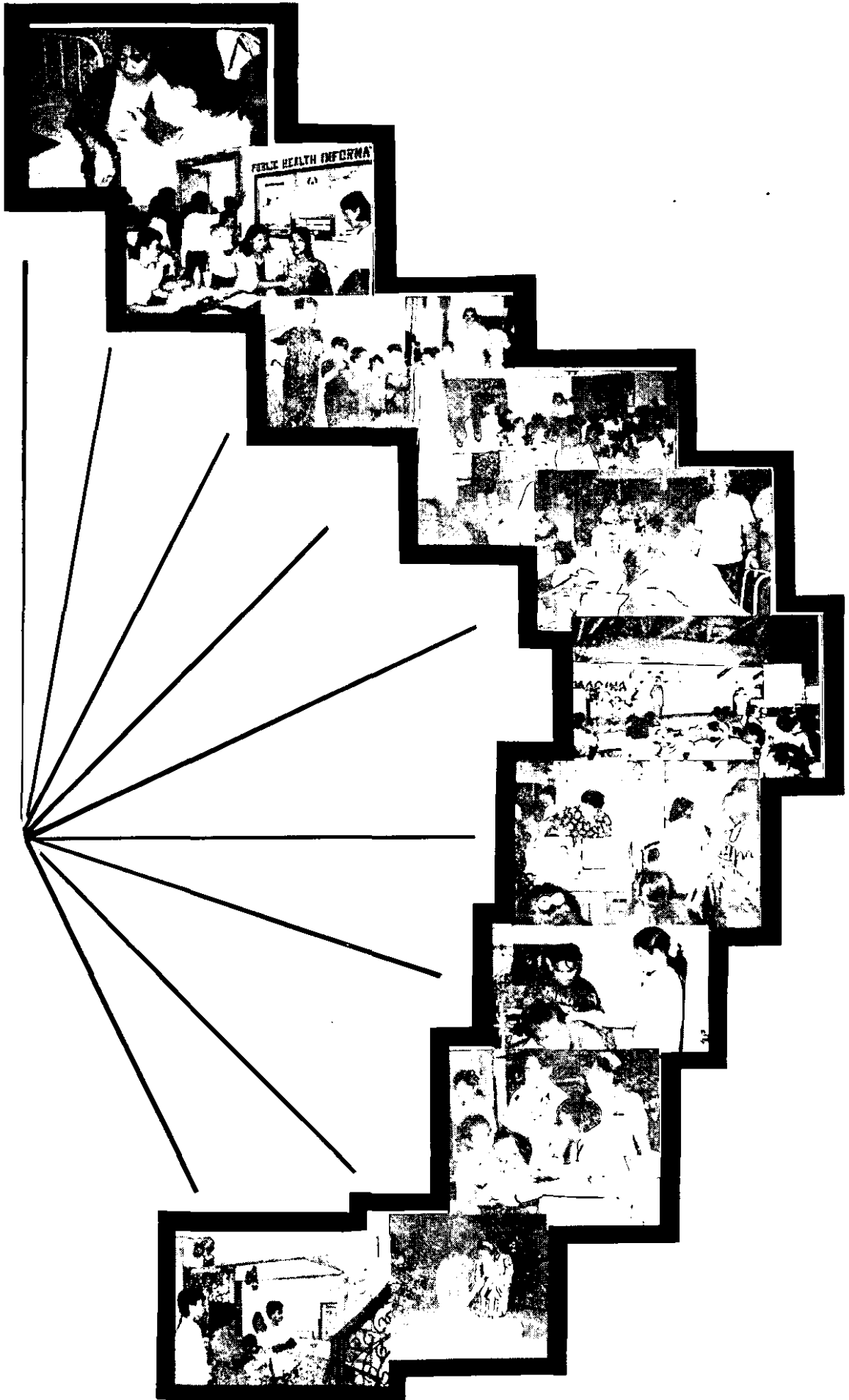
- received 2 special awards during the Awarding & "Pasasalamat" Ceremonies for the Mother- & Baby-Friendly Hospital Initiative Program
- 10) Philippine Orthopedic Center, Quezon City
    - manufactured 1,947 orthopedic appliances to patients through the Prosthetic & Surgical Appliance Factory (PASAF)
  - 11) Rizal Medical Center, Pasig City
    - computerized hospital operations and management information system
  - 12) Dr. Jose Fabella Memorial Hospital, Manila
    - received an award as the "Outstanding Hospital on Sanitation and Waste Management"
    - received "National Award for Excellence" for its Infant-Feeding Practice
    - received "National Wellness Citation for Voluntary Blood Donation"
    - received "National Wellness Innovations" for its Department of Dental Medicine
    - received "National Wellness" for its "Buhay Pamilya" cancer ward
    - achieved a 100% passing rate in the 1995 Midwifery Board Exams, with 5 examinees within the top 20
  - 13) Vicente Sotto Memorial Hospital, Cebu City
    - conducted researches on:
      - "Closed Intramedullary Nailing of Tibia Shaft Fractures"
      - "Wound Closure Using Locally-made Skin-stretching Device"
      - "Compression Plating of the Radius with Intramedullary Pinning of the Ulna Without Post-operative Immobilization"
      - "Ilizarove External Fixation for Open Type III Tibia Fracture"
      - "Torsion Dystonia with Secondary Scoliosis"
  - 14) Jose R. Reyes Memorial Medical Center, Manila
    - conducted researches on:
      - "Fournier's Gangrene: JRRMMC Experience ", Drs. Roberto Lopez & Reynaldo Combe, Phil. Journal of Urology, Jan.-June 1995
      - "The Outcome of 85 Cases of Blunt Renal Injury in a Tertiary Hospital", Phil. Journal of Urology, June-Dec. 1995
      - "A Prospective Study of the Common Dermatoses Among Filipino

- Children Aged 0-14 Years at the Dermatology Department of the JRRMMC", Drs. Cecilia Rosete & Jesusa Barcelona Tan, Journal of Phil. Dermatological Society, November 1995
- "Prevalence of Common Hair & Scalp Disorders Among Filipinos Being Seen as Out-patient at the Department of Dermatology of the JRRMMC from 1 Nov. 1993-31 Oct. 1994", Drs. Ma. Cynthia Caparas, Ma. Aurora Hortaleza, Ma. Asuncion Mendoza, Marilou Sarmiento & Elizabeth Amelia Tianco, Journal of the Phil. Dermatological Society, Nov. 1995
  - "Chronic Blistering Diseases: A Comparison of the Clinical Histopathologic, Direct Immunofluorescence Studies & Serum C3 Level", Drs. Cecilia Rosete & Jesusa Barcelona Tan, Journal of Phil. Dermatological Society, November 1995
  - "Acute Traumatic diaphragmatic Hernias", Dr. Robert Chang, Phil. Journal of Surgical Specialties
  - "Management of Foreign Body Ingestion Beyond the Gastroesophageal Junction", Dr. Robert Chang, Phil. Journal of Surgical Specialties
  - received honors for the following researches:
    - 1st place, PSO-HNS Interhospital Surgical Innovations & Instruments Design Research Paper Contest, Subic Bay, April 1995
    - 1st place. "A Double-Blind Placebo-Controlled Trial of Levamisole in the Treatment of Mollusan Contagiosum", Dr. Angeli SP Garcia Interhospital Research Contest, East Avenue Medical Center, Oct. 1995
    - 1st place, "Evaluation of Ultrasonography & Diagnostic Peritoneal Lavage in Blunt Abdominal Trauma", Dr. John Cruz, PCS Trauma Research Paper Contest, Dec. 1995
    - 3rd place, "A Profile of ENT Examination Postures Among Junior or ENT Residents in Metro Manila: Some Ergonomic Considerations", Dr. Jesus Randy Canal, PSO-HNS Annual Interdepartmental Descriptive Research Paper Contest

**HOSPITAL PERFORMANCE REPORT**  
(Retained Hospitals) FY 1993-1995

INDICATORS	1993	1994	1995
Bed Occupancy Rate	76.36	85.12	82.51
Admissions	506,694	480,270	535,416
Discharges	532,329	542,051	877,445







# REGIONAL HEALTH OFFICE

## **"FIVE FOR LIFE IN '95" and "THINK HEALTH, HEALTH LINK":**

"Health for all Filipinos by Year 2000" and "Health in the Hands of the People by the Year 2020" continue to be the guideposts of the Department of Health (DOH). The former refers to equity, quality and access to health while the latter aims to make the people understand the determinants of health, thus, allowing them to shape their lives and the lives of their communities.

Thus, for 1995, the DOH directed its sights on five major concerns popularly known as "Five for Life in '95". Equally important but with lesser media hype was the umbrella of "Think Health, Health Link" or the Philippine Healthy Initiatives. Together with the other regular programs, the 1995 accomplishments of the DOH are as follows:

### **I. FIVE FOR LIFE IN '95**

#### **1. OPLAN ALIS DISEASE, HULING HIRIT**

The 1995 NIDs: Oplan Alis Disease, Huling Hirit aimed to preserve the gains of the previous years and to achieve a polio-free world by the year 2000; also, to eliminate measles and neonatal tetanus from the list of public health problems.

Results of this year's NID show a 90% Oral Polio Vaccine (OPV) coverage of children below five years old, 70% measles vaccine coverage of children 1 to 4 years old, and 43% tetanus toxoid coverage among women of reproductive age (15-44 years old).

The tetanus toxoid (TT) immunization was affected by the issue raised by the Catholic Church that the TT vaccine was tainted with an abortifacient substance called Human Chorionic Gonadotropin (HCG). Subsequent testings by an independent panel of experts showing that the level of HCG detected is insignificant failed to convince most of the women to have themselves immunized against tetanus.

### **2. TUBIG, KUBETA, ORESOL (TKO): KONTRA KOLERA**

To prevent the outbreak of cholera, diarrheal and other food and water-related diseases, specially in the depressed areas of the country, the DOH raised public awareness through a media campaign about these diseases and how to prevent them. Specifically, community-based sanitation measures were encouraged, such as boiling drinking water, using sanitary toilets, and when experiencing diarrhea, the use of Oral Rehydration Solutions (ORS) such as Oresol was advocated. In areas where there is no access to safe drinking water, the construction of spring boxes for unprotected springs, or of deep wells were subsidized in part by government. Labor and other costs were shouldered by the community through a barangay water supply association that they formed for this purpose. Toilet bowls were allocated for priority areas and Oresol were distributed to households during the TKO: KONTRA KOLERA.

The campaign's effectivity can be measured when cholera cases in 1995 was compared to the number of cases recorded in 1994. There were 3,277 confirmed cases and 27 deaths in 1994 while, in 1995, only 845 cases were recorded.

### **3. TARGET: STOP TB!**

To respond to the challenge created by the worldwide re-emergence of tuberculosis (TB) as one of the major causes of mortality, an intensified media campaign was launched in August. The campaign highlighted the change of strategies to control this disease from the clinic to family/community-assisted treatment compliance scheme.

Activities included treating 236,518 new cases and 12,000 special cases of TB in hospitals, distribution of anti-TB drugs for 175,000 active cases, provided 64 brand new microscopes to selected microscopy centers and repaired 84 microscopes in different regions of the country to improve the quality of TB diagnosis.

### **4. ARAW NG SANGKAP PINOY (ASAP)**

Vitamin A capsules to some 8.5 million children 1 to 4 years old and iodine capsules to at least 11 million women 15 to 40 years old were distributed nationwide during the "ASAP" III on October 17. Free

vegetable seedlings rich in Vitamin A and Iron were also distributed to ensure the program's sustainability.

## **5. KUNG SILA'Y MAHAL N'YO, MAGPLANO**

Information and services on the different family planning methods were provided to close to 2 million continuing users in 14,839 outlets nationwide. The Center for Mother and Child in Tarlac was set up as part of the close coordination being maintained with the local government units to sustain information, education, and communication strategies at the field level.

## **II. THINK HEALTH, HEALTH LINK or PHILIPPINE HEALTHY INITIATIVES**

To bring health messages to where the people are, a national multi-sectoral health promotion strategy was launched in the latter part of 1994. In an effort to develop health-promoting environments or "healthy places", this strategy will be implemented through linkages, networking, and multi-sectoral action. Under this umbrella, several healthy places were launched:

### **1. Healthy Schools Initiative**

This initiative takes advantage of the school as the venue to promote health habits and the most accessible provider of primary health care to schoolchildren. It was launched in partnership with the Department of Education, Culture, & Sports on 4 July at the Gen. Gregorio del Pilar Elem. School in Bulacan, Bulacan.

### **2. Healthy Hotels, Healthy Eating Places, & Healthy Marketplaces**

The rekindling of commitment and cooperation of the different local government units, the DOH and other government agencies, non-government organizations, private and business sector to make our lodging facilities, food establishments, and marketplaces more sanitary and healthful was marked by the launching of these projects on 30 August for Healthy Hotels, 14 July for Healthy Eating Places, & 2 October for Healthy Marketplaces.

## **3. Healthy Workplaces**

This initiative encourages workplaces to be one where the health and safety of workers, including their immediate families, are promoted. Another program, "Health of the Workforce" was integrated into this initiative and targetted the transport sector, like the jeepney and bus drivers. The Healthy Workplace was launched on 22 May in a model industrial establishment in Sta. Rosa, Laguna, while health care delivery service to the transport sector for the Health of the Workforce was conducted at the DOH also on May.

## **4. Healthy Vehicles and Healthy Streets**

This was launched by the DOH Regional Field Office No. 1 at the Provincial Capitol of La Union on 17 May in collaboration with such agencies as: the Phil. National Police, Land Transportation Office, DILG, DECS, DENR, Land Transportation Franchise & Regulatory Board, Traffic Management Command, Transport Cooperatives, and other NGOs. A search for the cleanest & healthiest bus terminal, bus, mini-bus, and jeepney in the whole region is on-going.

## **III. OTHER PROGRAMS**

### **1. PEOPLE'S HEALTH DAY or "ARAW NG KALUSUGAN"**

The project was conceived to help indigent Filipinos avail of expensive surgical interventions and medical care. It was launched on 29 September and was subsequently conducted every last Friday of the month. Thousands benefitted from the project as on its first day alone, 500 major and 665 minor surgeries were performed, 363 special (ECG & ultrasound) & 4,086 laboratory examinations were conducted, 761 x-ray examinations & 17,188 medical consultations were done in all DOH-retained hospitals and medical centers nationwide.

### **2. MOTHER & BABY-FRIENDLY HOSPITALS**

Already, 432 government hospitals and 235 private hospitals nationwide to Mother Baby-Friendly institutions to promote rooming-in and breastfeeding among mothers and newborns.

### **3. DISABILITY PREVENTION PROGRAM**

The information campaign for the nationwide registration of disabled persons was launched in July in preparation for the National Registration Day for Persons with Disabilities, conducted on December to enable the DOH to introduce interventions to improve the quality of their lives.

### **4. NATIONAL A.I.D.S. AWARENESS & PREVENTION DAY**

To heighten public awareness on AIDS and to emphasize the responsibility of the individual in preventing the spread of this disease, this year's theme was "Shared rights, shared responsibilities". A concert was held at the Araneta Coliseum featuring young and popular entertainment personalities as part of the World AIDS Day observance.

### **5. HEALTH CARE INFORMATION PROGRAMS**

Health care information programs were also highlighted to further encourage health consciousness and awareness among the populace. Among these are: the "Hataw, Bayan, Hataw: The Great Filipino Work-out", as part of every Filipino's lifestyle that will help him reduce heart diseases and deaths; the observance of World No Tobacco Day with the theme, "Tobacco Costs More Than You Think"; and the promotion of "tsaang-gubat" with fluoride to prevent dental caries among children nationwide.

### **6. HOSPITALS AS CENTERS OF WELLNESS**

The Hospitals as Centers of Wellness Program is the initiative which has transformed forty-five (45) DOH retained hospitals from "disease palaces" to "centers of wellness". These hospitals have established smoking cessation clinics; family counselling clinics; asthma and diabetes clubs; and alcohol and substance abuse therapy clinics, among others.

### **7. CORNEAL DONATION PROGRAM**

The DOH committed to assure the continuous supply of human cornea (for transplant) to prevent blindness among many

Filipinos through the Corneal Donation Program which was launched in cooperation with NGOs and the academe on 15 August.

### **8. REGIONAL OCCUPATIONAL TOXICOLOGY & NON-COM INFORMATION CENTER**

This is the mechanism by which the DOH and UP-PGH shall be able to immediately and adequately respond to reports of poisoning from different causes from various areas of the country. A memorandum of agreement was signed in July with UP-PGH.

### **9. RHEUMATIC FEVER/RHEUMATIC HEART DISEASE(RF/RHD) CONTROL PROGRAM**

This was launched on 25 September as a sub-program of the National Cardiovascular Disease Control Program to focus public health interventions to the most common and preventable cause of heart disease in the country.

### **SPECIAL AND UNIQUE PROJECTS :**

- \* Under the Partnership for Community Health Development (PCHD) Project, 9 municipalities from Quirino and Nueva Vizcaya provinces have completed municipal projects and were turned over to the community for maintenance and sustainability.
- \* Lingkod Sagip-Bahay Project which offered basic health programs, surgical operations and relief goods distribution to families affected by the recent flooding was implemented in Region III.
- \* A Diabetes Club and Diabetes Education Center was established in JB Lingad Memorial General Hospital. This is composed of diabetic persons who joined monthly activities like exercise, glucose monitoring and diabetes education. Outpatient teaching sessions were also conducted.

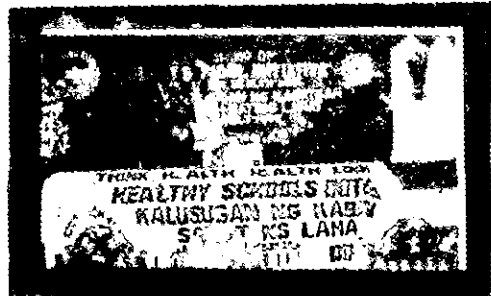
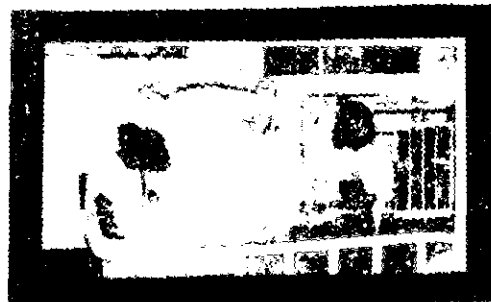
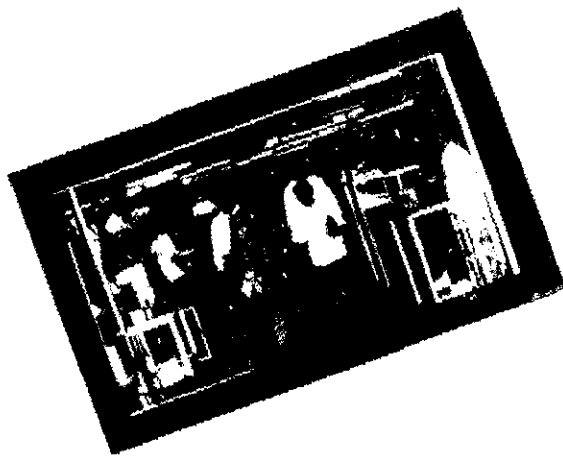
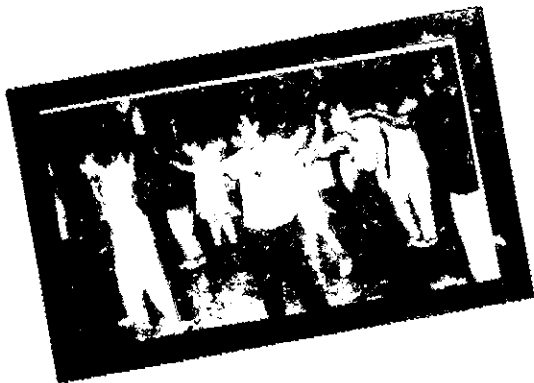
- \* "Project Zero Indigenous Case" was launched on June 1995 to reduce further morbidity and mortality rates of malaria and to eliminate the disease in 12 selected project municipalities of Region V and **declare them "no new indigenous case" municipalities.**
- \* A special project "Data for Decision-Making" (DDM) wherein computer workstations have been established and made operational in Albay, Camarines Sur and Legazpi City. Outputs were utilized by local executives and LHBs in consensus building and decision-making.
- \* During the ASAP, VAC coverage in Region VI was 100% due to their Regional Advocacy Team reached out clients **through the municipal level** advocacy meetings. This innovation has reaped an award for the FIDEL Program in the National Masigasig Award Contest.
- \* Establishments of nine (9) Botika Binhi in Cordillera Administrative Region (CAR) in coordination with Samahang Mangagawang Binhi ng Kalusugan.
- \* Regional Health Congress held and awarding of the Most Outstanding Barangay Health Worker on December 15, 1995.
- \* Installation of two (2) iodization plants in Kalinga and Baguio City on April and July, respectively.
- \* Organization of the Regional Blood Service Network.
- \* Implemented the Local Health Board Assessment Guide nationwide
- \* Implemented Social Reform Agenda (SRA) in Agusan del Sur and Surigao del Sur. Through provision of technical and logistics support to DSWD and LGUs in the launching of Brgy. Consuelo, Bunawan, Agusan del Sur as CIDSS Convergence area and installation of local health information system.
- \* Conducted a Health Facility Survey on the Control of Acute Respiratory Infection in collaboration with UNICEF, WHO and DOH-MCHS.

\* Conducted advocacy meetings, social mobilization, extensive IEC campaigns and research. Results is that more than 33% of Metro Manila's households are using iodize salt and ~~about 6 % of identified salt retailers are calling it.~~ **With this, it copped that first prize in the "Masigasig Ward".**

\* Propagated Tsaang Gubat herbal plant in the health center and public schools. Continued supporting the Boy's Town Study and Reception Center in terms of supplies such as toothbrushes and flouride gel.

The Regional Health Offices like the Central Office also performed the following roles and functions:

1. Policymaking/planning
2. Assistance to our LGU partners
3. IEC, social mobilization and linkaging/networking
4. Standards, licensing and regulation
5. Research and development
6. Resource management
7. Monitoring/evaluation
8. Disaster/epidemic management
9. Health information and exchange





## **ATTACHED AGENCY**

### **PHILIPPINE MEDICAL CARE COMMISSION**

#### **Accomplishments:**

In 1995, Medicare Program 1 continued to provide Medicare benefits to Medicare SSS/GSIS beneficiaries. Coverage 1 was registered at 24.87 M representing 35.39% of the estimated population. There were 858,344 claims paid and the average value paid per claim was P2,290.09 M. There was increase in beneficiaries served by 43% and slight decrease of 3.84% of average value paid per claim compared to last year's performance.

During the year, Executive Order 195 was implemented providing coverage for all Oversease Contract Workers who are not covered by SSS/GSIS regular and voluntary membership program. A total of 364,310 members are enrolled and only 12% availed of the benefits. An average of P2,988.74 was paid per claim.

Accreditation of health care provider remains with the Corporation. It is a privilege being granted to hospitals, physicians and dentist to participate in the Medicare Program and provide directly the services to Medicare beneficiaries. As of December 31, there were 11,536 physicians, 168 dentists and 1,489 hospitals accredited.

# HEALTH STATUS

## POPULATION

The country's population increased by 13.2 percent from 62,049,229 in 1990 to 70,266,876 in 1995.

In 1995, the estimated life expectancy at birth of the female is longer compared to the male, with 68.83 and 63.58 years, respectively. However, the male dominated the female with a sex ratio of 100 males to 101 females.

The population remains to be young with 0 to 14 years comprising 37.45% of the total population; 15 to 64 years - 58.77%; and 65 years and over - 3.88%. The age dependency ratio or the ratio of population from 0-14 years of age and 65 years and over to the population 15-64 years of age decreased by 3.6 percentage point from 73.8 in 1990 to 70.2 in 1995.

Among regions, Region IV and NCR are densely populated with 13.80 and 12.98 percentages of the country's population; respectively. On the other hand, CAR is the least populated region with only 1.89 percent of the total population.

## BIRTHS, MORBIDITY AND MORTALITY

Estimated Crude Birth Rate (CBR) was 26.9 per 1000 population in 1995. This is 2.9 percentage point lower than the 1990, which is 29.8.

Likewise, Crude Death Rate (CDR) decreased by 0.5 percentage point from 7.2 in 1990 to 6.7 per 1000 population in 1995.

Infant Mortality Rate (IMR) also showed an improvement, as it went down from 56.69 per 1000 livebirths in 1990 to 48.93 in 1995. Likewise, estimated Child Mortality Rate decreased from 24.33 in 1990 to 18.78 per 1000 population in 1995.

The 1992 Philippine Health Statistics showed that as ranked, the leading causes of illnesses in the country are: diarrheal diseases; bronchitis; influenza; pneumonia; tuberculosis, all forms; accidents; diseases of the heart; varicella; measles; and malaria.

For the same period, the leading causes of deaths are: diseases of the heart; pneumonia; diseases of the vascular system; malignant neoplasms; tuberculosis, all forms; accidents; chronic obstructive pulmonary disease; other diseases of respiratory system; diarrheal disease; and septicemia.

Maternal Mortality Rate also showed a declining trend from 2.09 per 1,000 livebirths in 1990 to 1.80 in 1995

## POPULATION, BY REGION 1995

REGION	POPULATION	% DISTRIBUTION
PHILIPPINES	70,266,876	100.00
NCR	9,117,632	12.98
CAR	1,329,477	1.89
Region I	4,031,023	5.74
Region II	2,712,823	3.86
Region III	7,167,045	10.20
Region IV	9,698,447	13.80
Region V	4,490,359	6.39
Region VI	6,155,087	8.76
Region VII	5,277,624	7.51
Region VIII	3,527,149	5.02
Region IX	2,890,386	4.11
Region X	4,111,359	5.85
Region XI	5,271,986	7.50
Region XII	2,387,999	3.40
ARMM	2,098,512	2.99

Source: National Statistical Coordination Board



**HEALTH INDICATORS: PHILIPPINES**  
**1990 & 1995**

HEALTH INDICATOR	1990	1995
* Population	62,049,229	70,266,876
* Crude Birth Rate (per 1000 pop.)	29.8	26.9
* Crude Death Rate (per 1000 pop.)	7.2	6.7
* Infant Mortality Rate (per 1000 Livebirths)	56.69	48.93
* Child Mortality Rate (per 1000 pop.)	24.33	18.78
* Maternal Mortality Rate (per 1000 livebirths)	2.09	1.80
* Life Expectancy (in year)		
* Male	62.20	63.58
* Female	67.45	68.83

Source: National Statistical Coordination Board

**MORBIDITY : TEN (10) LEADING CAUSES**

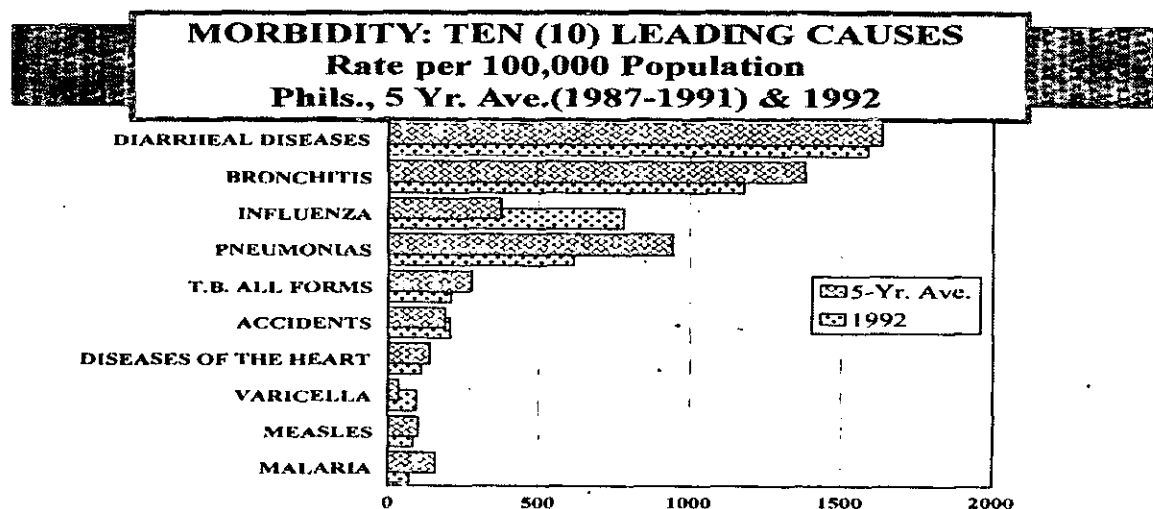
No. & Rate/100,000 Pop.

PHILIPPINES

5-YEAR AVERAGE (1987-1991) & 1992

CAUSE	5-Year Average (1987-1991)		1992	
	NUMBER	RATE	NUMBER	RATE
1. Diarrheal Diseases	986,474	1634.1	1,037,121	1587.3
2. Bronchitis	833,611	1380.9	770,396	1179.1
3. Influenza	570,610	373.9	510,190	780.8
4. Pneumonias	225,712	945.2	401,025	613.8
5. Tuberculosis All Forms	166,621	276.0	136,981	209.6
6. Accidents	114,449	189.6	135,247	207.0
7. Diseases of the Heart	82,293	136.3	71,027	108.7
8. Varicella	21,215	35.1	62,327	95.4
9. Measles	59,861	99.2	54,570	83.5
10. Malaria	95,543	158.3	46,614	71.3

Source: Philippine Health Statistics, 1992



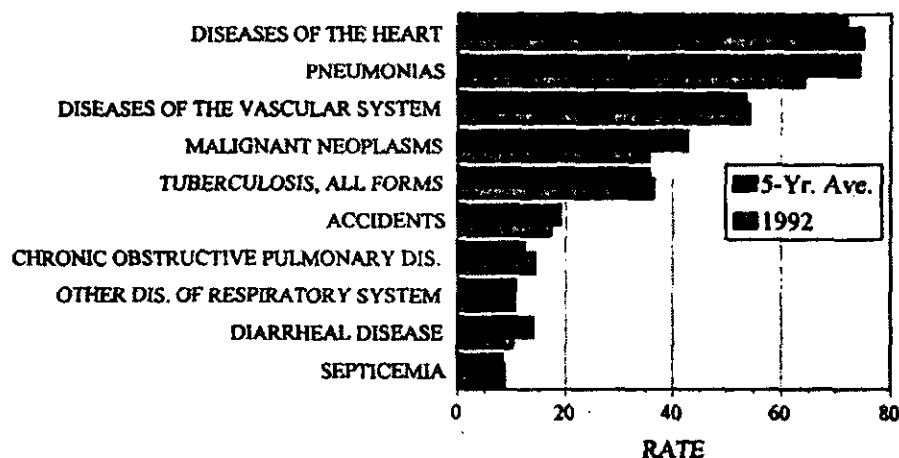
**MORTALITY: TEN (10) LEADING CAUSES**  
**No. & Rate/100,000 Pop.**  
**PHILIPPINES**  
**5-YEAR AVERAGE (1987-1991) & 1992**

CAUSE	5-Year Average (1987-1991)			1992		
	NUMBER	RATE	% OF TOTAL DEATHS	NUMBER	RATE	% OF TOTAL DEATHS
1. Diseases of the Heart	43,383	71.9	13.6	49,022	75.0	15.3
2. Pneumonias	44,871	74.3	14.0	42,074	64.4	13.2
3. Diseases of the Vascular System	32,363	53.6	10.1	35,414	54.2	11.1
4. Malignant Neoplasms	21,609	35.8	6.8	23,946	36.6	7.5
5. Tuberculosis, All Forms	25,828	42.8	8.1	23,356	35.7	7.3
6. Accidents	11,560	19.1	3.6	11,292	17.3	3.5
7. Chronic Obstructive Pulmonary Diseases and Allied Conditions	7,521	12.5	2.4	9,391	14.4	2.9
8. Other Diseases of the Respiratory system	6,511	10.8	2.0	6,973	10.7	2.2
9. Diarrheal Diseases	8,443	14.0	2.6	6,742	10.3	2.1
10. Septicemia	5,160	8.5	1.6	5,774	8.8	1.8

Source : Philippine Health Statistics, 1992

**MORTALITY: TEN (10) LEADING CAUSES**

Rate per 100,000 Population  
 Phils., 5-Yr. Ave.(1987-1991) & 1992



# HEALTH RESOURCES

## MANPOWER

A total of 24,776 comprised the DOH personnel complement in 1995. Of these, 2,540 are from the central office

## FACILITIES

There are 1,702 hospitals with 84,482 beds. Of these, 48 are DOH retained with 20,730 beds, 1,111 are licensed private hospitals with 37,571 beds; 504 are devolved/LGUs with 19,495 beds and 39 belong to other government agencies with 6,686 beds.

The following are the DOH-retained hospitals as to classification:

### Specialty Hospitals - 5

National Kidney and Transplant Institute  
Lung Center of the Philippines  
Philippine Children's Medical Center  
Philippine Heart Center  
St. Anthony Mother and Child Hospital

### Special Hospitals - 5

Dr. Jose Fabella Memorial Hospital  
San Lazaro Hospital  
Philippine Orthopedic Center  
National Children's Hospital  
National Center for Mental Health

There are also 2 research hospitals; 16 medical centers; 3 district hospitals; 9 regional hospitals and 8 sanatoria which are also distributed nationwide

During the year there are 2,335 Rural Health Units-Main Health Centers and 11,646 Barangay Health Stations-Barangay Health Centers.

## DISTRIBUTION OF RHU-MHC & BHS-BHC by Region, Philippines 1995

Region	RHU-MHC	BHS-BHC
1	147	819
2	98	544
3	252	1,206
4	292	1,486
5	129	742
6	144	1,277
7	155	1,099
8	159	718
9	99	615
10	80	526
11	94	793
12	54	524
NCR	366	2
CAR	96	516
ARMM	90	352
CARAGA	80	427
<b>PHILS.</b>	<b>2335</b>	<b>11646</b>

### Legend:

RHU-MHC - Rural Health Unit-Main Health Center  
BHS-BHC - Barangay Health Station-Barangay Health Ctr.

Source: Management Advisory Service

**DISTRIBUTION OF HOSPITALS  
BY REGION, PHILIPPINES  
1995**

REGION	DOH RETAINED		PRIVATE		DEVOLVED/ LGUs*		OTHER GOV'T. AGENCIES*		TOTAL	
	HOSP.	BED	HOSP.	BED	HOSP.	BED	HOSP.	BED	HOSP.	BED
1	2	400	73	1,600	32	1,425			107	3,515
2	2	600	41	691	33	1,098	1	50	77	2,439
3	2	1,150	114	2,450	38	2,064	5	337	159	6,001
4	2	850	156	4,515	85	2,948	6	370	249	8,683
5	2	700	91	1,822	46	1,531			139	4,053
6	3	1,100	30	1,989	45	1,440	2	175	80	4,704
7	4	1,150	50	2,586	38	1,430	3	135	95	5,301
8	2	275	26	664	44	1,785	2	35	74	2,759
9	3	820	51	1,029	37	1,140	3	221	94	3,210
10	1	300	73	1,851	15	626	2	125	91	2,902
11	2	800	145	4,513	22	685			169	5,998
12	2	450	83	2,088	16	620	2	80	103	3,238
NCR	20	11,735	126	10,340	11	993	12	5108	169	28,176
CAR	1	400	28	790	26	950	1	50	56	2,190
CARAGA			24	553	16	760			40	1,313
PHILS.	48	20,730	1,111	37,571	504	19,495	39	6,686	1,702	84,482

Note: \* Licensed only

Sources: HOMs - DOH  
BLR - DOH

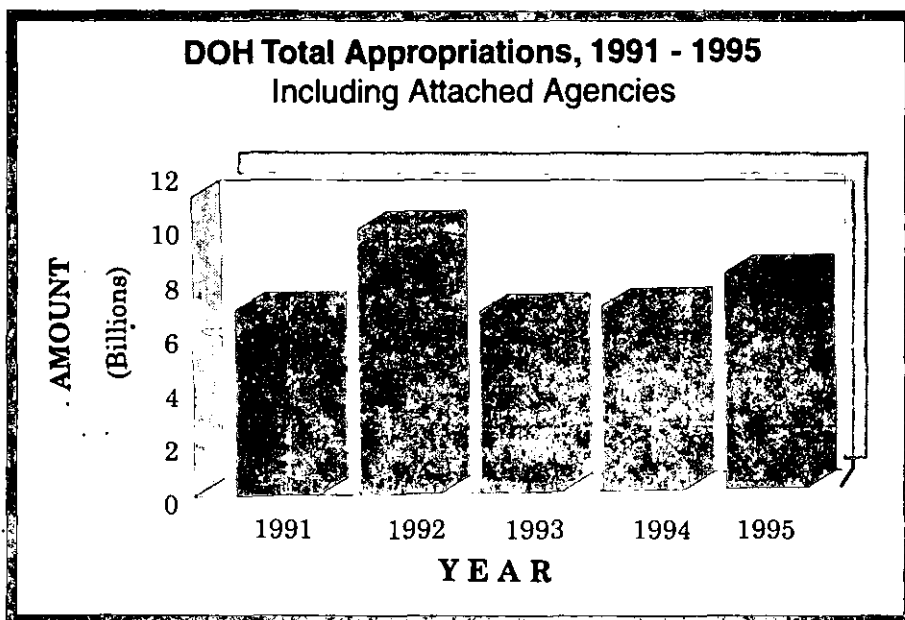
# FINANCIAL

In 1995, DOH had a total appropriation of P8,647,889,000 including P113,813,000 for attached agencies shared by Dangerous Drugs Board and Philippine medical Care Commission. This appropriation is 16.58% higher than in 1994 representing 17.07% of the social sector budget, 2.23% of national budget, and just 0.45% of Gross National Product (GNP) of the same year at current prices. The Department ranked fifth among other government agencies (same as in previous year) in terms of its share of national budget.

By expenditure class, the bulk (42.26%) went into maintenance and other operating expenses (MOOE) and the rest went into personal services (33.75%) and capital outlay (23.99%). Ranking of expenditure class was the same as that of the previous year except that there was a minor re-allocation of resources from MOOE to Capital Outlay.

The 1995 appropriation can only finance an average of P123.00 for each Filipino. But since the 1995 real total appropriation was estimated to be only P3,791,603.00 due to accumulated reduction of purchasing power caused by general price increases (inflation) based on 1985 constant prices, the real per person budget was only P54.00 for each Filipino. However, all indicators used showed improvements compared to last year except in MOOE and percent relative to national budget. The 16.58% increase in 1995 appropriation contained more than enough to finance inflation and population growth of the same year.

In terms of sources, the bulk (92.74%) came from the government of the Philippines (GOP) and the rest from foreign assistance (loan proceeds) like 6.31% from the International Development Association (IDA), 0.74% from the International Bank for Reconstruction and Development (IBRD), and 0.21% from the Asian Development Bank (ADB).



**DEPARTMENT OF HEALTH APPROPRIATIONS, 1991-1995  
(INCLUDING ATTACHED AGENCIES) \***

As of February 20, 1996

1995 PARTICULAR	1991		1992		1993		1994			
<b>BREAKDOWN BY EXPENSE CLASS (In thousands Pesos)</b>										
A. Personal Services	2,999,296	40.18	5,125,756	48.23	2,256,864	31.07	2,313,894	31.19	2,918,431	33.75
B. MOOE	4,146,476	55.54	5,061,960	47.63	4,180,185	57.56	3,725,994	50.23	3,654,946	42.26
C. CO	319,392	4.28	440,528	4.14	825,780	11.37	1,378,345	18.58	2,074,512	23.99
<b>TOTAL</b>	<b>7,465,164</b>	<b>100.00</b>	<b>10,628,244</b>	<b>100.00</b>	<b>7,262,829</b>	<b>100.00</b>	<b>7,418,233</b>	<b>100.00</b>	<b>8,647,889</b>	<b>100.00</b>
% Growth Rate		-2.50		42.70		-31.70		2.14		16.58
Rank Compared To Other Gov't. Agencies	(5th)		(5th)		(6th)		(5th)		(5th)	
REAL TOTAL APPROP. (in thousand Pesos at Constant 1985 Prices)	4,271,666		5,641,917		3,623,804		3,366,721		3,791,603	
%Relative to Social Sector Budget**		20.82		23.09		17.01		15.48		17.07
%Relative to National Budget		4.49		5.46		2.35		2.30		2.23
%Relative to GNP (Current prices)		0.59		0.78		0.48		0.42		0.45
Nominal Per Capita Budget (P)	118		164		110		108		123	
Real Per Capita Budget (P) at Constant 1985 Prices	68		87		55		49		54	

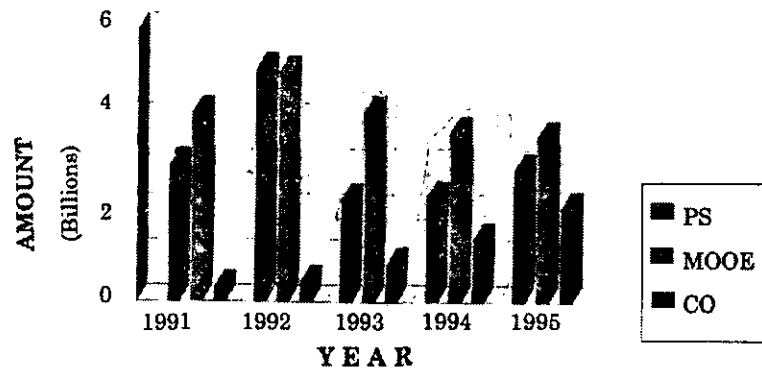
\* Total Appropriations of all DOH attached agencies ranged only from P86-400 million with an average of P248 million per year

\*\* Social Sector is composed of DOH, DECS, DSWD, and DOLE

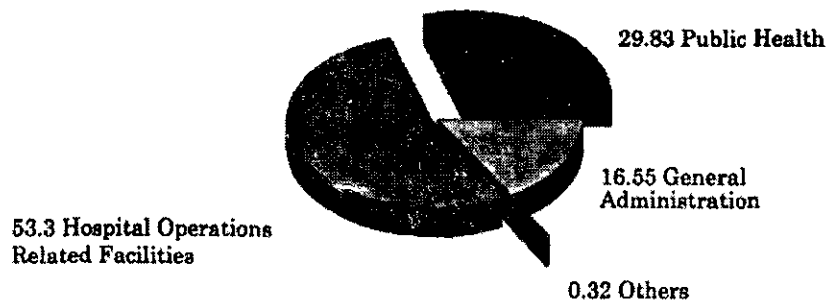
Sources :

General Appropriations Act (Several Years)  
National Statistical Coordination Board (NSCB)  
Executive Board Resolution No. 11-93  
NSCB Phil. Statistical Yearbook  
National Accounts of the Phil. (Several Years)  
Technical Committee Report on Population and Housing (Updated), Dec. 1994

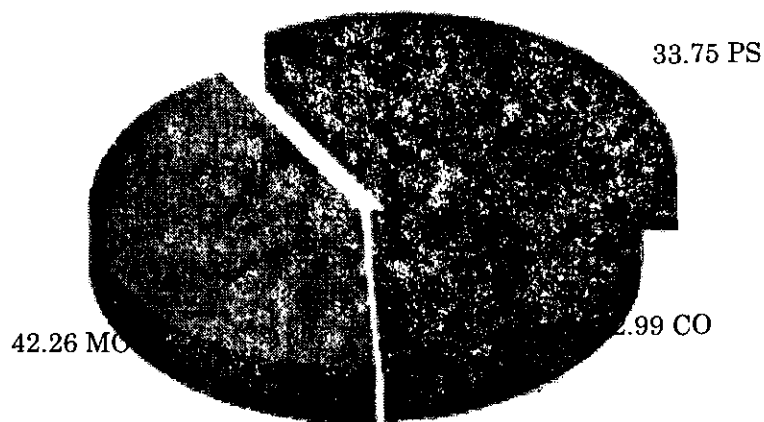
**Department of Health Appropriations By Expenditures Class, 1991-1995  
(Including Attached Agencies)**



**1995 DOH Appropriation by Major Purposes**

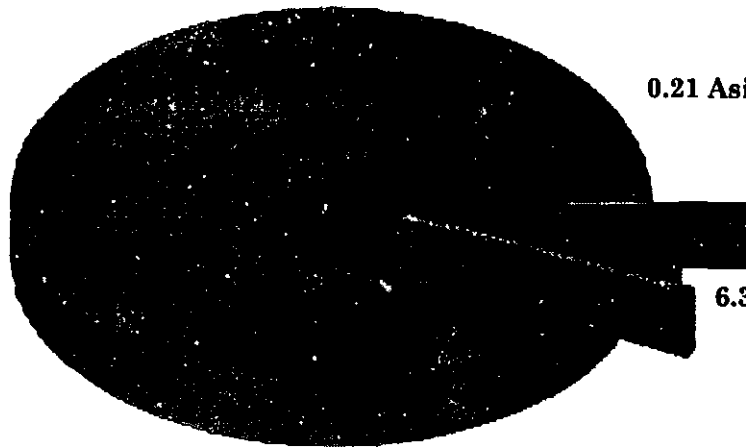


**1995 DOH Appropriation by Expenditure Class  
(PS, MOOE, CO)**



### 1995 DOH Appropriation by Sources

92.74 Gov't. of the Phils.

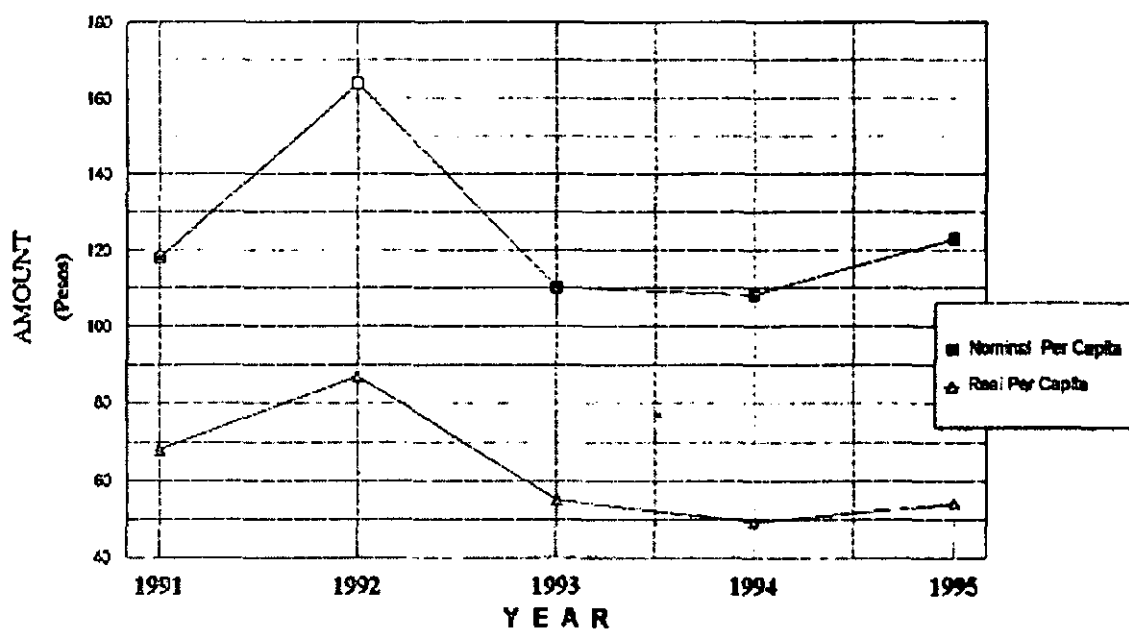


0.21 Asian Development Bank

6.31 Int'l. Dev't. Association

0.74 Int'l. Bank for Reconstruction & Dev't.

### Trend of Nominal & Real Per Capita (Per Person) Budget 1991 - 1995





DOH



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