



ANNUAL REPORT 1996



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DEPARTMENT OF HEALTH

Table of Contents	Page
Message -----	i
Accomplishment Report	
• Office of the Chief of Staff -----	1
• Office of Management Services -----	10
• Office of Public Health Services -----	16
• Office for Health Facilities, Standards and Regulation -----	26
• Hospitals -----	34
• Regional Health Offices -----	46
Health Facts -----	53
Health Resources -----	58
Editorial Staff	

M essage

It is with distinct pleasure that I present the accomplishment report of the Department of Health (DOH) for 1996. On its 5th year of operation under devolution, the DOH has continued to exert its leadership in health in a set-up where the provision of health services has

organization, as it was confronted by the emergence of disease and health related problems such as dengue, hepatitis and cholera, and the upsurge of the red tide poisoning. With a determined effort, it made its victorious way through in battling these problems, hand in hand with overcoming the threat to its image, and thus, redeeming the respect it once enjoyed.



This report gives a glimpse of how the Department, moved by its vision of *"Health and productive individuals and families"*, had strive to go beyond the attainment of good health by translating its mission of "universal access to quality health service" into action. With due respect and recognition, I also take this opportunity to acknowledge the valuable contributions of our partners in health - the local government units, international organizations, non-government organizations, private sectors, other government agencies and the communities, with whom we share the responsibility of realizing this vision.

been the major responsibility of the local government units.

The year 1996 had been marked by continuing challenges to the


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OFFICE OF THE CHIEF OF STAFF

Mandate:

The main functions of the Office of the Chief of Staff (OCS) include the following : a) Administrative support and supervision of the OCS Services/Programs/Projects and the different offices in the DOH; b) Coordination and collaboration with international and local organizations; and c) Liaison activities with other sectors, both government and non-government

inspection of JICA Grant-Aide Project equipment upgrading of provincial hospitals in 21 hospitals.

- * Conducted a consultative meeting on the FACS institutional strengthening to identify all FAPs in DOH and increase awareness of the program managers on the mandate and role of FACS.
- * Revised Administrative Order No. 16 - Guidelines on Fellowship and Scholarship Grants.

FOREIGN ASSISTANCE COORDINATING SERVICES (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:

- * Processed and facilitated the following:
 - > 678 (100%) of Fellowship and other foreign travels;
 - > 19 (100%) medical missions;
 - > 60 (100%) foreign donation;
- * Updated all the database of Foreign Assisted Projects (FAPs), fellowship, foreign donation, medical mission and WHO outstanding local cost advance.
- * Facilitated Project Coordination of WHO Collaborative Program of Health:
 - > 150 (100%) Request for implementation of activities;
 - > 22 Liquidation of WHO outstanding local cost advances;
 - > 22 (100%) Request for reprogramming;
 - > 20 (100%) WHO request for report/data;
- * Conducted post project evaluation and ocular



Mandate:

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

Accomplishments:

- Presented the National Health Plan to the Social Development Council - Cabinet Level and was launched the same during the 2nd National Health Assembly on August 15-16, 1996.
- Conducted series of writeshops on the finalization of 1997 operational plan and budget proposal for the central office in several batches. The 1998 Planning Guidelines was updated and pilot-tested in regions 2 and 5 in coordination with the Office for Management Service and other Offices concerned.
- Prepared and consolidated the following documents:

Ten-Year Mindanao Health Development Plan;
Three-Year Development Plan for the Zones of Peace and Development (ZOPAD);
Programs and projects for displaced Moro National



Liberation Front (MNLF) for Southern Philippines Council for Peace and Development SPCPD/ ZOPAD areas;

- Undertook, through the Health Finance Development Project (HFDP), priority activities to support the implementation of Public Investment:

- > Training courses related to project development for selected technical staff of the Central and Regional Field Offices;
- > Funding and technical assistance and inter-intra agency meetings both at the Central Office and Regional Field Offices;
- > Advocacy meetings pertaining to the service coordinative function in the implementation of the Ten-Year Public Investment Plan for the Health Sector (1994-2004);
- > Two (2) project designs to improve the existing planning, monitoring and evaluation system in the DOH. Additional supplies and materials, equipment, furnitures and fixtures were procured to support public investment activities;
- > Nine (9) volumes of documentary reports to the Health Policy Development Program prepared;
- > 1996-1998 Public Investment List Updated;
- > Adoption of database design for DOH foreign-assisted projects.

- Prepared reports on evaluation, monitoring and/or budgetary purpose such as the 1995 DOH Annual Report, Agency Performance Commitment and Accomplishment Report, 1996 Year-End Report and the Four-Year (1992-1996) Agency Accomplishment Report for the Presidents State of the Nation Address (SONA).
- Provided the Southeast Asia Medical Information Centre (SEAMIC) an update of 1995 and 1996 Philippine data on population, vital statistics, morbidity/mortality, resources, nutrition and socio-economic factors.
- Updated DOH program and project profiles in coordination with the various services, programs and projects at the Central Office to facilitate requests from the Department of Budget and Management, Congress and Senate for budget hearing purposes.
- Summarized reports of the weekly situationer briefs submitted by different Regional Health Offices.

- Facilitated and documented the conduct of the 1995 End-of-Year and 1996 1st Quarter and Semester Performance reviews of the Central Office programs and services.
- Conducted monitoring visits in four (4) Regional Field Offices and their respective retained hospitals to: a) analyze physical performance and budget utilization for 1995 End-of-Year and 1996 1st Semester and 3rd Quarter Report. b) assess the status of compliance and implementation of the recommendations made during the past performance and budget utilization review. c) identify the breakdown of resources provided by the Central Office and the Regional Health Office to the retained hospitals and LGUs and assess how resources were managed.
- Spearheaded the conduct of focus group discussions among selected DOH officials and personnel. Various committees were created to review existing monitoring tools and indicators, systems, structure, policies, etc. The expected outcome of this undertaking is an integrated DOH program monitoring system.
- In September 1996, Administrative Order No. 31-B entitled "Establishment of Improved Procedures and System for a Synchronized DOH Planning and Budget Process" was issued to synchronize and closely link planning and budget process in order to ensure that the priority programs and activities in the operational plan will be properly and correspondingly translated into budgetary terms.



COMMUNITY HEALTH SERVICE (CHS)

Mandate:

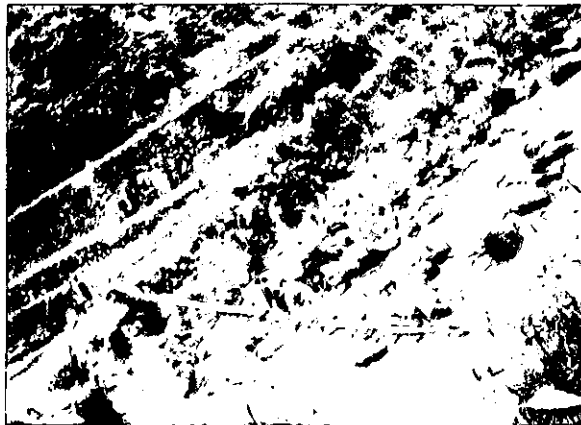
To provide services related to formulating plans and programs for coordinating with non-government organizations, peoples organizations, the local government units and the communities in health and health-related activities, programs and projects.

Accomplishments:

- Formulated the policies and guidelines on Doctors to the Barrios (DTTB) Program; Barangay Health Workers (BHW) Program; Botika ng Barangay (BnB); Health Development Program (HDP) Fund; Poverty Alleviation Fund (PAF); National Primary Health Care (PHC) Fund; Implementing Rules and Regulations for the Barangay Health Workers Incentive Act (RA 7883); and PHC policy on Community Health Development;
- Conducted two (2) batches of Integrated Program Resource Planning Workshops with sub-national officers and staff for the Social Reform Agenda (SRA);
- Supported the initial and/or continuing education of its partners such as the DTTB participants, BHW Federations, Regional Coordinators for CHS programs and projects, DOH representatives to the LGUs, Local Chief Executives and NGO project proponents. Twelve (12) DTTB graduates were accepted under the Residency Training Program of training hospitals;
- Supported basic sectors as the indigenous people, disadvantaged children, youth and women in communities within the Club 20 and Devolution Financially-Burdened (DFB) provinces to set up and sustain health promotion projects developing and/or enhancing their knowledge and skills in planning, implementing and monitoring community-based health development systems;
- Supported specialty hospitals and selected medical

centers through the Primary Health Care Fund in the implementation of the Peoples' Health Day.

- Managed the recruitment and deployment processes of 25 physicians to doctorless areas under the DTTB Program and 347 youth workers for the Health Outreach Program of the KABATAAN 2000 - Presidents' Youth Work Program. Thirty-five (35) youths were recruited under the Year-round scheme of the program;
- Distributed documents and monographs to make different partners at the sub-national levels aware and equipped to initiate and promote national programs and projects. These materials are: 1) SRA modules and major policy directions; 2) Policy on PHC for Community Health Development; 3) Community Databoard Guidebook; 4) Health Work is Team Work; 5) IRR for BHW Incentive Act (RA 7883); 6) Manual on Strategies to Fight Poverty; and 7) Manual on Basic Needs (MBN) Primer;
- Conducted in collaboration with the New Tropical Medicine Foundation, Inc., social mobilization activities for DTTB Program such as 1) Donors' Meeting
2) Premier film exhibit of MULANAY (Sa Pusod ng Paraiso) in Makati, LA, California and Las Vegas, Nevada, USA;
- Facilitated the accreditation of six (6) NGOs
- Monitored and evaluated program and projects through the conduct of the following activities:
 - 1) Monitoring of twenty-five (25) DTTB volunteers;
 - 2) DTTB Program Implementation review; 3) Integrated field monitoring of CHS projects in twelve (12) regions;
- Initiated the integration of the Community Health Development framework and experience in its intra/inter-sectoral involvement in the: People Empowerment Pillar of the National Drug Program and RITM - Agusan del Sur Malaria Control Project.
- Provided considerable technical inputs in the decision taken by the Catholic Relief Services (CRS) to shift from its relief orientation to the community health development paradigm in its program implementation.



- Acted as Secretariat for the Department Secretary as CORD for CARAGA (then a newly-created Region) during the period of January-April 1996: - Spearheaded consultative meetings and planning workshops among the different national government agencies converging in CARAGA; - Facilitated the following activities 1) approval of the initial five (5) staff positions in the Regional Field Office; 2) Approval and release of the PS and MOOE budget for 1996 of the different line agencies in CARAGA. 3) active involvement of DOH in the Anti-Poverty Summit held at PICC in March 1996 as CORD for CARAGA;

- Logistics support to 15,000 reporting units,
- Development of a Modified FHSIS software, nationwide implementation of the Modified FHSIS,
- Conducted a survey on current health concerns and issues,
- Conducted training on Modified FHSIS software, Epi-info and Epi-map for Regional Health Office and LGU personnel;
- Published and disseminated the following information materials:

1,000 copies of 1992 Philippine Health Statistics,
350 copies of 1993 Philippine Health Statistics,
350 copies of 1994 Philippine Health Statistics,
350 copies of 1995 Philippine Health Statistics,
12 issues of HIS Updates;

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.



- Participated in a workshop during the National Statistics Month celebration.
- Conducted Staff Development Training for its 20 personnel;
- Spearheaded the strengthening of Notifiable Disease Reporting;
- Developed the data and

information retrieval system for hospitals. This system (Hospital Statistics Retrieval System) was piloted in one (1) region.

Accomplishments:

- Conducted the following workshops and inter-agency meetings:
 - National Consultative Workshop on Field Health Service Information System (FHSIS)
 - HIS Operational Planning Workshop
 - Conducted inter-agency meetings;
- Spearheaded the development of the National Health Information Master Plan;
- Provided the following technical and resource assistance to the different LGUs for the implementation of the Modified FHSIS:

FINANCIAL OPERATIONS AND FRONTLINE SERVICE 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:

- Audited twenty-five (25) agencies and facilities under the DOH;
- Conducted six (6) fact-finding investigations of reported complaints against DOH personnel;
- Evaluated thirty-nine (39) Procurement Monitoring Reports as well as nineteen (19) Progress Reports on the implementation of audit recommendations;
- Validated two (2) Inventory Reports of equipment submitted by field health agencies;
- Acted on twenty-seven (27) referrals/requests from agencies and offices under the DOH;
- Provided advisory services and technical assistance to DOH management, offices, programs and projects.

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:

- Developed, produced and distributed IEC materials of twenty (20) health programs;
- Developed, produced and distributed 45,000 copies of Family Health Guide;
- Monitored the IEC implementation of the twenty-two (22) health programs;
- Assisted in the organization of regional Philippine Health Promotion Program (PHPP) technical working groups;
- Trained twenty-nine (29) Health Education Promotion Officers (HEPOs) on Basic Training Course for HEPOs;
- Conducted three (3) area conference to orient the participants and develop their action plans for PHPP;
- Conducted health seminars for Sanden employees in Makati;
- Conducted PIHES National Consultative Workshop;
- Mobilized fifteen (15) companies, civic organization and other groups for assistance in the

implementation of various health programs;

- Established linkages with seventeen (17) government agencies, seven (7) private firms, six (6) NGOs/POs and twenty (20) local chief executives;
- Monitored the utilization of IEC materials produced in all regions;
- Attended to inquiries from students and researchers about the different health programs and projects of the Department;
- Produced and placed in media outlets twelve (12) 30-second commercials for 60 radio stations and eleven (11) 30-second commercials for 7 TV stations;
- Facilitated twenty-one (21) guestings in radio and thirty (30) guesting on TV of the Secretary of Health and other health officials;
- Developed and disseminated 58 press releases, 50 photo releases and 100 photo and video releases;
- Organized 36 press conferences, 42 press briefings, 100 photo and video coverages;
- Monitored and analyzed health articles in fifteen (15) daily newspapers;
- Published and disseminated three (3) bimonthly issues of the HealthBeat Magazine;
- Conceptualized, produced and disseminated five (5) video-visual productions of 3-15 minutes, four (4) MTVs and replicated 770 copies of the AV productions;



- Started implementation phase of the Multi-media Centre (MMC) project;
- Provided technical assistance through the development of communication plans, conceptualization of health messages and development and dissemination of the Health Advisory on the different diseases;
- Trained nine (9) MMC staff on multi-media skills development in Boston, Massachusetts;
- Trained thirteen (13) Central Office Information Officers and Public Relations Officers and ten (10) Regional Information Officers on basic skills



LOCAL GOVERNMENT ASSISTANCE AND MONITORING SERVICE (LGAMS)

Mandate:

To ensure that LGUs acquire and maintain capacity to finance and direct health service delivery in cooperation with other health service providers.

Accomplishments:

- Continued the implementation of the Comprehensive Health Care Agreement (CHCA) for 1996. Of the 154 Local Government Units concerned directly with CHCA, about 35% have signed the CHCA. Regions 1 and CARAGA have 100% signed CHCA while the National Capital Region and Region 8 closely followed with 88% and 73% accomplishment.
- The Department of Health, Department of Budget and Management and the Department of Interior and Local Government have recently signed a joint memorandum circular outlining the payment of Magna Carta benefits to devolved health workers.



All the regions have their own fully functional Regional Technical Action Teams (RTAT) and Provincial Technical Action Teams (PTAT)

Likewise, Provincial Health Teams (PHT) were also organized from among the DOH representatives of the local health boards to serve as a consultative body on DOH programs in the provinces. However, these teams need the full support of the central office and the regions in terms of monitoring, since some services go directly to the LGUs without notifying the DOH representative of the LGU. The DOH representatives would like to have advance notification of their schedule of visits or monitoring to enable them to prepare any report

which the visitor will need

- Consolidated the 1997 CHCA package of the different services, programs and projects to be sent to the regions for negotiation;
- Conducted three (3) Consultative meetings for the Regional LGAMS Coordinators and DOH-LHB Representatives League;
- Provided planning assistance to several LGUs;
- Developed a CHCA monitoring system for Central Office, Regions and Provincial Health Teams;
- Conducted three (3) pre-health assemblies - Luzon, Visayas and Mindanao in preparation for the 2nd National Health Assembly;
- Provided technical and administrative support during the 2nd National Health Assembly held last August 1996 in Philippine Village Hotel;
- Published and disseminated the Proceedings of the 2nd National Health Assembly;
- Conducted a research on Assessment of the Devolved Health System in the Philippines;
- Continued the Gems and Jewels Project and published a book on the Gems and Jewels of Devolution entitled Devolution Matters;
- Revised and published the Health Services and Local Autonomy (Health Guidebook and Local Government Code combined);
- Conducted the Training Program on Health in the Hands of the People (Social Mobilization) for DOH representatives to the Local Health Boards, Regional Technical and Training personnel (11 batches);
- Conducted the Advanced Management Training Course under a Decentralized Health System for DOH and LGU personnel in cooperation with University of the Philippines Centre for Policy Development;
- Provided support for Regional and Provincial LGAMS operations;
- Published six (6) issues of Bulletin on Devolution;
- Conducted fourteen (14) Regional/LGU consultations.



ESSENTIAL NATIONAL HEALTH RESEARCH PROGRAM (ENHR)

Mandate :

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

Accomplishments:

- * A total of seventeen (17) research projects amounting P9.3M were funded by ENHR . On the other hand twelve (12) research have been conducted at the central office during the year. The other accomplishments are as follows:
- Celebration of the Research Consciousness Week on the 2nd week of April with the theme "Problemang Pangkalusugan: TUKLAS LUNASAN"
- Conducted a monthly research fora for presentation and dissemination of research results;
- Published and disseminated quarterly issues of: TUKLAS LUNAS Executive Briefs, and TUKLAS LUNAS Newsletter;
- Conducted training for DOH Central Office, Regional and Hospital Staff (75% of 193 personnel trained from Regional Offices and Retained Hospital);
- Completed eight (8) and continued conducting fifteen (15) research projects from previous years,
- Approved sixteen (16) for funding and implementation
- Disapproved five (5) (duplicative and unresponsive)
- Reviewed and processed eleven (11) projects
- Planned, coordinated and monitored activities as the Asia ENHR Focal Point for two (2) years beginning in August 1996 (turnover ceremonies and regional meeting held on July 31-August 2, 1996 at the Bayview Hotel)
- Conducted consultation meeting with selected government agencies and the research community on cost-informative research initiatives,

particularly on a multi-country study proposal by the International Development Research Centre (IDRC, Canada). The output is a research proposal for a feasibility study in the Philippines to be done by a group of researchers from the academe, NGOs and DOH;

- Completed the monograph ENHR in the Philippines: The First Years (1991-1996) for publication (to come out in April 1997 in time for the Health Research Consciousness Week celebration);

Disseminated color-coded ENHR Program Papers for more focused program promotion and continuing education and for funnelling research outputs to policy makers:

- ENHR Program Updates (yellow),
- ENHR Continuing Education capsules (green),
- ENHR Program Leads (pink),
- ENHR Policy Pointers (blue) - to start in 1997,
- ENHR Research Samplers (white) - to start in 1997;

- Produced special

advocacy materials in the form of ENHR program folder with pocket and 1997 ENHR Program desk calendar;

- Spearheaded the National Consensus Workshop to formulate a Health Research Agenda for 1996-2000;
- Distributed questionnaire to survey the priority concerns of DOH Offices, Services and Programs for 1997 and to validate the result of the consensus workshop;
- Developed a Manual of Operations for the ENHR Program for improved transparency, consistency and effectiveness (to be completed in April 1997);
- Developed infoware, including procurement of computer hardware and database software, acquisition of research and statistical publications from WHO and training of human resources for more effective information management;
- Conducted field monitoring of on-going research projects.



NATIONAL MENTAL HEALTH PROGRAM (NMHP)

Mandate:

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

Accomplishments:

- Drafted Mental Health Bill for Congressional Hearing on the Psychological Incapacity as a basis for Annulment of Marriage;
- Trained 245 LGU health personnel in Identification and Management of Psychosocial Problems and Specific Psychiatric Morbidities;
- Provided Psychotropic Medications provided to 75 municipalities/cities in 29 provinces;
- Initiated Lusog-Isip Celebration: Theme - "Mental Health and Stress in the Workplace" nationwide celebration in Regional Health Offices and Hospitals/ Medical Centers;
- Conducted Stress Management/Team Enhancement Workshops, in regional health offices and hospitals;
- Integrated mental health to the following programs: Women's Desk, STOP DEATH, HCWP, TradMed Program, HPDS, DTTB Program
- Collaborated with the following agencies in promotion of mental health: Quezon City Health, Cubao-Kamias Rotary Club, Philippine National Red Cross (PNRC), Subic Bay Metropolitan Authority (SBMA), Civil Service Commission (CSC) Region III
- Developed standards for mental health facilities;
- Conducted 6 research proposals on project evaluation of the projects of the Mental Health Program;
- Trained 245 LGU personnel in Mental Health in Primary Health Care (PHC); trained 118 personnel in psychosocial care in Disaster Management;
- Conducted annual and mid-year program reviews and field monitoring in Region VI;
- Conducted debriefing on victims of the Cholera Outbreak in Baganga, Davao Or., MS Gretchen Tragedy in Bantayan Island in Cebu, Ozone Disco Tragedy, Robbing Incident, Tondo Medical Center;
- Conducted trainings on Mental Health in Hospitals
- Conducted operation of Acute Psychiatric Units in collaboration with NCMH in selected DOH Hospitals



TRADITIONAL MEDICINE UNIT (TMU)

Mandate:

To develop, establish and utilize Traditional Medicine in the Philippines

Accomplishments:

- Conducted a writeshop in the policy formulation on the Standard Operations of the four (4) government Herbal Pharmaceutical Processing Plants
- Spearheaded the Scientific Forum and Exhibits on Herbal Medicine held in Manila and Davao Herbal Pharmaceutical and Processing Plant
- Conducted several marketing activities
- Conducted training and advocacy on the scientific and rational use of Herbal Medicines
- Established Provincial Herbal Gardens
- Developed IEC materials and distributed to the local government units
- Conducted a nationwide training in Acupuncture and Tuina for a total of 120 government physicians, nurses and other health workers
- Facilitated the establishment of acupuncture clinics in the regional and provincial hospitals
- Conducted field monitoring
- Conducted over-all coordination, direction-setting and planning of the different concerns of the program
- Spearheaded the advocacy and legislative compliance on the Bill on Traditional Medicine



HEALTH AND MANAGEMENT INFORMATION SYSTEM PROGRAM (HAMIS)

Mandate:

To develop measures so that information and knowledge are utilized for a more efficient, effective and equity-oriented health management system.

Accomplishments:

- Operationalized Regional Information Center for Health for DIRFO 10 Regional Information Center for Health (RICH 10) and DIRFO XI Wide Information Network for Health (WIN HEALTH 11)
- Operationalized software refinement, installation and training for the different HAMIS tools and replicated Logistics Management Information System (MARAMAG) in seven (7) Regional Health Offices
- Operationalized BROWNIES in six (6) provinces and four (4) cities namely: Bukidnon, Surigao del Norte, Agusan del Norte, Misamis Oriental, Quezon and Cavite and Surigao City, Butuan City, Lucena City and Cavite City
- Operationalized the Health Sectoral Analysis on Hospital Morbidity and Mortality
- Assisted seventy-seven (77) government and other service hospitals in replicating HAMIS hospital information system
- Operationalized Monthly Quality Assurance Conference in Provincial Health Offices and Hospitals in Quezon and quarterly QuA conferences in Mindanao
- Strengthened partnership and linkages with Quality Assurance Program of the Task Force for Health Systems Research of UP College of Public Health
- Conducted workshops and conferences between and among the DOH and the Federation of HAMIS Winners in the Philippines - three (3) conventions, one (1) planning workshop and monthly conferences to develop community training curricula
- Operationalized HAMIS Academy
- Launched 3rd HAMIS Contest in November 30, 1996

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 :

- Set-up and operationalized FAMUS Pharmacies and satellite in Lucena City and Cavite City
- Conducted on-going Studies on Community Compliance and impact of antibiotics and developing health insurance for commercial sex workers.
- Developed and tested in strategies on Community Information System for Social Health Insurance
- Computerized Logistics Management Information developed by HAMIS and adapted by the FAMUS Pharmacies
- Extended Community Credits and loans to BHWs
- Conceptualized WHENs DAY MOVEMENT: Women for Health, Environment and National Development
- Conducted Community Health Contests on Databoards Botika Binhis
- Set-up and supported Family Planning Demonstration Center in Lucena City, Cavite City, Imus and GMA, Cavite
- Conducted Surgical Sterilization in Cavite City and Rosario, Cavite in partnership with Marie Stopes Clinic



The Office of Management Services (OMS) discharged its regular functions including, among others, provision of: a) supervision and control services over its now six (6) services and units, b) internal management and coordination services, and c) support services to the Office of the Secretary.

Specific highlights of accomplishments of its services and units are the following:

1. Office of Management Services - Proper

- * Initiated the following improvements:
 - a) Personal Information System (PIS) Networking
 - b) Financial Management System
 - c) Document Archiving
 - d) Review of Issuances, Policy Surveillance / Monitoring System
 - e) Operationalization of DOH Modified Procurement System (MPS)
- * Human Resource Improvement and Training on:
 - a) Computer - based APP
 - b) Supplies Inventory System
 - c) Procurement and Distribution System Research in some Southeast Asian countries in cooperation with SEAMIC
 - e) Legislative works and legislation
- * Actively participated and provided support to APEC, USAID, CCPAP, and to activities like Smokey Mountain, GOP / WB programming exercise, congressional hearings, and National Health Assembly.



- * Participated in the review and evaluation of the remaining old procurement transactions prior to the implementation of the Modified Procurement System.
- * Evaluated, processed, coordinated, and monitored Congressional Initiative projects and lump-sum for capital outlays of retained health facilities and offices.

- * Coordinated the continuous conduct of re-engineering activities.
- * Conducted systems analysis for streamlining and re-engineering of OMS and its services / units.

* Maintain external liaison works with DBM, COA, NEDA, House of Representatives, Senate, Office of the President, GSIS and internal management and coordination of all DOH offices, services, and units.

- * Provided assistance in the preparation of the DOH Annual Report and position papers specially those related to budget and finance.

2. Finance Service

Finance Service is primarily involved in the management of the Department of Health financial resources. In 1996, Finance Service accomplished the following:

- * Prepared required financial status reports as inputs to the preparation of CY 1998 budget proposals.



* Prepared and submitted the CY 1997 budget estimates of various functions, projects, and activities under DOH.

* Reviewed and recommended all requests for special budgets submitted by various offices or units.

* Assisted DOH management in the preparation of documents for CY 1997 during consultations between DOH and DBM.

* Prepared and submitted to DBM the FY 1996 Agency Budget Matrix and Financial Plan of various agencies/offices/units under the DOH.

* Sub-allotted funds to RHOs, special hospitals, medical centers and sanitarium for drugs and medicines, calamity funds, salaries and TEV's of field personnel, other personnel benefits, etc.

* Processed for payment and certified as to availability of funds, vouchers, payrolls, contract, purchased orders, job orders, and other requests.

* Maintain books of all accounts and their corresponding journals and ledgers.

* Administered all kinds of payments (such as salaries, personnel benefits, and others).

* Advised MANCOM and EXCECOM on the Department's monthly financial status.

* Prepared and submitted regularly to DBM the Summary List of Checks Issued (SLCI) to assure continued availability of cash.

* Provided monthly statement of balances of allotments to various services and programs under the DOH for them to effectively plan activities / projects.

* Conducted reconciliation workshops with RHOs, special hospital, medical centers and sanitarium for all sub-allotted funds in preparation for the closing of the books.

* Prepared and submitted monthly, quarterly and annual reports to COA, DBM and other higher authorities.

* Coordinated with the Technology and Livelihood Resource Center (TLRC) on the on-going study of the DOH Financial Management Information System.

* Collected / accepted payments for all miscellaneous fees and deposited these to the servicing bank and Bureau of Treasury.

* Provided technical and management assistance to various service / program / project management units for FAP's under the DOH on the following:

a) Full utilization of their respective releases.

b) Budgeting, accounting and existing rules and regulations on fiscal management.

c) Preparation of fund utilization reports and

statement of expenditures of all special projects.



3. Administrative Service

The Administrative Service, through its three divisions, accomplished, and in some cases, exceeded its expected workload for calendar year 1996.

Prepared and processed 3,424 appointments, 8,230 leave applications and 416 administrative issuances.

Of the 12 protest cases filed, 6 cases had been rendered with decision and the rest were referred



to concerned offices and services for comment and / or appropriate action.

Processed 543 applications for separation from the service.

Acted upon 8,628 transactions pertaining to personal matters such as notice of salary adjustment, request for change of name / date of birth / marital status, report of entrance to duty and accreditation of services for retirement.

Undertook 404 repair jobs on facilities and 79 different equipment; worked on the much needed facelift of the DOH Marker in early December; and supervised the routine housekeeping of building premises and grounds.

245 corrective and preventive maintenance jobs were provided on the various vehicles of the department as well as the renewal of registration and issuance coverage of the same.

Circulated 1,724 different kinds of administrative issuances and sent 3,750 and 12,172 communications through messengerial and postal services, respectively.

An aggregate of 21,935 radio messages were received while 25,629 were relayed it. From former hodgepodge of former direct lines, telephone numbers of existing trunklines of then Private Branch Exchange (PBAX) system were rationalized into a sequential series along with the installation of 10 additional lines.

Peace and order, as well as vehicular and pedestrian control was maintained .

Conducted 20,207 consultations of employees and their dependents.

Fifty (50) female employees were given PAP smear check-ups.

A total of 4,424 chest x-rays and ECGs were performed on various clients; and a great number of applicants for fellowship / scholarship and local employment were given medical and physical examination as well. Aside from the primary immunization services provided to babies and older children, 4,994 victims of dog bites were given necessary anti-rabies vaccines and tetanus toxoids if indicated. Various clinical laboratory services were likewise provided to considerable number of clients. Moreover, the M.E.D.I. started its project of providing annual medical/physical check-ups to DOH employees on their natal months.

With the assistance of the HPDS and HMDTS, conducted the 1st Orientation Seminar for the new DOH employees on December 9-10, 1996.

Supported the AIDS/STD program of the department by providing pre - and post - test counseling for HIV to a total of 565 clients.

Corroborated towards the success of several endeavors such as the 2nd National Health Assembly in August, the monthly national staff meeting and the annual Christmas Celebration in December.

Most notable of all, with this Division's effort, the Administrative Service had been commended for its invaluable support during the Asia Pacific Economic Cooperation (APEC) Summit in November.



DEPARTMENT OF HEALTH
SEMINAR-WORKSHOP ON PROCUREMENT & LOGISTICS
SERVICE PERFORMANCE SYSTEM & AO NO. 35
MAY 2 - 4, 1997

4. Procurement and Logistics Service

The Procurement and Logistics Service (PLS) has been in support to the various on going programs of the Department of Health by making available their supply and material needs. Procurement, warehousing

and distribution of commodities have been effectively made. Materials for use in the information campaign have been procured on time for launching activities.



PLS made significant events for CY 1996 because of its changes in leadership and improvement of the systems and procedures with the aim of effective and efficient management of its resources specially material management. The approval of Administrative Order No. 35 s. 1996 dated September 30, 1996 systematize the procurement activities of the DOH because the service has now an improved system in undertaking its functions. The computerization of the Annual Procurement Program (APP), through the help of the Management Advisory Service (MAS) expedited the early submission of requirements to the Department of Budget and Management (DBM). Through its new mission and vision, the service is in the process, again, of improving further its systems and procedures to respond more effectively to the needs of the DOH.

While being confronted with so many problems like late submission of APPs and RIVs by end-users, lack of warehousing facilities and equipment, difficulties due to budgetary and regulatory constraints, the PLS has modestly performed its mandated functions to undertake the procurement and proper / timely distribution of commodities to the different services / programs of the DOH through positioning for performance its existing manpower complement.

In summary, PLS significant accomplishments are the following:

- * Computerization of APP in cooperation with MAS
- * Early submission of requirements to DBM
- * Proper and timely distribution of commodities
- * Systematized rules and procedures for procurement, warehousing and distribution
- * Conducted Team Building
- * Provision of Human Resource Development to at least 80% of the staff
- * Timely submission of reports to the concerned offices

5. Management Advisory Service

The Management Advisory Service has been providing technical support in improving, strengthening and developing management and operational procedures and tools and in procuring, utilizing and maintaining information technology resources as a major component of systems improvement.

With the change of DOH administration in the second quarter of 1996, MAS led the review of the procurement system. A major product of MAS-facilitated consultation is the DOH Administrative Order No. 35, popularly known as the "Modified Procurement System" (MPS) which was implemented since July. Products of this review are several computerized systems, namely: the annual procurement plan, price monitoring, and fixed assets and supplies inventory. The annual procurement plan was one preparatory activity to the full implementation of AO No. 35 in 1996, where initial consolidation of the DOH annual commodity requirements is made.

The phase I of the Local Area Network (LAN) at the San Lazaro Compound with 117 workstations was installed in the last quarter. Simultaneously installed was the Document Tracking Retrieval System which transmit documents or other forms of communication electronically from one computer to another.

Other major activities undertaken by MAS are:

a. Systems Improvement

- * Personnel Information System - maintained and monitored 17 installations, conducted training for Central Office 30 Administrative Officers and at least 5 users from retained hospitals.
- * General Information System - built - up databases for DOH profile, officials directory, field health units directory; and provincial health database.



- * Financial Management System - conducted initial testing of regional system prototype; trained at least 10 payroll clerks of 3 retained hospitals for the installation of the computerized payroll system.
- * Barangay Health Workers Registration System - installed system nationwide at the RHOs.
- * Local Health Board Assessment Guide - conducted 2 training sessions and regional monitoring.
- * Field Health Service Information System - developed data entry module for modified system.
- * HOMS Hospital Statistical Report - developed data entry modules and selected reports for hospital statistical report.
- * Hospital Facilities Licensing System - conducted system testing in RHO 3 and 4

b. Information Technology Resource Management

- * Software and Hardware Acquisition and Maintenance - maintained / repaired / referred at least 275 computers units and peripherals; conducted 2 basic troubleshooting courses and 7 two - week advanced troubleshooting courses for RHOs with 50 participants; prepared technical specifications of at least 8 IT-related procurement including 7 LAN installations; and evaluated at least 10 packages of computer procurement.
- * Telecommunication and Data Communication - upgraded outside line access and call accounting of the PABX system and facilitated internet connection of 14 offices.
- * Information Technology Training - conducted 14 courses with 217 participants.
- * Geographic Information System - provided technical support to health risk Assessment

Center and Inter-agency Committee on Socio-economic Indicators; developed training manuals, and conducted two training courses.

- * Human Resource Development - provided 63 training slots for MAS, 2 abroad
- * Technical Assistance to Special Projects - computer - aided presentations, survey design and processing; evaluation of financial transactions; information systems planning, etc..

6. Health Policy Development Staff

- * Provided secretarial support to EXECOM and National Staff Meetings
- * Conducted nine (9) Policy and Legislative Coordinators (PLCs) meetings
- * Provided ten (10) technical assistance activities on the development of administrative issuances
- * Facilitated / consolidated ten (10) position papers
- * Layout and dissemination of PISO NEWS
- * Updated library files of monographs and researches
- * Continuous updating of databank
- * Conducted nine (9) capability building workshops
- * Participated in six (6) local and foreign trainings.



7. Department Legislative Liaison Office

- * Lobbied and advocated for the passage of health bills into legislation like: a) National Diabetes Act of 1996 (R.A. No. 8191) and the Special Law on Counterfeit Drugs (R.A. No. 8203).
- * Maintained linkage with HPDS and Policy and Legislative Coordinators (PLCs) at DOH through the conduct of regular consultative meetings and provision of updates on policy initiatives and health legislation proposals.
- * Conducted teambuilding activities with external offices like Committees on Health and Liaison Offices of both House of Representatives and Senate.
- * Conducted mid-year review of various health bills from both Houses of Congress to monitor status and lobby for its passage.
- * Facilitated the conduct of coordination meetings with Health Committees of both Houses of Congress and DOH Offices or Services concerned to mobilize support for the passage of priority bills e.g. Traditional Medicine Act, National Health Facilities Enhancement Act, and National Mental Health Act, etc.
- * Closely monitored status of DOH budget in Congress.
- * Sponsored the 7th Plenary Meeting of the Legislative Liaison System of the Executive Branch of the Government held last Nov. 15 at the Philippine Heart Center.
- * Conducted three-day workshop on legislative processes, position paper drafting, and technical writing last December in Baguio City in cooperation with the U.P. Law Center.

- * Actively coordinated with offices of the proponent-legislators the submission of requirements, and helped facilitate implementation of Congressional Initiative projects and Countrywide Development Funds (CDF).





DENTAL HEALTH SERVICE (DHS)

Program Description:

The Dental Health Program aims to improve the oral health status of mothers and children by providing preventive and curative dental services thereby contributing to the improvement of the quality of life through the attainment of the highest possible level of oral health.

Accomplishments:

1. Updated policies, standards and guidelines governing dental services to be implemented in rural, hospital, private school dental clinics;
2. Developed guidelines and procedures on infection control for dental public health services;
3. Training of 150 barangay health workers for 5 provinces (Region XI and CAR) as barangay dental auxiliaries;
4. Analysis of 192 water samples from various provinces and municipalities for fluoride control;
5. Provision of flouride powder sealant and other dental materials as its commitment to provinces covered by CHCA.



NATIONAL TUBERCULOSIS CONTROL PROGRAM (NTCP)

Program Description:

To make tuberculosis cease to be a major public health problem of the country. The TB control service aims to provide the leadership and assistance to all sectors to ensure that TB control services are made available and accessible to those who need them. The goal is to reduce the transmission of tuberculosis by improved case-holding.

Accomplishments:

1. Drafted the NTP policies, manual of procedures and training modules for physicians, nurses, midwives and barangay health workers;
2. Provided anti-TB drugs for 279,259 TB cases;
3. Launched 2 major health information and advocacy campaigns, namely:
 - * World TB day (March 24) and
 - * First National TB Day (August 19)
4. Collaboration with WHO in the project entitled "Collaboration in the Rural & Urban Sites to Halt TB" or C.R.U.S.H. TB" which was initiated in Batangas, Antique and Iloilo City.
5. Completed 3 researches, namely:
 - * Comparative study of the fixed dose/loose dose anti TB drugs
 - * Assessment of NTP in Iloilo City and Antique
 - * Diagnosis of TB among children.



MATERNAL AND CHILD HEALTH SERVICE (MCHS)

Program Description:

The ultimate impact objective of MCHS is reduction in maternal, perinatal, infant and young child (0-4) morbidity and mortality. The service hopes to achieve these by providing basic prenatal, postnatal delivery care to mothers, immediate newborn care to include early introduction to breastfeeding and basic preventive and health promotive services to reduce mortality and morbidity due to the following illnesses especially diarrhea, measles, pneumonia, neonatal tetanus, poliomyelitis, undernutrition, diphtheria, pertussis.

Accomplishments:

Expanded Program on Immunization (EPI)

1. Provided the vaccine, syringe and needle requirements nationwide for use in the various immunization activities namely routine immunization, Knock Out Polio campaign, mop-up operations and outbreak response immunization;
2. Conducted 2 rounds of Knock-Out Polio Campaign which resulted in increase in polio coverage.
3. Provided technical assistance through conferences, workshops, distribution of revised EPI manual, provision of IEC/technical materials.



Control of Diarrheal Diseases (CDD)

1. Provided 9M sachets of Oresol and 1M ORS tablets for nationwide distribution to field health units, disaster areas and evacuation centers;

2. Conducted 11 Philippine Pharmacy Staff Training, 3 CDD Clinical Management Training;
3. Produced and aired ORT radio plugs in coordination with PIA.

Control of Acute Respiratory Infection (CARI)

1. Provided essential antibiotics for management of pneumonia in health centers, BHS and hospitals.
2. Sub-allotted funds for the conduct of 7 clinical management trainings in 4 ARI training units.
3. Provided pneumonia fact sheets, IEC calendar, CARI prescription kits and training modules.

Maternal & Breastfeeding

1. Provided Home Based Mothers Records Cards for all pregnant women nationwide
2. Conducted health facility survey for 15 provinces.
3. Conducted safe motherhood needs assessment survey in 4 regions (region 4,7,10 & NCR).
4. Conducted 1 TOT on hilot and BHW training.
5. Conducted 1 milk code monitoring training.
6. Mass distribution of BF counselling training modules and manuals for Rural Health Midwives



FAMILY PLANNING SERVICE (FPS)

Program Description:

Provision of nationwide family planning information and services in collaboration with NGOs for the promotion of reproductive health among women.

Accomplishments:

1. Clarification of program thrust, policies, priorities based on Family Planning and NSD survey of 1995;
2. Issuance of E.O. No. 307, s. 1996 - Implementation of FP on LGU level;
3. Standards/Guidelines on FP/Reproductive health reviewed and updated.
4. Updating of Philippine Family Planning Program Strategy
5. Expanded further the provision of FP information and services to LGU Community and industry levels.
6. Provided augmentation support to 34 LGU in the amount of P 1M.
7. Institutionalization of Contraceptive Distribution and Logistics Management Information System (logistics delivery system management information section)
8. Declaration of May as "Natural Family Planning Month" as per P.D. 307
9. Development of Family Planning-Management Information System strategy

NUTRITION SERVICE

Program Description:

The Nutrition Service is concerned with development of policies on standard nutrition interventions including food and micronutrient supplementation, food fortification, nutrition promotion and advocacy.

Accomplishments:

1. Finalization of the IRR on An Act Promoting Salt Iodization Nationwide) ASIN Law (R.A. 8172).
2. Issuance of Sangkap Pinoy Seal of Acceptance to 3 food manufacturers (Tang Juice Drink , Star Margarine, 555 Sardines).
3. Pilot testing of the community based food fortification project in Masbate.
4. Conducted Araw ng Sangkap Pinoy (ASAP) in coordination with partner agencies.
5. Distributed Vitamin A capsules to 92.7% of all targetted 12-59 month old children, iodized oil capsules to 62.3% of target, iron tablets to 51.1% of target.
6. Installation of additional 12 salt iodization machines thus increasing the number of beneficiary areas to 15 provinces, 6 cities plus Metro Manila.



Launched in collaboration with the Non-Communicable Disease Control Service the "Lifestyle and Healthy Diet Promotion.

8. Distribution of Diet Counselling Manual and Diet slips to the field.

9. Assisted in the drafting of the IRR of Diabetes Act (R.A. 8191).

10. Pilot testings of community-based salt monitoring using Lot Quality Assurance Sampling in Mt. Province.

MALARIA CONTROL PROGRAM

Program Description:

The program undertakes malaria case finding and treatment coupled with mosquito vector control program. The aim is to eradicate malaria in more areas.

Accomplishments:

1. Provision of technical assistance through conduct of trainings for professional batch, medical technologies and microscopist for the central office, training for RHU staff, RHU medical technologists and microscopists
2. Conduct of researches and special projects
3. Formulation of guidelines on case management, disease prevention and vector control
4. Provision of logistics including drugs, insecticides, mosquito nets and laboratory supplies to field and local government units
5. Active disease surveillance and epidemic management through information systems management and outbreak investigation.

WOMEN'S HEALTH AND SAFE MOTHERHOOD PROJECT

Program Description:

The project was borne out of the government's commitment to safeguard women's health needs in all stages of the life cycle. The project which is in its 1st year of implementation has both nationwide elements and province specific elements to provide intensive upgrading to Womens Health and Safe Motherhood Project. While the DOH provides overall

technical and managerial directions, the local government unit (LGU) is responsible for the actual delivery of services to the provinces, municipalities and barangays. The 4 project components are Service Delivery, Institutional Development, Community Partnership for Women's Health and Policy and Operations Research.



Accomplishments:

1. Finalization of the Project Implementation Agreement (PIA).
2. Hiring of a consulting firm to assist in project implementation.
3. Conduct of project launch and consultative workshops.
4. Conduct of 2 joint project review missions.
5. Initiation/Completion of civil works services in some provinces.
6. Procurement of iodized oil capsule for areas not serviced by Nutrition Service.
7. Completion of list of medical equipments, commodities and supplies for maternal care, RTI, AIDS/STD and Family Planning.



commodities and supplies for maternal care, RTI, AIDS/STD and Family Planning.

8. Development of monitoring and evaluation indicator.
9. Review/revision of protocol for management of STD/AIDS and cervical cancer .
10. Preparation/Finalization and approval of project implementation document.

SCHISTOSOMIASIS CONTROL SERVICE

The Schistosomiasis Control Service oversees area-based schistosomiasis case-finding and treatment program concurrent with vector control and environmental engineering measures.

Accomplishments:

1. Active case-finding & treatment brought down the prevalence rate to 3.62%.
2. Conduct of intensified mass treatment in endemic barangays with 10% and above prevalence.
3. Development of a modified Schistosomiasis Control Strategy with emphasis on health education component.
4. Conducted advocacy/social mobilization campaigns in areas of concern.
5. Active surveillance activities in Bohol and Siargao Island
6. Undertook focal snail control

7. Provided logistics support (drugs, laboratory supplies, chemicals, IEC materials) to field health office.

8. Conduct of basic operational researches.

COMMUNICABLE DISEASE CONTROL SERVICE

National Dengue Prevention and Control Program (NDPCP)

Program Description :

The NDPCP is a new and developmental program which started in 1993. It is directed towards community-based dengue prevention and control. Foremost among its activities is the National *TEPOK LAMOK, DENGUE SAPOK* Program.

Accomplishments :

1. Formulation and dissemination of policies and guiding principles of NDPCP.
2. Nationwide launching of the *Tepok Lamok Dengue Sapok* Program.
3. Formulation of community-based Integrated Dengue Control Plan for 5 regions.
4. Health Promotion and advocacy to NCR based schools through provision of IEC materials.
5. Collaboration with Rotary International District 3810 for \$500,000 IEC Grant
6. Collaboration with World Health Organization for laboratory supplies for Bureau of Research and Laboratory Dengue Unit.



National Filariasis Control Program

Program Description :

This is a program for the control of filaria in limited areas of endemicity in four (4) regions of the country

Accomplishments :

1. Provision of technical assistance to regional and provincial health offices through the conduct of trainings.
2. Development of the family health care model in the prevention and control of filariasis.
3. Provision of laboratory supplies and reagents, drugs and medicines to 4 endemic regions.
4. Development and distribution of IEC materials.
5. Stabilization of epidemiological survey for suspected areas.



National Leprosy Control Program

Program Description :

This is a nationwide surveillance case-finding, treatment and social rehabilitation program participated in by field health units and sanitaria.

Accomplishments:

1. Provision of Multi-Drug Therapy (MDT) Drugs to DIRFOs, PHOs, CHOs and LGUs.
2. Launching of Kilatis Kutis Campaign during the third week of February to coincide with Leprosy Week Celebration

3. Conduct of Leprosy Elimination Campaign (LEC) in Northern and Southern Cebu, Ilocos Norte where a total of 189 new cases were identified.

4. Conduct of Special Action Project for the Elimination of Leprosy (SAPEL) in Bonggao, Tawi-tawi, Benguet, Abra and Sulu.

5. Establishment of 15 skin clinics in 10 regions.

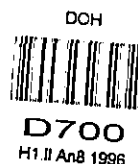
National Rabies Control Program

Program Description:

With the aim of making the Philippines a rabies-free country through Responsible Pet Ownership Campaign, the program encourages pet vaccination, pet teaching or confinement and provision of clean pet food.

Accomplishments:

1. Provision of Post-Exposure treatment
2. Conduct of orientation Seminar or National Rabies Control Program and management of bite patients in 35 provinces
3. Information Campaign among government and private physicians on the content of AO #27: Guidelines in the Management of Animal Bites
4. Conduct of Mindanao Anti-Rabies Day (in Basilan) where 98% of dogs were immunized.



NON-COMMUNICABLE DISEASE CONTROL SERVICE

Occupational Health

Program Description :

The activities of the program have been directed to a great extent towards problem orientation and high risk industries with the goal of protecting and improving the health of the workforce and the community. The essential activities include specialized occupational health services, toxic vigilance activities, training and advocacy.

Accomplishments:

1. Awarding of the top 25 Healthy Workplace by no less than President Fidel V. Ramos at the ceremonies held in Malacanang.
2. Provided comprehensive occupational health and toxicology services to workers in high risk industries. These services include preventive, promotive and curative interventions undertaken in collaboration with the UP National Poison Control and Information Service.
3. Conducted special trainings in occupational health and toxicology for heavy metals, industrial hygiene and pesticides.
4. Establishment and operationalization of Regional Occupational Toxicology and Non-Communicable Information Center in 3 regions.
5. Strengthening of collaborative launching through the creation of the Inter-agency committee on environmental health.

Cancer Control Program

Program Description:

The Cancer Control Program is an integrated approach towards the control of cancer utilizing primary, secondary and tertiary prevention at both the community and the hospital level.

It is a site specific control program; focusing only on cancers that cause the greatest morbidity and mortality, those for which a substantial risk associated with certain exposure, and for which effective intervention are available.



The program started in four pilot provinces in 1988 and became nationwide in scope by 1995.

The objectives of the program are :
(1) to reduce morbidity and mortality of the three most prevalent cancers (Lung, breast, cervix) among the population at risk by 1% in 1998, and (2) to improve the quality of survival of cancer patients through pain relief.

Accomplishments :

1. Spearheaded the celebration of National Cancer Consciousness Week
2. Conducted the National Convention on Cancer Education : Nutrition and Lifestyle.
3. Initiated the integration of Hospice/Palliative Care into Medical and Nursing Curriculum
4. Launched the Prostate Cancer Awareness Campaign
5. Conducted screening for detection of prostate cancer dubbed as "PA-D.R.E KA, PARE!"
6. Conducted situational assessment of the existing human resources/facilities/ operations for the implementation of the Cervical Cancer Control Program.



7. Conceptualized/developed guidelines for visual art competition which is a form of palliation therapy

8) Collated cancer registry data taken from the years 1993-mid-1996.

Community-Based Rehabilitation Program (CBR)

Program Description :

Community-based rehabilitation program is a creative application of the Primary Health Care (PHC) approach in rehabilitation service involving active community participation of everyone including the disabled.

Accomplishments :

1. Conducted social preparation and social marketing in the expansion regions/provinces (Region II,IV,VI,VII,X,XI,XII,NCR).
2. Program launching conducted in the expansion areas
3. Conducted the first and second level training on basic Physical, Speech, Occupational and Psychosocial therapies for the Local and Intermediate Supervisors in Regions I,VI,VIII,X,XII,NCR).



4. Finalized the Master Plan of the program.

5. Conducted the CBR Program Review for the Visayas and Mindanao area.

6. Conducted the first batch of Hands-on Skill training for technicians in the manufacture of Prosthesis and Orthosis Devices in collaboration with the Philippine Association for the Reintegration of Disabled person in Society (PARDS).

7. Spearheaded the celebration of Disability Week (3rd week of July).

8. Continuing collaboration/linkages with concerned GO's and NGO's.

9. Identification/Inclusion of the Philippine Orthopedic Center (Dept. of Rehabilitation Medicine) as one of the training arms of the program.

10. Conducted the CBRP Annual Planning/ Evaluation Workshop.

National Cardiovascular Disease Prevention and Control Program (NCVDPCP)

Program Description:

A priority program of the Department of Health, it aims to promote healthy lifestyle and health among Filipinos to reduce the morbidity and mortality from Cardiovascular disease, reduce the economic burden of the disease to the individual, family and the community and to improve the quality of life and productivity of the patients.

Accomplishments:

1. Conducted CVD training of MDs and nurses at the Philippine Heart Center
2. Conducted workshop for Hospitals as Center of Wellness.
3. Training of DECS Medical Supervisor on RF-RHD



4. Procurement of Drugs and reagents for 5,000 and 150,000 patients of Rheumatic Fever Rheumatic Heart Disease and Hypertension, respectively
5. Exercise promotion through the "HATAW 2".
6. Healthy diet promotion through the "IWAS SAKIT DIET".
7. Conducted National Diabetes Survey
8. Conducted consensus meeting on Hypertension and Cholesterol guidelines.

Prevention of Blindness Program (PBP)

Program Description:

To promote eye care as an essential component of total health and provide service for this.

Accomplishments:

1. Conducted training on primary eye care and primary medical eye care
2. Provided support for cataract subprogram in regional hospitals and medical center.
3. Procurement of 100 cataract sets
4. Conducted Light Saving Month activities.
5. Support for outreach mission.

Diabetes Prevention and Control Program (DPCP)

Program Description :

The Diabetes Mellitus Prevention and Control Program is a comprehensive, integrated approach aimed at curbing the alarming morbidity and mortality from diabetes and its complications and the improvement of the quality of life of the diabetics. It utilizes all levels of preventive care in the community and hospital settings with the appropriate medical therapeutic support.

Accomplishments:

1. Approval of operational plan for 1996 by advisory council.
2. Finalization and approval of the program's implementing guidelines.
3. Establishment of a national diabetes data registry.
4. Finalization of pre-implementation phase of the second national diabetes survey.
5. Collaboration with concerned NGO's for the implementation of the national program.



6. Initiation of integration with primordial and primary prevention activities of other non-communicable programs.
7. Approval of Diabetes Act of 1996.
8. Conduct of workshop re:Formulation of implementing rules and regulations of the Diabetes Act of 1996 with the regional/hospital coordinators

ENVIRONMENTAL SANITATION PROGRAM

Program Description :

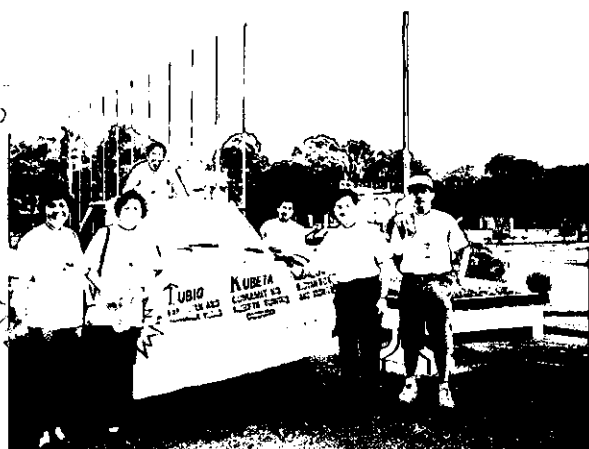
The program aims to promote an environment conducive to man's healthy living. It is a nationwide, multi-agency, multisectoral program which deals with the promotion and provision of basic sanitation services and facilities through water quality



surveillance, food sanitation, proper solid and liquid waste management, public places sanitation and emergency environmental sanitation during disaster. The program is also concerned with the assessment and management of health hazards and risks associated with new and expanding development projects as well as existing environmental conditions and environmental changes that have an adverse impact on health.

Accomplishments:

1. Development of Implementing Rules and Regulation in PD 856.
2. Development of EHIA Manual.
3. Development of National Directional Plan on EHIA.
4. Development of IEC primer.
5. Conduct of TKO campaign.
6. Provision of supplies and materials of water for life projects to include chlorine granules and tablets.
7. Provision of fumigants.
8. Preparatory activity for research on Household food sanitation.



NATIONAL AIDS/STD PREVENTION AND CONTROL PROGRAM (NASPCP)

Program Description :

The Program is committed to continue and strengthen its campaign against the spread of HIV infection and AIDS in the country. It takes the lead in organizing social support network involving other GOs and NGOs, private organizations and donor groups nationwide.

Accomplishments :

1. Conduct of World Aids Day 1996 with the theme "One World, One Hope".
2. Observance of candlelight memorial in 13 regions.
3. Training on Syndromic Management for sexually transmitted disease.
4. Standard setting for HIV screening and confirmation.
5. Conduct of social and behavioral researches.



OFFICE FOR HEALTH FACILITIES, STANDARDS AND REGULATIONS (OHFSR)

BUREAU OF LICENSING AND REGULATION (BLR)

Program Description :

The Bureau of Licensing and Regulation (BLR) is the 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). It ensures the delivery of quality health services by effecting compliance with the standards and technical requirements prescribed by the DOH for licensure of hospitals and dental prosthetics laboratories (DPLs) and accreditation of medical clinics and hospitals that conduct medical examinations of overseas contract workers (OCWs) and seafarers.

Accomplishments :

For 1996, the BLR formulated new policies for hospitals, DPLs, medical clinics for OCWs and Health Maintenance Organizations (HMOs). It amended/updated A.O. 68-A, s. 1989 and A.O. 85-A, s. 1990.

It reviewed the existing standards for licensure and accreditation. It formulated new standards for hospitals, medical clinics for OCWs and ambulatory surgical clinics/HMOS. Applications for hospital license to operate, floor plans, medical clinic for OCWs, clearance to operate HMOS and dialysis clinics were reviewed and evaluated. Ocular inspection for hospitals, medical clinic for OCWs, dialysis clinics and ambulatory surgical clinics has been conducted. Issuance of licenses to operate (LTO), certificates of accreditation for ambulatory surgical clinic and medical clinic for

OCWs and clearance to operate HMOS were done as well as the authentication of medical examinations and AIDS test results.

Monitoring of and fact-finding investigation of hospitals, DPLs and medical clinic for OCWs was conducted.

To sell program through advocacy, IEC and social mobilization, financial assistance were provided to DIRFO and other DOH offices. Dialogues with local officials, medical clinic for OCWs and medical ancillary services and/or office was also done.

As part of health information and exchange, consultative and advisory services were done, memo and bureau circulars were published and monthly reports of medical clinics of OCWs were prepared and processed.

For research and development, surveys of lying-in clinics, review and study of hospital capabilities from the period 1988-1992 were done.



BUREAU OF FOOD AND DRUGS (BFAD)

Program Description :

The Bureau of Food and Drugs was created under R.A. 3720 which was amended by E.O. 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
- R.A. 7432 - The Senior's Act

Accomplishments :

BFAD was involved in the following: Phasing-out of potassium bromate as flour treatment and dough improver; Issuance of the guidelines on micronutrient fortification of processed foods; Approval of Philippine Natural Grade Carageenan as food additive by Codex Alimentaries Commission; Raid of fake and counterfeit drugs; Training on Good Manufacturing Practice (GMP); Development of the Filinvest Corporate City; Field unit to all regions as part of the preparation to the effort of reengineering the bureaucracy of the DOH; WHO Adverse Drug Reaction (ADR) Network; Cosmetic Regulation Innovation and BFAD Laboratory Information Bulletin.

BFAD's other accomplishments included the following: Approval of Republic Act No. 8203, "Special Law on Counterfeit Drug"; Establishment of the DOH-AusAID-UST Bioavailability Unit; Completion of bioequivalence study on first generic drug product (Rifampicin 450 mg capsule);

participation in the Manila Action Plan Agency for APEC re: Mutual Recognition Arrangement for Food/Food Products and Individual & Collective Action Plan on Standards and Conformance; Organization of network of laboratories for food fortification program (Sangkap Pinoy Seal Program); Hosting of the 15th Meeting of the ASEAN Working Group on Technical Cooperation in Pharmaceuticals; Provision of P240 M budget for the establishment of BFAD laboratories in Davao and Cebu and approval by the Secretary of Health of location sites for the laboratory buildings; Development of the architectural design and engineering works for the construction of an additional laboratory building at BFAD, Alabang; Audit inspection of food and drug establishments and outlets at regional and provincial levels and reforestation of

B F A D
compound
with about
400 trees.



HOSPITAL MAINTENANCE SERVICE (HMS)

The Hospital Maintenance Service 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 service completed 3 workshops, visited 54 hospitals, checked 445 equipment, repaired 140 equipment and 332 equipment (reactive) and 68 on-going repairs. There were 4 hospitals where the HMS project was introduced, 98 technicians and end-users trained and 3 hospitals monitored. There was 1 training conducted, 4 HMS personnel trained locally and 1 HMS personnel trained abroad. There were 18 seminars/conferences and meetings attended and 1 team building done.

There were 4 research foras attended, 5 hospitals monitored/evaluated and 1 seminar for hospital engineers and technicians conducted in relation to Hospital as Center of Wellness Program (HCWP). Inventory was conducted to 70% of HMS facilities and equipment.

There were 17 recipient hospitals in different regions and 1 proposed for safety laboratory. There were 4 hospitals subjected for consultancy service on technical specification and meeting with Hospital Maintenance Service for Mindanao (HMS-M).

Accomplishments :

Production of vaccines (in doses):

Tuberculin, 2TU	- 29,600
Tuberculin, 5TU	- 18,300
El Tor Vaccine	- 52,850
Typhoid Vaccine	- 26,900
Absorbed Tetanus Toxoid	- 25,020
Cobra Antivenin	- 1,536
Rabies Vaccine	- 113,824

Distribution of EPI vaccines to various regional and provincial health offices (in doses):

D P T	- 10,129,920
Polio	- 36,213,680
Measles	- 10,742,140
Tetanus	- 4,801,100
B C G	- 9,155,620
Tetanus (local)	-288,560

BIOLOGICALS PRODUCTION SERVICE (BPS)

Operational Background :

The Biologicals Production Service is mandated under E.O. No. 119 to formulate plans, policies, programs, standards and techniques for the processing, manufacture, standardization and improvement of biological products for the use of the Department of Health; manufacture vaccines, sera, antitoxin and other biologicals; provide consultation, training and advisory services to implementing agencies; and conduct studies and researches related to biologicals production, distribution and use.



HEALTH INFRASTRUCTURE SERVICE (INFRA)

Program Description :

The Health Infrastructure Service (INFRA) aims to ensure that licensure and quality standards for physical plants are met by retained hospitals, to provide for their utility and safety requirements, to be able to meet the new and developmental demands of hospital frontline services and to institute a hospital physical plant maintenance system.

Accomplishments :

In 1996, for research and development, only 43% of the actual activities was attained primarily due to lack of manpower. For its training program which include conduct of training program for design and planning of hospitals, conduct of lecture in architecture schools and conduct of training on health facilities and corrective maintenance, 75% of activities was attained experiencing a minimum response from LGU for one training.

The Project Development and Documentation include the validation/finalization of the 1996 infrastructure project and prepare budget request for 1997, preparation of annual guidelines for project development and implementation, organization of the preparation of schematic plan for 1996 infrastructure projects and evaluation, monitoring and coordination of consultants for 1995 projects. For this, 67% of activities were performed because of additional work for 1995 backlog. For Hospital and Physical Plant Maintenance, actual percent of activities exceeded the target. There was 75% accomplishment for human resource development. This includes attending graduate/masteral courses, computer training and professional organization conventions. The

percentage accomplishment of advisory consultancy to regulatory agencies and foreign assisted projects exceeded the target. The percentage accomplishment for staff coordination was 74% and this consists of field trips conducted during scheduled meetings.

HOSPITAL OPERATION AND MANAGEMENT SERVICE (HOMS)

Program Description :

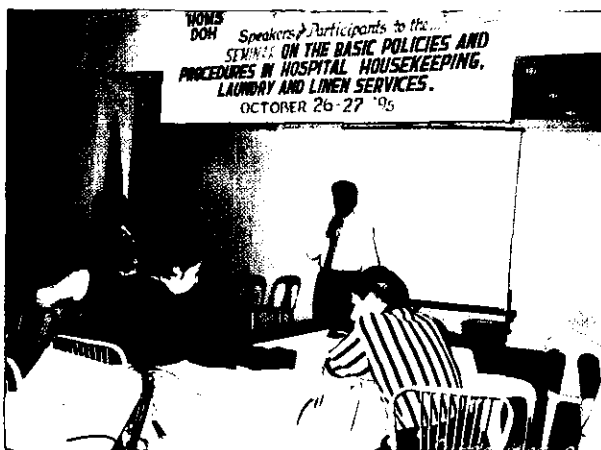
The Hospital Operation and Management Service (HOMS) is mandated to formulate plans, programs, policies, standards and techniques related to management improvement and quality control of hospital operations.

HOMS provides consultative, training and advisory service to field offices in relation to the supervision and management of hospital components and conducts studies and research related to hospital operation and management.

Accomplishments :

HOMS awarded 115 hospitals as Mother and Baby-Friendly Hospitals. It conducted 3 batches of Lactation Management Training Course for Luzon, Visayas and Mindanao, Breastfeeding Course for hospital administration, Lactation Nurse Specialist Course, and a research forum in paper pertaining to Breastfeeding.

For its "Hospital as Center of Wellness" project, HOMS conducted an orientation seminar for the Chief of Hospitals of all Social Reform Agenda (SRA) provinces, 3 seminars for the Administrative and Personnel Officers of the DOH hospitals to encourage their actual participation and the Nurses Action Group in Luzon, Visayas and Mindanao.



It gathered statistical data needed to upgrade the equipment of the Neonatal Intensive Care Unit in 26 recipient DOH hospitals (Swiss Project), provided technical assistance in the preparation of Volume II and III manual (Infection Control Program), designed program and prepared the terms of reference and contract regarding consultancy service (hospital epidemiology program), submitted a proposal on Hospital Equipment and Assistance Project for all retained and devolved hospital which have been approved by the Japanese government (JICA project).

The healthy hospitals initiative was launched in the devolved and private hospitals nationwide. The HIV/AIDS program in hospitals conducted a consultative workshop for the HIV/AIDS Core Team (H.A.C.T.) of the different retained hospitals. Contracts for provision of waste disposal facilities (incinerator and disinfecting units) to 35 DOH hospitals and equipment for Intensive Care Unit/Operating Room/Delivery Room (ICU/OR/DR) to 3 hospitals & ER equipment to 5 hospitals have been supplied by the Austrian Project.

The Case Management Protocol Program finalized the Case Management Protocol of diseases. The National Voluntary Blood Services Program was completed and is ready for implementation. It also distributed 24 vehicles to different regions for donors recruitment and advocacy program. For the French Project, 6 out of 7 proposed recipient hospitals were visited and the initial draft and proposal have been completed.

The ER Upgrading/Training program conducted 2 courses of Emergency Room Training for Resident Physicians, assigned 14 resident physicians to train on the modular residency training program, monitored hospital

performance of 24 hospitals and conducted a fact-finding investigation. The Ten-Year Hospital Development Plans of 28 hospitals have been collected.

PREVENTIVE NEPHROLOGY PROJECT (PNP)

Program Description :

The Preventive Nephrology Project (PNP) is a five-year project which is being implemented by the concerted efforts of the DOH, National Kidney and Transplant Institute, DECS, DILG, Philippine Pediatric Society, Philippine Society Nephrology and the BRL. It 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 the children found to have abnormal urine findings in Phase I. Its ultimate goal is to determine the true incidence of a symptomatic renal disease on children and to effect treatment so that end-stage renal disease may be avoided. The Project is on its third year of implementation and concentrates on Phase II which involves detailed laboratory evaluation and clinical management of cases that have been proven to have definite kidney and urinary tract problems. Completion of retrieval of urine screening results by dipstick method under Phase I is also one of its goals in the third year.

Accomplishments :

To date, urine screening results of 4.7 million public school children have already been received and edited at the Project Office of the National Kidney and Transplant Institute. A total of 1.1 million



children (24%) out of the 4.7 million have been found to have abnormal urine findings. More results are expected to come until March 1997.

The Project in its aim to maximize implementation this year and in the remaining years have strengthened its organization and networking and expanded its manpower and operations. Since March to August of this year, it had conducted a series of Regional Consultative Meetings, supervisory visits and monitoring activities to hear issues, concerns and problems and visualize the actual implementation of the Project in the field. The composition and function of the Regional and Provincial Boards have been strengthened and coordinators of all participating agencies, from the national down to the local levels, have been reviewed.

RADIATION HEALTH SERVICE (RHS)

Program Description :

The Radiation Health Service 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 and electronic devices and to promote the safe and efficient use of radiation technologies.

Accomplishments :

In 1996, the actual accomplishment of local government and private sector assistance which include acceptance and performance testing of equipment and accessories, design of radiation facilities and conduct of training courses exceeded the annual target. Activities on policies and legislation, research development, organization and social mobilization have been achieved. The

activities for disaster and epidemic management, surveying the DOH facilities for handling radiological emergencies, the health information and exchange have been continuously done.

The actual accomplishment of setting for Licensing and Regulation which issue Thermo Luminiscent Decimeters (TLD) badges for personal doses, intercomparison of radiotherapy dosimeters, evaluation of x-ray facilities and work thesis, issuance of permit to import/certification of exemption, output measurement of radiotherapy facilities, testing of Non-ionizing Radiation (NIR) devices and conduct of Certification Training Courses for Radiation Protection have exceeded the annual target.



BUREAU OF RESEARCH AND LABORATORIES (BRL)

Program Description :

The Bureau of Research and Laboratories (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 researches related to laboratory procedures and operations.

Accomplishments :

In 1996, BRL finalized implementing guidelines for Manual of Standards for Clinical Laboratory, reviewed in consultation with NGO's, Regional Pathologists, Professional Specialty Societies and others. It has



inspected 1,930 clinical laboratories, 177 blood banks, 135 tested HIV laboratories, 26 laboratories for training of MTI and 31 water testing laboratories. There were 1,456 licenses issued to clinical laboratories (CLS) and 96 for blood banks. For HIV testing laboratories, 40 accreditations were issued, 22 for training laboratories of MTI and 10 for water testing laboratories.

Internal Quality Control program of 20% of all licensed clinical laboratories (CLs) was assessed and analysis and recommendations were submitted.

Participation in the external/international assessment program was 100% and excellent rating was achieved.

There were about 5,920 samples of CL/BBs sent for HIV/HBsAg testing and evaluation, 4,890 test/examinations using kits/reagents being evaluated and 50 kits/reagents evaluated. Protocol has been prepared, new system pilot tested and evaluated for 1 region. For research projects started and completed, there were 3 completed for write-up, 1 for data analysis, 2 are on-going while 4 did not commence. There were 19 surveillance and monitoring works done in collaboration with other government agencies. A total of 113,374 laboratory examinations, such as HIV examination, VDRL, biochemistry, water analysis, bacteriology and others were performed.

PHILIPPINE NATIONAL DRUG POLICY (PNDP)

Program Description :

The Philippine National Drug Policy (PNDP) is mandated to formulate policies for safe, efficacious, quality medicines at an affordable cost.

Accomplishments :

PNDP's priority programs were: Philippine National Drug Formulary (PNDF) Vol. 1 4th edition (1996) - current edition of the essential drugs list to meet the health care needs of the Filipinos; Primary Medical Care Drugs (1996) - list of drugs intended for rural health units; development of "A Filipino Drug Industry Strategy Paper for Philippines 2000"; strict Compliance with EO No. 49 s. 1993 mandating the use of the current edition of PNDP as basis for procurement of drugs and drug products by the government; establishment of a Bioavailability Unit at the University of Santo Tomas to undertake bioequivalence studies of selected products with reported bioequivalence problems and expanded list of drugs on the "Murang Gamot sa Presyong DOH" from 10 to 20 drugs.

In human development/people empowerment, PNDP conducted the following: training courses/seminar-workshops on promoting rational drug use; rational drug use as a subject is included in the curriculum of medical schools; Administrative Order No. 23-A s. 1996 provides the "Guidelines on the Development and Establishment of Botica ng Barangay (BnB)"; awareness campaign on the consumers' right to choose affordable drugs through the use of generics; tie-up with the UP College of Public Administration on Seminar-Workshop of the local executive level on information dissemination, re: EO No. 49 s. 1993 current edition of PNDP Vol. I Generics Law and its implementing rules and regulations and the role of the Therapeutics Committees.

PNDP is collaborating with the foreign agencies on several projects relative to the rational drug use -



World Health Organization (WHO), Australian Agency for International Development (AusAID) and International Network for the Rational use of Drugs (INRUD).

DOH-HOSPITAL POISON CONTROL PROGRAM (DOH-HPCP)

Program Description :

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

It was originally under the office of the Non-Communicable Disease, then placed under the STOP DEATH Program of the Office for Health Facilities, Standards and Regulations as part of emergency response to disasters, epidemics and mass poisoning. It became a hospital-based program specifically addressing the diagnosis and management of poisoning in patients treated and admitted in all DOH-retained hospitals. On the other hand, environmental, occupational, and industrial-related poisoning were placed under the responsibility of the Office of Non-Communicable Diseases under the Regional Occupational & Non-Communicable Information Center.

Accomplishments :

The year 1996 showed the operationalization of the DOH Hospital Poison Control Coordinating Center

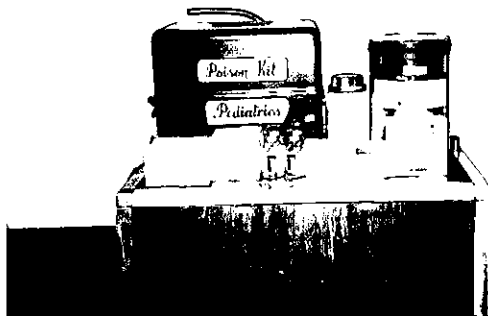
(DOH-HPCCC). Seven (7) HPCC's were set up and are now partly operational as management and referral centers for poisoning, they are: Vicente Sotto Memorial Medical Center, Region VII, Cebu City; Davao Medical Center, Region XI, Davao City; Western Visayas Medical Center, Region VI, Iloilo; Baguio General Hospital and Medical Center, CAR, Baguio City; Ilocos Regional Hospital, Region I, San Fernando, La Union; East Avenue Medical Center, NCR, Quezon City; and Jose Reyes Memorial Medical Center, NCR, Manila.

Collaboration with UP-National Poisons Control & Information Service (UPNPCIS) has been on-going for the purpose of training Clinical Toxicology Fellows to provide the HPCCs with experts in the diagnosis, management, and prevention of poisoning; two (2) months in-service training rotation of Residents in Metro Manila hospitals at UPNPCIS, namely East Avenue Medical Center and National Childrens Hospital;

providing consultative expertise in basic, clinical and technical aspects. A network linkage with UPNPCIS, Hospital Poison Control Centers, other DOH offices and services, GO's and NGO's, such as the STOP DEATH Program, Non-Com, BFAD, EMS, FETP, DMU, BFAR, DOST,

DENR, WHO, Rotary Club and Lions Club.

Protocols on the diagnosis, management and prevention of poisoning, and other IEC materials were disseminated to all DOH retained hospitals; to mention some are: watusi, paralytic shellfish, tuba-tuba, mushroom poisoning. Antidotes for certain poisoning (such as watusi, paracetamol and organophosphate), other drugs, and medication were made available in the coordinating and certain Hospital Poison Control Centers.



An official format of recording and reporting of poisoning cases was formulated/disseminated to all DOH retained hospitals and regional offices. A system of reporting has been developed and has started to be implemented. Coordinators and residents have performed case analysis and researches and more are being motivated to perform. During the recent APEC Summit Conference held in the country, the DOH-Hospital Poison Control Program was activated.

It mobilized disaster response teams to provide medical services and psychosocial care in victims of calamities/disasters, conducted training and workshops in the field of health emergency management and relaunched "*Oplan Iwas Putok*" (formerly Oplan Torotot).

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

Program Description :

The STOP DEATH Program aims to consolidate and enhance the resources and capabilities of the DOH to make a coherent and effective response in times of emergencies. It gives emphasis on 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 :

The STOP DEATH Program provided emergency medical services in the following activities: APEC Summit 1996; 23rd International Congress on Internal Medicine; 9th Session of the Intergovernmental Follow-up and Coordination Committee for Economic among Developing Countries; 2nd National Theater Festival; Global Indigenous Cultural Olympics/Summit for Peace and Sustainable Development; National Anti-Poverty Summits and National Health Assembly.

HOSPITAL SERVICES

The DOH retained hospitals had an occupancy rate of 82.37% in 1996, lower by 0.14 percentage points from the previous year. Average length of stay was 7.63 days. A total of 593,308 and 602,562 admissions and discharges, respectively was reported. Of these, 31,370 deaths occurred. Discharges likewise decreased from 877,445 in 1995 to 602,562 in 1996. These hospitals also performed 284,984 surgeries and 8,919,332 laboratory examinations. There were also 3,809,186 total out-patients served.



Hospital Performance Report (Retained Hospitals)	
Indicator	1996
Occupancy rate	82.37
Total admission	593,308
Total no. of patient days	5,856,113
Total newborn	140,297
Total discharges	602,562
Total surgery	284,984
Total out-patient served	3,809,186
Total laboratory examinations done	8,919,332
Total deaths	31,370
Average length of stay	7.63

Source: Office for Health Facilities, Standards and Regulation

BAGUIO GENERAL HOSPITAL AND MEDICAL CENTER

Operational Description :

The Baguio General Hospital and Medical Center (BGHMC) as a tertiary medical center serves clients from Baguio, Cordillera and Northern Luzon. The BGHMC's mission is to provide the best possible comprehensive patient care to the people of Baguio, Cordillera and Northern Luzon especially the poor and the indigents.

The general services offered by the hospital are surgery, medicine, OB-Gyn, pediatrics, orthopedics, psychiatry, ENT, ophthalmology, ER services, dental and medical ancillary.

Accomplishments :

For 1996, it had 21,480 in-patients served, 257,380 out-patients served, 21,262 discharges, 92.1% bed occupancy rate, 1.14% net death rate, 17 residents graduated, 80/month residents in training and 971/month other health trainees. It accomplished 3,296 major surgeries, and 10,658 minor surgeries. The number of referred patients is 818 and 311,934 prescriptions served. It completed 85% of discharge summaries and processed 85% of medical reports.

CAGAYAN VALLEY REGIONAL HOSPITAL

Operational Description :

For 1996, the total admission of CVRH is 10,831, total discharge is 10,777, total operation is 5,134 1,900 deliveries and 63,110 OPD patients.

For the Pharmacy Unit, there were 97,105 prescriptions filled and 5,322,885 medicines given to service (indigents). There were 404,221 laboratory exam/procedures done and 5,096,481 amount of reagents/supplies used.

For the Dietary Unit, a total of 12,697 persons were subsidized, 321,380 routine meals served and 24,283 therapeutic meals served. The Radiology Department had 10,829 X-ray examinations, 9,000 patients in ER, 5,804 patients in dental, 6635 in patients and 2,103 out-patient.

The ten (10) leading causes of hospitalization are pneumonia (1,308 cases), DHF (538), abortion (402), anemia (390) age (387), NSD, (309), PTB (300), TMS (250), acute appendicitis (219) and malaria (212).

The ten (10) leading causes of death are pneumonia (104), CVA Hge (49), prematurity (48), RHD 919), COPD (17), severe birth asphyxia (9), chronic renal insufficiency (8), sepsis (6), dengue/SS (6) and acute MI (6). For 1996, there was a total of 24 deaths recorded

**CORAZON LOCSIN MONTELIBANO
MEMORIAL REGIONAL HOSPITAL
(CLMMRH)**

(Western Visayas Regional Hospital, Bacolod City)

Operational Description :

Corazon Locsin Montelibano Memorial Regional Hospital is a tertiary, teaching-training, 400-bed health facility and is the only service-oriented government hospital in Bacolod City. Its catchment area is the whole province of Negros Occidental with a population of about 2.5 million. Its direct catchment area consists of Bacolod and Bago Cities and the towns of Talisay, Murcia and Don Salvador Benedicto with a total population of about 700,000.

Accomplishments :

The major achievements of CLMMRH are the following:

1. Delivery of quality health care services to the people of Bacolod City and Negros Occidental province
2. Attraction of more volunteer consultants
3. Maintenance of accredited status in all departments
4. Excellent linkages with NGOs and LGUs
5. Upgrading of infrastructure
6. Proper utilization of budget
7. Adoption of moral/value orientation program
8. Implementation of DOH programs and thrusts.

Statistically, it served 153,800 out-patients, 22,500 in-patients, a total of 2,885 operations. The Department of Medicine has specialty rounds once a week, specialty clinics (center of wellness), and installed dialysis unit. The Department of Pediatrics had a total of 4,570 ward admissions and 6,311 nursery admissions. The record for immunizations are as follows:

1. Fully immunized child	—	844
2. BCG	—	5,842
3. DPT 1	—	1,284
DPT 2	—	1,340
DPT 3	—	1,050
4. OPV 1	—	1,277
OPV 2	—	1,112
OPV	—	1,029
5. Measles	—	836
6. HBV1	—	180
HBV 2	—	159
HBV 3	—	160
7. Tetanus Toxoid 1	—	174
2	—	106
3	—	31
4	—	31
5	—	19

**CULION SANITARIUM
Culion, Palawan**

Operational Background :

Culion Sanitarium Balala Hospital is situated in Northern Palawan as center for referral of health care needs. The institution leads advocacy for 4 o'clock habit for TEPOK LAMOK. It acts as center for training health workers for LGUs at Barangay level, provide continuous staff development for competent workers and established a herbal garden and ward for mental cases and cultural minorities.

Accomplishments :

There were 220 surgical cases attended during the People's Health Day. The surgery was sponsored by Culion Foundation Inc. in collaboration with the Culion Sanitarium, Local Government Units and St. Paul de Chartres Sisters. The Medical Surgical Team was from the Manila Doctors Hospital.



For the general hospital, there were 22 patients who underwent major surgery; 256 for minor surgery; 213 for medical; 32 OB-Gyne; 10 Gynaecology and 110 for pediatrics.

There were 828 consultations reported in OPD and 106 for E.R.. There were 19 male MDT (multibacillary) and 4 female MDT patients. For PB (paucibacillary), there were 2, 450 surveillance, 96 for female PTM (post treatment MB) and 186 for male PTM. The total number of out-patients served was 22 while the registered in-patients was 40.

DAVAO MEDICAL CENTER

After years of uncertainty and hesitation, the Davao Medical Center finally took off in 1996 and has caused a new image for the hospital.

The physical development includes the new ER-OR-CSR-Radiology complex; the new center of wellness; setting-up of oxygen and suction pipeline; and improvements in the offices, laboratory, canteen and the EENT out-patient clinic.

There were 55 additional plantilla positions; an innovative 12-hours duty schedule at the ER; work improvements; additional facilities and working tools.

Improvements in patient services includes decongestion mechanism such as the creation of a temporary general ward; provided adequate linen for patients; creation of health day program, outreach program, patient club; establishment of better facilities; and procurement of new equipment.

Programs like revenue enhancement program, computerization program, intensification of the Center for Wellness program were created; and the revision of policies on ER, OPD, OR and other areas were done.

SAINT ANTHONY MOTHER AND CHILD HOSPITAL

Operational Background :

The Saint Anthony Mother and Child Hospital is located in Basak, San Nicolas, Cebu City and is now on its second year of operations. The hospital is primary but functioning as tertiary. At present, it still has a lot of needs to support its full operation.

Accomplishments :

For the first half of 1996, there were 3,030 admissions and recorded 28,609 (74 patients/day) in the out-patient department. There were 34 major operations which include hysterectomy; bilateral tubal ligation were done every People's Day of DOH every month. The bed occupancy rate is 95.8%.

MINDANAO CENTRAL SANITARIUM

Operational Description :

The Mindanao Central Sanitarium was created under E.O. # 392 in 1930. It was previously known as the Zamboanga Leprosarium. It is located 1.5 kms from the city proper, with an area of 23 hectares. It has a total population of over 1,000 including dependents of Hansenites. It serves mainly the Western Mindanao region with a restricted catchment area for non-Hansens of 22 barangays (75,000 population).

As a special hospital, it is an institution for leprosy patients requiring hospitalization, confinement and rehabilitation. It is a treatment center for domiciliary leprosy patients with intercurrent diseases and complications, a treatment base on leprosy work for public health workers and students and a diagnostic, screening center for leprosy. As a primary hospital, it acts as general service hospital with the following services: medicine, pediatrics, OB-Gyn, minor



surgery, out-patient and emergency services, dental services, laboratory services, physical rehabilitation, nursing services, pharmacy, dietary, medical-social services and medical records.

Accomplishments :

For the year 1996, it had 45 minor surgeries. There was a total of 214 (referrals) and 6,346 (non-referrals) OPD consultations. For laboratory examinations, it had 604 patients and 3,320 participants for its health education classes. There were 15,800 patients treated for physical therapy out of the 15,804 patients attended. The travelling skin clinic reported a total of 2,411 patients consulted. The ten leading causes of skin disease were fungus infection which had 392 patients, 388 for dermatitis, 208 for scabies, 103 for Hansen, 23 for psoriasis, 15 had allergy, 7 with pityriasis versicolor and 2 for cellulitis.

NORTHERN MINDANAO MEDICAL CENTER

Operational Description :

The Northern Mindanao Regional Training Hospital is a general tertiary teaching-training hospital which serves promotive, preventive, curative and rehabilitative patient care. It is the flag bearer of all government hospitals servicing within the region and some other nearby regions; a referral center catering to all seven provinces and seven cities of Region 10. This 200-bed capacity hospital, operating for the past 63 years, is situated in the heart of Cagayan de Oro City within the eleven thousand square meters (11,000 sq. meters) area of the capital compound.

Its service capabilities includes general surgery, orthopedics, internal medicine, cardiology, nephrology, neuro-surgery, obstetrics/gynecology, pediatrics, ophthalmology, EENT, pathology, rehabilitation services, psychiatry, pulmonary and other subspecialties including laboratory, sonographic and radiologic diagnostic procedures.

Accomplishments :

For 1996, it admitted 181 members for asthma cases; 142 patients for diabetes clinic; 6 outreaches for Breastfeeding Community Outreach. It had 4 Anti-Smoking trainings; 227 patients for minor surgical (in-house operation); and 157 patients for People's Health Day (major surgeries). For Community Heart Center, there were 1,870 in-patients accepted; 798 volunteers/donors for the Inter-GO, NGO Voluntary Blood Donation Program; and 10 outreaches for community outreaches (medical-surgical).

The accomplishment for in-patients served is 102.33%, 120.04% for out-patients served and 102.62% discharges.

SAN LAZARO HOSPITAL

Operational Description :

San Lazaro Hospital in its 418 years in existence still functions in serving those afflicted with infections and communicable diseases. It is mandated by the Department of Health as the National Special Hospital and referral center for infection and communicable disease. The authorized bed capacity is 900 beds, however, the actual implementing bed at present is 643.

It actively participates in responding to emergency cases including trauma cases covered by the Stop DEATH in coordination with the Disaster Management Unit of the DOH.

Accomplishments :

The hospital admitted 34,202 patients of which 29,458 or 86.13% recovered and attended 92,604 OPD patients. Provided services on special areas such as Bahay Lingap (HIV) Rehabilitations Center with 36 patients, diabetes clinics with 1686 patients, dogbites consultation with 23,977 patients and employee medical services with 264 patients;



and employee medical services with 264 patients.

Implemented DOH programs such as Stop DEATH Medical Mission responding to 10 emergency calls and Center for Wellness Program like the Sangkap Pinoy (ASAP) with 150 beneficiaries. Implemented the Fellowship Training Program accredited with PSMID with two trainees and accommodated residency training of 27 medical officers, trained 12,640 affiliates in medical, nursing, para and allied medical students, continued providing facilities and services for the networking activities of the DOH.

For this year, San Lazaro Hospital expanded its services not only in the curative aspects but also in the preventive/promotive aspect of infectious diseases by providing public awareness on how to prevent and control these disease through the tri-media such as production of I.E.C. materials, lectures and health teachings, TV and radio guestings of medical specialists.

The recent accomplishment is the active participation in the just concluded Asia Pacific Economic Cooperation (APEC) meeting in the Philippines, wherein the hospital deployed 30 hospital staff.

For CY 1996, San Lazaro Hospital received total allotment of P231,443,690.00 which included the continuing allotment of P50,065.00. The utilization for personal services (100-00) is 88.77%, operating expenses (200) is 80.49%, capital outlay (300) for equipment is 96.54% and 24.81% for building and structures.

For 1996, there were 34,904 admitted patients served, 92,604 out-patients, 34,202 discharges, 86% bed occupancy rate, 1.05% net death rate, 9 resident trainees III, 340 health workers trained and 12,640 students (affiliates) trained.

Completion of discharges summaries is 85%, 90% processing of medical reports, 7 minor surgeries performed and 0.24% autopsy.

PHILIPPINE ORTHOPEDIC CENTER

Operational Background :

The Philippine Orthopedic Center (its 5th name by virtue of RA 8766 dated 29 November 1989) was established in February 9, 1945 as a special government hospital then known as the Philippine Civilian Affairs Unit No. 1 General Hospital or simply PCAU1. As a special government facility it provide health care delivery services along cases in traumatology, orthopedics and rehabilitation medicine.

The POC is a tertiary level special hospital and training facility under the DOH providing health care and other related conditions including rehabilitation of the physically disabled. The Center is committed to deliver high quality care and services that respond to the needs of Metro Manila community and other areas all over Luzon, Visayas and Mindanao.

Accomplishments :

The year 1996 capped another milestone of meaningful and responsive services to the needs of our clientele - the injured, the handicapped and the disabled.

The POC had a total of 975 staff officials and employees for the year 1996 complimenting the three major divisions of the hospital namely: Medical, Nursing and Administrative. These hospital staff have responded with substantial results in providing health care services in the specialized field of treatment of trauma cases, musculoskeletal disorders and other related conditions including the rehabilitation of the physically handicapped.

For CY 1996, the POC had a total approved budget of P209,380,000.00.

The POC registered 494 average number of in-patients per day, 190,656 out-patients served, 7,766 total discharges, 5,420 major surgeries, 8,352 minor surgeries and the actual bed occupancy rate is 80%.



The other hospital units also served a significant number of patients. There were 107,619 radiologic examinations, 277,068 laboratory examinations done, 670,118 doctor's prescription filled, 564,267 diets served, 903 ambulance conduction, 9,940 dental procedures done, 88,123 P.T. treatment sessions, 10,010 O.T. patients, 21,317 medical social services, 4,900 psychological and vocational services.

The POC provided education and training to students from various affiliated schools, colleges and universities, majority of which are nursing, medical technology and physical and occupational therapy students. From January to November 1996, there were 9,153 student affiliates.

There will be a total of 20 resident physicians who are expected to complete their residency training in the different training programs at the end of the year 1996.

Our Prothetics and Surgical Appliance Factory (PASAF) has manufactured and released to patients the following prescribed orthopedic appliances: 549 spinal orthoses, 38 upper ext. orthoses, 102 lower ext. orthoses, 3 shoes and modifications, 35 prosthesis, 333 jaipur.

The other major thrust of POC is in the field of basic and clinical research. In 1996, the various medical services had a total research output of 22 with different titles.

A total of 45 training programs were conducted from January to November 1996 both in-house and live-out. There were 264 employees-participants who attended these training programs.

In general, we have managed to improve our hospital facilities and updated our medical inventory. Foremost in this developmental effort are the various non-infrastructure projects on-going as of the date.

MARIANO MARCOS MEMORIAL HOSPITAL

Operational Description :

Mariano Marcos Memorial Hospital and Medical Center is located in Batac, Ilocos Norte and categorized as a tertiary, teaching and training hospital. It covers a land area of 2 hectares along the National Highway, 470 km. north of Manila. Programmed as a Medical Center, it caters not only to the medical needs of the aggregate population of Batanes and Cagayan in the north, Kalinga, Apayao and Abra in the west and Ilocos Sur on the south.

Accomplishments :

For 1996, the recorded actual net death rate was 1.87%, .25% for maternal death rate, .67% infant death rate, 2.14% neonatal death rate and 22.56% CS rate (Cesarian Section rate). The total admission was 11,707; 63,349 total OPD consultation excluding ER; 725 total major operations; 543 total minor operations; 342 total C.S. operations; 833 total OPD operations; 12,913 total X-ray procedures; 141,641 total laboratory examinations, 898 total ultrasound examinations; 37 total referral to other hospitals; and 117 total referrals from other clinics/hospitals.

The accomplishments of development programs in Anesthesia Department, Obstetrics and Gynecology, Pediatrics Department, laboratory including Blood Bank for HIV testing and Ophthalmology Department have been made. The hospital has put two new important and tangible services, the Hemodialysis Unit and the Acute Psychiatric Unit.

The Quality Assurance Program has been implemented. The Quality Assurance related committee were made operational and existing quality assurance related committee were strengthened. The People's Health Day which was launched on September 29, 1995 is complete with free medicine and dental consultation, free surgical operation and free medicines. Health teachings on the DOH Programs were being imparted to patients



and patient's relatives. Since its launching, these activities were being done every last Friday of the month for the whole duration of 1996.

The hospital management of MMMH has thought of innovation or strategies that could be offered to patients and to the community such as payment in kind implementation, clean and green program, central committee on procurement, operation Tipid Program, outreach program, blood typing and blood letting in depressed and distant barangays, color coding scheme for waste disposal, setting-up of the emergency kit and to encourage staff to perform well. MMC has given due recognition and cash incentive for the "cleanest department"

NATIONAL CHILDREN'S HOSPITAL

Operational Background :

The National Children's Hospital is a special, training and tertiary hospital mainly concerned with the quality care, treatment and prevention of special types of diseases of children, promotion of general health, education and training for specialization and research on pediatric diseases and general administration and support services for the patients. It is a 250-bed hospital located at E. Rodriguez Sr. Blvd., Q.C. on a 4,400 sq. m. lot, with an authorized permanent positions of 429, operation of which is financed by the national government.

Accomplishments :

For 1996, there were 98,951 no. of consultations recorded which exceeded the annual target of 89,000. For the annual immunization target of 5,000, 2,776 were immunized, 12,880 admitted (8,000 target) and 12,659 discharges (8,000 target). There were 170 major operations done and 36 minor surgeries. There were 185,715 prescriptions filled, 281,923 laboratory tests conducted, 6,584 X-ray examinations, 641 ultrasound examinations, and 180 ECG examinations, 3,129 blood gas analysis, 3,734 dental services.

For education, training and research, there were 2,127 students affiliates trained, 15 post graduate, 78 trainees trained, 244 staff trained and 15 researches done.

A total of P136,406,170 release of allotment was received, P115,301,909.05 was obligated bearing a balance of P21,104,260.90

ILOCOS REGIONAL HOSPITAL

Operational Description :

Ilocos Regional Hospital was established in 1945 as a first aid center. Since then, it had continuously provided the needed health services to its clients, particularly in the last 12 years, where its capabilities in the area of services, training and research tremendously contributed in improving the health status of the people in Region I.

At present, the Ilocos Regional Hospital is a 200 bed tertiary level teaching and tertiary hospital facility located at San Fernando, La Union. Its catchment areas include Pangasinan, La Union, Ilocos Sur and Ilocos Norte. The hospital is fully departmentalized and equipped with the service capabilities needed to support certified medical specialists and other licensed physicians rendering services in the field of Medicine, Pediatrics, Obstetrics-Gynecology, Surgery, its various subspecialties and Ancillary services. Its training program in nine (9) out of ten (10) programs are accredited with the respective Specialty Accredited Boards.

Accomplishments :

For 1996, five (5) major goals were set forth; (1) investment of appropriate resources to make the hospital a focal center for health services; (2) utilization of expertise on training to influence/reform prevailing health system in the region; (3) the pursuit of innovative mechanisms to strengthen existing system; (4) improvement of long term viability and (5) improvement of performance indices.



Teaching and training accomplishments include full specialty accreditation of anesthesia, two year specialty accreditation of orthopedics, setting-up of Internet, three separate clinical research contest with 38 research papers, graduated 8 residents, Volume 4 of Ilocos Regional Proceedings published, won highest award for research (Raul Rivas Award) from PMA, 2nd prize-PCS, Northern Luzon Chapter Research Contest and finalist of the 2nd PMA Clinical Case Presentation.

Other accomplishments include special projects like People's Health Day with free goods and services. The Foreign Medical Mission (Interplant Medical Mission, Ohio, USA) also gave free goods and services. The Innovative Program which made use of Indigent Identification Card to avail of free goods and services, barangay-based Voluntary Blood Donor's Registry, barangay-based Health Insurance, Adopt-a-Barangay Part II, Family Health Guide, Operation Linis Tenga, Operation Smile, Health Registry, Integrated Computerization at OPD and others.

The actual net death rate from January to November, 1996 was 2.12%, 1.99% post operation death rate, .37% maternal death rate, 3.20% infant death rate, 1.59% neonatal death rate, and 5% infection rate.

The ten leading causes of discharges (January to November, 1996) were deliveries (all types), community acquired pneumonia, fracture (all forms), blunt trauma, PTB, abortion, age with severe sign of DHN, hypertension, sepsis, bronchial asthma. The ten leading causes of mortality from January to November, 1996 were PTB Class II, active, CVD, Hge, prematurity/HMD, myocardial infraction, hypovolemic shock, age with severe sign of DHN, RHD, Tetanus, liver disease and RHD stage IV.

NATIONAL KIDNEY AND TRANSPLANT INSTITUTE

Operational Background :

The National Kidney and Transplant Institute, formerly known as National Kidney Institute, has been in the forefront of Philippine medicine in terms of providing quality specialized medical services, training and research. NKTI is particularly known for its successful kidney and other organ transplantation programs.

The Institute's outreach programs has also gone a long way. This includes the Preventive Nephrology Project of the Department of Health with NKTI as the lead agency. Initially, four (4) million public school children were tested for urinary screening wherein 24 percent are found to have abnormal results. These children are now being subsidized by the project for their treatment. The NKTI was also able to equip eighteen (18) hospitals with dialysis machines and supplies as implementing agency of the joint Dialysis Center project of the PCSO and the DOH.

With these projects, the NKTI is able to extend nationwide its mission of providing medical services to patients diagnosed with kidney ailments and allied diseases.

The hospital offers services such as : transplantation, dialysis, and specialty services. It is the country's foremost center for training in Nephrology, Urology, Transplantation, and Dialysis for physicians, nurses, and other paramedical workers.

Special projects include:

- DOH-NKTI Preventive Nephrology Project
- PCSO-DOH-NKTI Dialysis Center Project
- DOH STOP DEATH Program
- NKTI as Center for Wellness
- Networking with the NGO's,GO's and Individual Benefactors
- Moral Recovery Program



Accomplishments :

The hospital has recorded:

Hospital Occupancy Rate	82%
Service patient at Pay Beds	17%
Number of In-patients	8,620
Out-patient visits	62,800
Dialysis Sessions	
Hemodialysis	8,460
Peritoneal	2,900
Transplant Operations	
Kidney	106
Liver	1
Surgical Operations	4,074

COTABATO REGIONAL HOSPITAL**Operational Background :**

Cotabato Regional Hospital is a 200-bed capacity hospital, tertiary second level regional teaching and training hospital in category. It is located in Cotabato City that caters to the health needs of the people in Region XII and the two administrative provinces of the Autonomous Region in Muslim Mindanao (ARMM). It has an estimated total population of 3,599,889 as of 1993 and with an average growth rate of 3.2% and 3.7% respectively. It is mostly inhabited by Muslims and Christians.

Accomplishments :

Out-patients served	78,601
Dental patients served	9,218
ER patients served	21,220
Discharged	19,140
In-patient Day	76,394
Bed occupancy rate	107
Net Death rate-Below 48 hrs.	3.04
After 48 hrs.	1.42
Surgeries Performed :	
Major	2,302
Minor	954
BTL	634
Minor (OPD)	1,150
Residents in training	35
Special Programs	

No. of programs implemented	22
No. of persons served	67,751
People's Health Day	
Major surgery	238
Minor surgery	109
Consultation	6,233
Outreach PHD	3

VICENTE R. SOTTO MEMORIAL MEDICAL CENTER**Operational Background :**

The Vicente Sotto Memorial Medical Center (VSMMC) formulated its goals and objectives illuminated by the philosophy that the provision of preventive, promotive, curative and rehabilitative health care should be holistic partnership with individual, his family and community. With this philosophy, VSMMC directed more of its services to the disadvantaged and underprivileged section of society taking cognizance that they should be allowed to participate in their own health care.

Issues such as lack of gender responsive concerns in programs, inadequate pro-poor program, programs addressing the needs of maternal and child health, rising cost of drugs and medicines and the need to focus on work ethic and the spiraling population rate, were some of the issues taken into consideration in the formulation of the targets for the year 1996.

Accomplishments :

The VSMMC Child Survival Center implements/coordinates ten (10) programs:

1. Expanded Program on Immunization
2. Control of Diarrheal Diseases
3. Control of Acute Respiratory Infections
4. Maternal Care
5. Breastfeeding
6. Under Five's Clinic
7. Vitamin A Deficiency
8. IDD/Iron Deficiency Anemia
9. Rehabilitation of Malnourished Pre-schoolers
10. Family Planning



The Center has also been very active on the Program of Hospitals as Center of Wellness, emphasizing on promotion and maintenance of health initiating health campaigns participated by the hospital, organizing a mother's volunteer group, and integrating inter pregnancy maternal care for under five children consulting the Under Five's clinic. The Center has also been active in promoting health among VSMMC employees and their dependents.

The VSMMC also implemented the following health campaigns:

1. Knock-out Polio
2. Sangkap Pinoy
3. Nutrition Month
4. Breastfeeding Week

The ten (10) leading causes of morbidity are: pneumonia, acute diarrhea, skin infections, scabies, parasitism, systemic viral infection, ear infection, dog bite, bronchial asthma.

The Center performed 154 major surgeries and 161 minor surgeries from January to November 1996.

DR. JOSE FABELLA MEMORIAL HOSPITAL

Accomplishments :

For 1996, the hospital conducted various training programs both for foreign and local participants for its Administrative Service, Medical Service, Nursing Service, Comprehensive Family Planning Center and for its School of Midwifery. It has also completed a total of 31 medical researches and several outreach activities.

For patient care, it has admitted a total of 88,366 in-patients, 36,423 deliveries, 145,420 out-patients, 34,056 pediatrics cases, 8,250 medical, 260 surgical, 68,912 OB-Gyne cases, 13,208 dental, 12,986 FP acceptors. It has immunized 50,803 patients both mothers and babies/children. It conducted 86 fact-finding investigations of DPLs and medical clinic for OCWs.

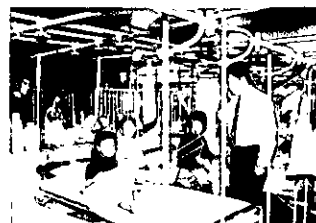
As part of the resource management and development, personnel were sent for various seminars and trainings. Coordination with other agencies like UP-CPH for masteral course and Joint Commission International (JCI) for observation tour abroad were done.

To sell program through advocacy, IEC and social mobilization, financial assistance were provided to DIRFO and other DOH offices. Dialogues with local officials, medical clinic for OCWs and medical ancillary services and/or office was also done.

As part of health information and exchange, consultative and advisory services were done, memo and bureau circulars were published and monthly reports of medical clinics of OCWs were prepared and processed.

For research and development, surveys of lying-in clinics, review and study of hospital capabilities from the period 1988-1992 were done.





REGIONAL HEALTH OFFICES HIGHLIGHTS OF ACCOMPLISHMENTS

REGION I

REGULAR AND SPECIAL PROGRAMS

- 6 hospitals were accredited Mother and Baby-Friendly Hospital, bringing to 44 the number of hospitals (13 private and 31 government) accredited
- Breastfeeding Counselling Course for RHU nurses was conducted (first of its kind in Region I)
- As part of the Fortification for Iodine Deficiency Elimination (FIDEL) strategy, Region I piloted a community-based salt monitoring survey using a bit quality assurance sampling in La Union to assess the quality in terms of iodine content of salt and determine the trend of usage of iodized salt at the household level. Children were advised to bring salt for testing.
- Launching of "*Tsaang Gubat Project*" in the entire region on February 3-9.
- Introduced Directly Observed Treatment of Short Chemotherapy or "*Tutok Gamutan*" Strategy in July 1996.
- Organized a Regional Dengue Task force
- Conducted a province - wide elimination campaign in Ilocos Norte from January - April
- Began publishing the "*Epidemiology Report*," the official newsletter, on a quarterly basis which deals mostly on results of studies conducted, prevailing diseases and other public health concerns
- Launched program on the hospital-based surveillance on injuries secondary to road-traffic accidents
- Piloted Healthy Hospital Initiative in government and private hospitals in La Union
- Launched the multi-sectoral launching of the Healthy Prison Initiative
- Managed the Herbal Nursery in San Pedro, Mabini, Pangasinan.

INNOVATIVE PROGRAMS

1. *Indigents Identification Card*

Out of 615,989 households in the province of La Union, 14,000 used Indigent Identification

Cards to avail of free goods and services

2. *Barangay-Based Voluntary Blood Donors Registry*

A blood donors brigade was organized in all 20 municipalities of La Union: two (2) blood bank refrigerators were purchased and provided by two congressmen; and the La Union blood recruitment and distribution center was rendered operational.

3. *Barangay-Based Health Insurance*

The Ilocos Regional Hospital (IRH) and Organization for Rehabilitation & Training (ORT) health plans were tied up. ORT is an NGO actively participating in Primary Health Care. There were 313 households (average of 6 members) from 16 municipalities of La Union enrolled in the plan, out of which 72 out-patients and 35 in-patients have been served.

4. *Adopt-a-Barangay Part II*

Baroro, Bacnot and Sevilla, San Fernando in the province of La Union are the adopted barangays. Color-coding of health needs, health interaction/health discussion, and translation of hospital programs into community-based programs were done in these barangays.

5. *Family Health Guide*

This is a simplified guide for the common tao about everything they want to know about the most common illnesses. It is written in the local dialect and 3 presented in comics style. Four hundred copies were reprinted and are also used during health education sessions.

6. *Operation Linis Tenga*

This project emphasizes the preventive-promotive aspects of otologic problems. It was done among Grade VI pupils in six (6) randomly selected public schools and corrected the poor recognition by teachers of hearing problems.

7. *Operation Smile*

This consists of correction of the backlog in cleft lip and cleft palate by utilizing resources

and expertise of local and foreign specialists. It is part of the continuing IRH-Interplast Medical tie-up which has benefited 71 patients this year at completely no cost to the patient and the hospital.

8. Health Registry

Identification and listing of Morbidity patterns and surgical backlog in La Union were done.

9. Integrated Computerization at OPD

This, done with five computers and programs, were established at no cost to the government.

10. Ongoing activities that have been in existence for more than two years are the following:

- a. Health in Every Home Project - the development of health advocates in all homes.
- b. Revenue Enhancement Program - the generation of additional funds to support hospital organization.
- c. Payment-in-kind - a non cash payment for hospital goods and services as an alternative mode of recovering cost of hospitalization
- d. "Bantay Village" housing program - a home away from home, a community within a community. The village is made up of 5 nipa huts where relatives of-out-of-town patients may stay. It is also used as a venue for other health related activities.
- e. A patient satisfaction questionnaire, devised by the IRH Chief, is used as a tool for upgrading hospital services.

REGION II

1. Conducted a Search for Outstanding Knock Out Polio Performer at the municipal, provincial and regional levels
2. Three (3) hospitals in Isabela province were awarded Mother Baby-Friendly Hospital, i.e., San Antonio Municipal Hospital, San Mariano Medicare Community Hospital and Jones Medicare Community
3. "Tepok Lamok, Dengue Sapok" launching in Divisoria, Enrile
4. Celebrated World No Tobacco Day by holding a Sportsfest participated in by the different regional agencies

5. Conducted a contest on Search for a Healthy Barrio and awarded prizes to the winners in three (3) categories

Innovations Done

- Inclusion of LGUs, NGOs and Provincial/ Municipal health staff during monthly regular staff meetings
- Procurement of communication facilities
- Tied-up with the academe and NGOs for a birthing center and St. Paul University for a joint implementation of PHC activities such as community organization and outreach projects
- Regular cable TV program to discuss health programs and preventive measures

REGION III

1. Organized medical teams in relation to APEC
2. Conducted the following research studies:
 - Prevalence Survey of Smoking in Region III
 - Feasibility Study on the Establishment of a Herbal Processing Plant in Central Luzon

REGION IV

1. Regional launching of TKO on May 26, 1996 in San Jose, Batangas while simultaneous launchings were conducted in other parts of the region
2. Expanded the Participatory Action Research for Community Health Improvement (PARCHI) to other provinces which enhanced the active participation of all sectors of the society
3. Conducted the following researches:
 - Awareness and Utilization of Herbal Medicines Among Hospitals, Health Centers and Households in Region IV
 - The Herbolario of Region 4: A Potential Para-Rural Doctor for National Health Development



REGION V

1. Hired and fielded additional health personnel to the underserved depressed areas of Masbate for the Social Reform Agenda
2. Conducted the 1st Regional Consultative Conference for the Preventive Nephrology Project by the National Kidney and Training Institute wherein the Regional and Provincial Boards were organized
3. Conducted YEAH assessment and consolidation workshop which was attended by the advisers, student editors and health educators from the provinces of Region V
4. Conducted first YEAH Provincial Summer Camp for the province of Catanduanes
5. Conducted Regional Workshops on Adolescent Reproductive Health and HIV/AIDS Prevention and Control
6. Conducted capability building for devolved health personnel
7. Distributed Vitamin A supplementation and iodized oil for child-bearing women which registered performance of above the mid-decade goal "ASAP" accomplishment
8. Provided toilet facilities to households which achieved a high percentage of accomplishment due to the support of First Water Supply, Sewerage & Sanitation Sector Project

REGION VI

1. Assessed and awarded 10 more hospitals as "Mother Baby Friendly Hospital" with a total of 62 hospitals accredited
2. Assisted the Local Government Units in the implementation of DOH flagship programs
3. Worked for the adoption of Social Reform Agenda/Minimum Basic Needs Concept in health programs/projects
4. Provided more responsive technical, logistic and financial support to LGUs in meeting the health related minimum basic needs of their respective areas
5. Promoted a more dynamic partnership with the LGUs, Other Government Agencies, Peoples

- Organizations and private sector groups
6. Strengthened implementation/enforcement of policies, standards and regulations
 7. Maintained functional Disaster Teams for quick response in times of disaster and epidemics
 8. Continued support to research activities
 9. Improved the health information and data management
 10. Disseminated appropriate information, education and communication strategies and materials on priority programs
 11. Initiated revision/improvement of the monitoring and evaluation system
 12. Improved the management of the limited health resources, (manpower, logistic, finances)

REGION VII

1. Revitalized eight (8) selected district hospitals for voluntary surgical sterilization outlets
2. Conducted research entitled "Use of Permethrine-Treated Curtains in Dengue Vector Control"
3. Expansion of National Tuberculosis Program DOH-JICA Project to entire Cebu Province
4. Conducted outreach missions to the provinces of Cebu - 67, Bohol - 96, and Negros Oriental - 49
5. Conducted disaster management during the "Gretchen Tragedy" at Bantayan Island
6. Establishment of Cebu Blood Donors Society that is responsible for the recruitment of ROTC graduates with experience in blood donation in the colleges and universities for the voluntary blood donation at least once a week
7. Establishment of 300 SPARTANS, an organization of blood type "AB" with the concept of walking blood donor and the essence of brotherhood instilled that like brothers and sisters, a person is obliged with feelings to help somebody in need. At present there are 25 members

REGION VIII

1. Conducted Hospital Based-Diabetes Education and Treatment Clinic in selected district hospitals
2. Implemented networking - a consortium of researches



3. Piloted Diabetes Education and Treatment Clinics at three (3) district hospitals and one (1) provincial hospital

REGION IX

1. Deployed six (6) doctors to doctorless areas for the Doctors to the Barrios Program
2. 10 units of Water for Life Project completed 55 units of Water for Life Project on-going
3. Trained 156 participants on Community-Based Planning and Management on Nutrition
4. Organized 185 Barangay Water and Sanitation Association

REGION X

1. Successful launching of Tsaang-Gubat as a mouthrinse or tea for oral health last February 16
2. Launched Tepok Lamok, Dengue Sapok or the Four O'Clock Habit last August 21
3. Organized a Regional Transition Action Team in June to thresh out devolution issues/problems
4. An interagency parade followed by Hataw 2 Exercise highlighted the Women's Health Day Celebration last March 8
5. Conducted the following activities to sustain the Mother and Baby Friendly Hospital Initiatives (MBFH) program:

- Training courses on Lactation Management Education Breastfeeding Counselling
- Regular MBFHI regional pre-assessment of hospitals
- Organization of the Regional Milk Code Monitoring Task Force
- Orientation/consultative meeting with milk company representatives, medical and paramedical organizations

REGION XI

1. Provided psychosocial care to victims of, as well as to the direct service/providers the cholera outbreak in Banganga, Davao Oriental.

2. Conducted mercury level examination not only among miners and community members of Mt. Diwata but also among school children in Apokon Central School.
3. Piloted 1 RHU/ province/city throughout the region for Directly Observed Treatment Short Course System in NTP.

4. Provided intra-ocular lens to all operated cataract patients on Outreach Project thru NGO (Lion's Club) participation.

5. Participated actively during the APEC held in Davao City.

6. Contained the cholera epidemic in Banganga, Davao Oriental in just 18 days

7. Provided immediate and timely response during Cholera epidemic in Davao Oriental, South Cotabato, and General Santos City.

8. Hosted the month-long Mindanao-wide Acupuncture Training conducted by Chinese Traditional Medicine Practitioners.

9. WIN-HEALTH XI embarked remarkable activities in terms of:

I. Implementation of:

- a. Local Area Networking (LAN)
- b. Internet

II. Software development:

- a. Purchase Order Requisition Issue Voucher Program, currently used by Supply Office for PO and RIV monitoring.
- b. Blood Program, currently used by DOH-RFO XI Laboratory for blood donation registration.
- c. File Utility Transfer Program, (available in LAN)

III. Conduct of trainings:

- a. Windows for Health Managers, Part I (Windows 3.1, and Winword)
- b. Windows for Health Managers, Part II (Power Point and Excel)



10. Conducted three (3) Surgical Outreach with Davao Medical Center and Davao Regional Hospital in Klamba, Sarangani Prov.; Nabunturan, Davao Province and Paquibato, Davao City.
11. Operationalized Herbal Research and Processing Plant, Region XI - the only herbal plant in the Philippines to pass the Good Manufacturing Practice per BFAD criteria.

REGION XII

1. Malaria Control Program
 - 6,027 cases were clinically diagnosed representing 0.32% of the total endemic population
 - 528 or 0.03% confirmed cases were given 100% treatment
2. Schistosomiasis Control Program
 - 16,229 stools were examined
 - 736 cases found positive
 - 670 or 91.03% were given treatment

CARAGA - REGION XIII

1. Organized Regional Transaction Action Teams; Regional Information Technical Assistance Teams; and Interagency Committee for Environmental Health
2. Conducted press conference and media updates on public health programs and projects
3. Launched special activities:
 - Knock Out Polio
 - ASAP
 - Hataw
 - Alay sa Pamilya
 - Tutok Gamutan
 - Anti-Smoking
 - Four O'Clock Habit
4. Deployed doctors under Doctors to the Barrio Program to doctorless areas
5. Provided technical assistance and direct services to LGUs and other agencies

CORDILLERA ADMINISTRATIVE REGION (CAR)

1. Implemented Water for Life Project in the six (6) provinces with a total amount of P120,000.00
2. Completed four (4) public toilets
3. Distributed P5,000 worth of drugs to all Botica ng Barangay of 57 Comprehensive and Integrated Delivery of Social Services barangays
4. Conducted research on the use of iodized salt
5. Conducted cataract operation provided to 219 Extra Capsular Cataract Extract (ECCE), 24 of which were provided with intra-ocular lens

NCR

1. Launched Four O'Clock Habit
2. Conducted simultaneously the Symposium on Dengue Prevention and Control in seventeen (17) cities and municipalities of the region
3. Awarded cities of Manila and Pasay the Act on Salt-Iodization Nationwide Award for their efficient implementation of the Fortification for Iodine Elimination Program
4. Classified as High Performing Region for Knock Out Polio Campaign
5. Pilot area for Mass Measles Control Project

Innovations done:

1. Strengthened regional units
 - * Regional Epidemiological Surveillance Unit institutionalization
 - * Setting up of hospital licensing and regulatory unit
 - joint monitoring and evaluation visits done by RHO/DHO
 - * Strengthening of Area
 - DHOs designated as DOH representatives
 - * Monthly consultative meeting with rank and file
 - * Direct regional support to focused individuals/groups/areas
 - * Intensified social mobilization/advocacy activities





SECRETARY IN ACTION



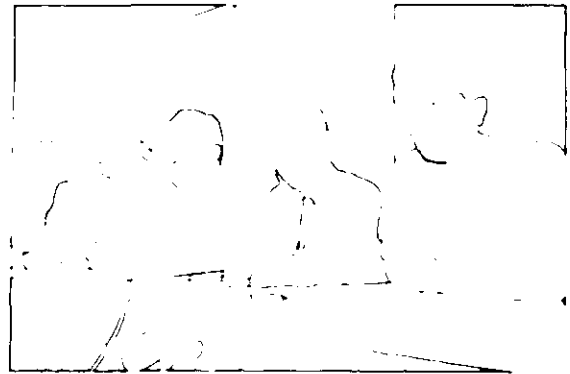
Awarding Ceremonies for the Top Twenty Five Healthy Workplace with Secretary Carmencita N. Reodica & Fidel V. Ramos



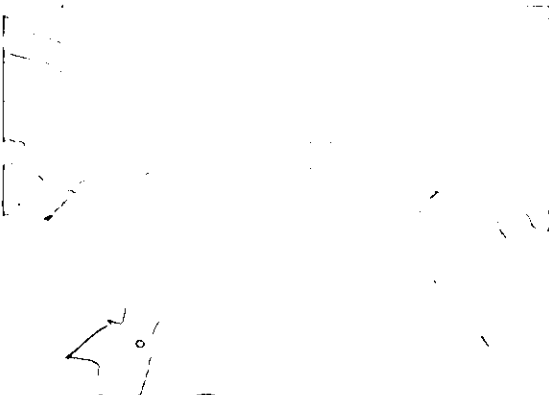
Guest speaker : Sen. Freddie Webb on the Launching Ceremonies : Manual of Standards for Blood Bank and Blood Center in the Philippines.



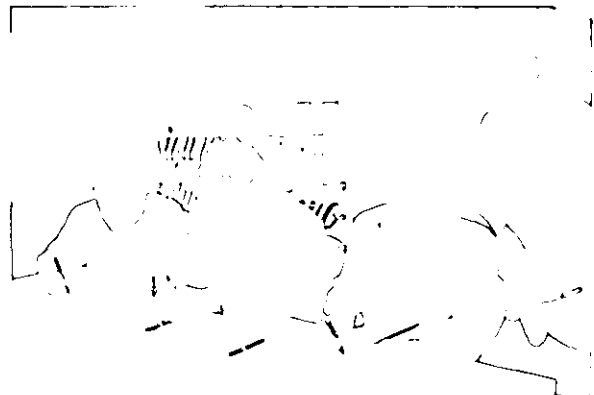
Signing of MOU (Memorandum of Understanding) between the Department of Health and Insurance Health



Press Conference on Oplan Sagip Mata



Secretary Carmencita Noriega-Reodica on the pre-launching of Tepok Lamok-Dengue Sapok



Launching Ceremonies : Manual of Standard for Blood Banks & Blood Center in the Philippines.

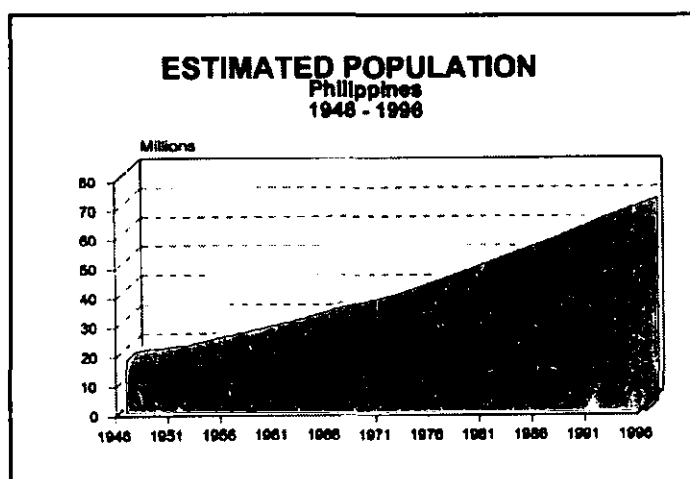


A. VITAL STATISTICS

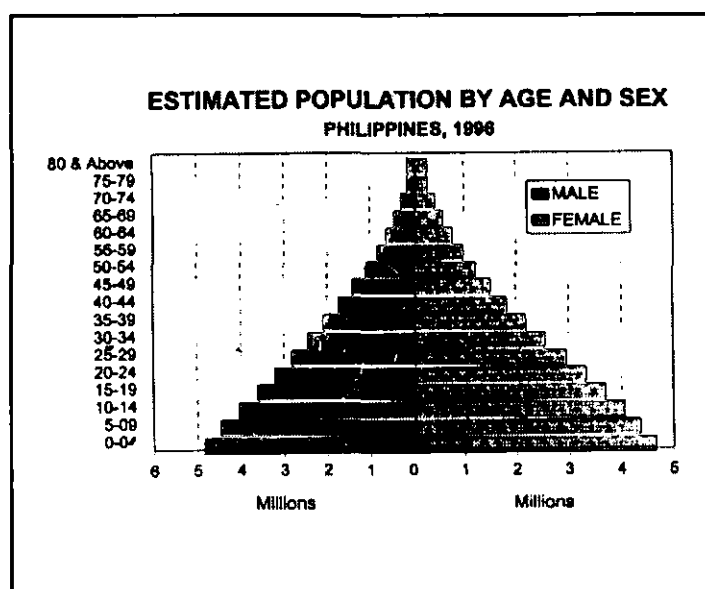
1. POPULATION

Based on the 1995 population census (POPCEN) the estimated population of the Philippines in 1996 is 69,946,205 (medium assumption), almost 1.6 million higher than in 1995. The estimated growth rate is 2.34%.

1.1 Population Trend



1.2 Population Pyramid



1.3 Regional Population Distribution

As to distribution, Regions 3, 4 and NCR are the most densely populated areas which comprise 26,865,295 or 38.4% of the total population while CAR is the most scarcely populated with 1,279,615 or 1.83%

PROJECTED POPULATION BY REGION PHILIPPINES, 1996			
REGIONS	TOTAL	MALE	FEMALE
Philippines	69,946,205	35,249,629	34,696,576
NCR	9,618,323	4,695,624	4,522,578
CAR	1,279,615	650,037	629,578
1	3,861,569	1,940,194	1,921,375
2	2,583,263	1,318,594	1,264,669
3	7,063,078	3,568,732	3,494,346
4	10,183,894	5,133,988	5,049,906
5	4,398,902	2,231,846	2,167,056
6	5,870,305	2,957,810	2,912,495
7	5,106,411	2,562,666	2,543,745
8	3,434,391	1,752,127	1,682,264
9	2,856,418	1,451,824	1,404,594
10	4,039,114	2,055,605	1,983,509
11	5,192,377	2,651,724	2,540,653
12	2,410,736	1,229,646	1,181,090
ARMM	2,047,820	1,049,213	998,607

1.4 Sex Ratio

The Philippine male population size has always been greater than the female population size with 35,249,629 males against 34,696,576 females in 1996 or a sex ratio of 106.6 males to 100 females. However, as age advances (50 & over), females predominate the males in population size.



**CRUDE BIRTH RATE (CBR) AND CRUDE DEATH RATE (CDR)
AND TOTAL FERTILITY RATE (TFR), BY REGION,
PHILIPPINES, 1996**

REGION	CRUDE BIRTH RATE (per 1000 pop'n.)	CRUDE DEATH RATE (per 1000 pop'n.)	TOTAL FERTILITY RATE
PHILS.	28.9	6.2	3.68
NCR	23.3	4.6	2.27
CAR	31.4	7.5	4.17
1	26.4	6.6	3.58
2	30.8	6.8	4.03
3	27.5	5.3	3.23
4	27.5	5.6	3.34
5	33.2	6.8	4.90
6	28.2	6.8	3.98
7	29.0	6.2	3.82
8	34.0	8.4	5.02
9	33.1	6.6	4.25
10	30.8	6.5	4.17
11	32.4	6.0	4.09
12	33.7	6.5	4.31
ARMM	29.6	9.1	3.79

Source : NSO

The CBR and CDR for 1996 were 28.9 and 6.2 per 1000 population, respectively, compared to last year's CBR of 29.5, and CDR of 6.3, showing a natural increase rate of 2.27. However, across regions, Region 8 and NCR posted the highest and lowest CBR, respectively, while CDR was registered highest and lowest in ARMM and NCR.

3. LIFE EXPECTANCY

The projected life expectancy at birth for Filipinos in 1996 was 65.13 years for males and 70.38 for females. By year 2000, life expectancy is estimated to improve to 66.33 for male and 71.58 for females.

4. TOTAL FERTILITY RATE (TFR)

The projected TFR in 1996 declined to 3.68 from 3.76 of the previous year. The highest TFR was observed in Region 5, while the lowest was in NCR.



B. DISEASES AND MORTALITY STATISTICS

1. Morbidity: Ten (10) Leading Causes, No. and Rate/100,000 Population, Philippines, 1993

DISEASES	NUMBER	RATE
1. Diarrhea	1,172,140	1,749.9
2. Bronchitis	814,806	121.5
3. Influenza	512,143	764.6
4. Pneumonia	500,073	746.6
5. TB, All Forms	145,740	217.6
6. Accidents	137,345	205.0
7. Diseases of the Heart	105,449	157.4
8. Malaria	90,648	135.3
9. Measles	78,731	117.5
10. Varicella	62,657	93.5

Source: NSO

2. Mortality: Ten (10) Leading Causes, No. and Rate /100,000 Population, Philippines, 1993

CAUSE	NO.	RATE	% OF TOTAL DEATHS
1. Diseases of the Heart	46,275	69.10	14.50
2. Diseases of the Vascular System	37,358	55.80	11.70
3. Pneumonia	35,582	53.10	11.10
4. Malignant Neoplasm	25,399	37.90	8.00
5. TB, All Forms	24,580	36.70	7.70
6. Accidents	13,477	20.10	4.20
7. Chronic Obstructive Pulmonary Disease & Allied condition	11,154	16.60	3.50
8. Other Diseases of the Respiratory System	6,955	10.40	2.20
9. Diarrheal Diseases	5,759	8.60	1.80
10. Nephritis, Nephrotic Syndrome and Nephrosis	5,510	8.20	1.70

Source: NSO



3.

**Infant Mortality Rate: Ten (10) Leading Causes, No. and Rate/1000
Livebirths, Philippines, 1993**

DISEASES	NUMBER	RATE
1. Pneumonia	7,631	4.54
2. Respiratory conditions of fetus and newborn	5,651	3.36
3. Congenital anomalies	2,366	1.41
4. Diarrheal diseases	1,661	0.99
5. Septicemia	1,252	0.74
6. Birth Injury and Difficult Labor	1,190	0.71
7. Avitaminoses and other Nutritional deficiencies	925	0.55
8. Measles	765	0.46
9. Goiter, Thyrotoxicosis Hypothyroidism and other Endocrine and Metabolic diseases	661	0.39
10. Other diseases of Respiratory System	591	0.35

Source: NSO

4.

**Maternal Mortality Rate: By Main Causes, No. and Rate/1,000
Livebirths Philippines, 1993**

DISEASES	NUMBER	RATE
1. Pregnancy occurring in the course of labor, delivery and puerperium	561	0.33
2. Postpartum Hemorrhage	340	0.20
3. Hypertension complicating pregnancy, childbirth and puerperium	308	0.18
4. Pregnancy w/ abortive outcome	179	0.11
5. Hemorrhages related to pregnancy	160	0.10

Source: NSO





A. FINANCIAL

In 1996, DOH had a total appropriation of P9,301,912,000 including P64,359,000 for Dangerous Drugs Board as its only remaining attached agency. This appropriation is 7.56% higher than in 1995 representing 15.35% of the social sector budget, 2.36% of national budget, and just 0.41% 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 expense class, the bulk (44.42%) went into Maintenance and Other Operating Expenses (MOOE) and the rest went into personal service (36.43%) and capital outlay (19.14%). Ranking of expense class was the same as that of previous year except that there was an increase in both personal services and MOOE at the expense of capital outlay which was relatively reduced.

On the average, the 1996 DOH appropriation can finance only P129.00 for each Filipino. In addition, if we incorporate the combined effects of accumulated reduction of our currency purchasing power due to general price increases (inflation) and population growth during the same year, the real per person appropriation is estimated to have been reduced to only P50.00 from P54.00 in 1995. This means that the 7.56% nominal increase in 1996 appropriation for DOH was not sufficient to finance inflation and population growth for the same year just to maintain the financial capability of DOH as compared to previous year.

B. MANPOWER

There were 2,544 positions in the central office distributed as follows:

Key officials	-	110
Technical	-	943
Support to Technical	-	394
Administrative	-	1097

Of the 943 technical staff, 80 were the Rural Health Physicians (RHP) -Doctors to the Barrios.

The DOH retained hospitals has an authorized total manpower of 3,469 medical doctors and 4,618 nurses. However, the actual personnel complement are 3,148 doctors and 4,498 nurses.

C. FACILITIES

There are 48 DOH retained hospitals with 20,930 beds classified into the following: a) 8 sanatoria - 4,420 beds; b) 4 specialty - 985 beds; c) 6 special - 6,775 beds; d) 2 research - 75 beds; e) 16 medical centers - 5,400 beds; f) 3 district - 250 beds; and g) 9 regional - 3,025 beds.

As to classification, medical centers are situated in all health regions, with a total of 16 hospitals composed of 5,400 beds. However, as to the number of beds, 6 special hospitals correspond to 6,775 beds, of which 5 are located in NCR.

As to distribution of these retained facilities, 41.7% or 20 hospitals with 11,735 beds are located in NCR, making health services more available to its populace. Region 10, Cordillera Administrative Region and Autonomous Region in Muslim Mindanao has one hospital each.

**DEPARTMENT OF HEALTH APPROPRIATIONS, 1992-1996
(INCLUDING ATTACHED AGENCIES)**

PARTICULAR	1992		1993		1994		1995		1996	
	AMOUNT	%	AMOUNT	%	AMOUNT	%	AMOUNT	%	AMOUNT	%
BREAKDOWN BY EXPENSE CLASS (In thousands Pesos)										
A. Personal Services	5,125,756	48.23	2,256,864	31.07	2,313,894	31.19	2,918,431	33.75	3,388,911	36.43
B. MOOE	5,061,960	47.63	4,180,185	57.56	3,725,994	50.23	3,654,946	42.26	4,132,333	44.42
C. CO	440,528	4.14	825,780	11.37	1,378,345	18.58	2,074,512	23.99	1,780,668	19.14
TOTAL	10,628,244	100.00	7,262,829	100.00	7,418,233	100.00	8,647,889	100.00	9,301,912	100.00
% Growth Rate		42.70		(31.70)		2.14		16.58		7.56
Rank Compared To Other Gov't. Agencies	(5th)		(6th)		(5th)		(5th)		(5th)	
REAL TOTAL APPROP. (In thousand Pesos at Constant 1995 Prices)	5,641,917		3,623,804		3,366,721		3,791,603		3,599,115	
% Relative to Social Sector Budget		23.09		17.01		15.48		17.07		15.35
% Relative to National Budget		5.46		2.35		2.30		2.23		2.36
% to GNP (Current prices)		0.78		0.48		0.42		0.45		0.41
Nominal Per Capita Budget (P)	164		110		108		123		129	
Real Per Capita Budget (P) at Constant 1995 Prices		87		55		49		54		50

Sources:

General Appropriations Act (Several Years)
National Statistical Coordination Board (NSCB)
Executive Board Resolution No. 11-93
NSCB, 1993 Phil. Statistical Yearbook
National Accounts of the Phil. (Several Years)
Technical Committee Report on Population and Housing (Updated), Dec. 1994

**DISTRIBUTION OF DOH RETAINED HOSPITALS
BY CLASSIFICATION, BY REGION,
PHILIPPINES, 1996**

REGION	SANITARIA		SPECIALTY		SPECIAL		RESEARCH		MEDICAL CENTER		DISTRICT		REGIONAL		TOTAL	
	NO.	BED	NO.	BED	NO.	BED	NO.	BED	NO.	BED	NO.	BED	NO.	BED	NO.	BED
NCR	1	2,000	4	985	5	6,750	1	50	6	1,700	3	250			20	11,735
CAR	1								1	400					1	400
CARAGA	1	120														
1									1	200			1	200	2	400
2													2	800	2	800
3									1	400			1	750	2	1,150
4	1	600											1	250	2	850
5	1	200							1	500					2	700
6	1	300							1	400			1	400	3	1,100
7	1	500			1	25	1	25	1	400			1	225	4	1,150
8							1	25	1	250					2	275
9	1	450							1	250					2	700
10									1	300					1	300
11									1	600			1	200	2	800
12	1	250											1	200	2	450
TOTAL	8	4,420	4	985	6	6,775	2	75	16	5,400	3	250	9	3,025	48	20,930

Source: Hospital Operations and Management Service, DOH



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D700

H1.11 An8 1996 / Department of Health annual report 1996

