



Republic of the Philippines  
Department of Health  
**OFFICE OF THE SECRETARY**

October 31, 2023

**MARY ANNE Z. DELA VEGA, CPA**  
Assistant Secretary  
Budget Preparation and Execution Group  
Department of Budget and Management  
San Miguel, City of Manila

**ATTENTION: SOFIA C. YANTO-ABAD**  
Director IV  
Budget and Management - Bureau-B


Dear Undersecretary Dela Vega:

This is to respectfully submit the Department of Health's Physical Report of Operations (DOH-wide and Central Office) for the 3rd Quarter of FY 2023, for your information and perusal.

For any clarifications, your concerned official may reach Mr. Lindsley Jeremiah D. Villarante or Ms. Mary Joy C. Padilla of the Performance Monitoring and Strategy Management Division through (02) 8651-7800 local 1432 or via email address at [pmsmdbar@doh.gov.ph](mailto:pmsmdbar@doh.gov.ph).

Thank you very much.

Very truly yours,

  
**KENNETH G. RONQUILLO, MD, MPH, CESO III**  
Undersecretary of Health  
Governance and Organizational Development Team

**QUARTERLY PHYSICAL REPORT OF OPERATION**  
As of September 30, 2023

Department: Department of Health  
Agency: Office of the Secretary  
Operating Unit: Office of the Secretary - All  
Organization Code (UACS): 130010300013

Program Expenditure Classification(PrExC)	UACS Code	PHYSICAL TARGETS					PHYSICAL ACCOMPLISHMENT					TOTAL	Variance	REMARKS	
		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter					
<b>PART A</b>															
<b>OO1: Access to Promotive and Preventive Health Care Services Improved</b>															
<b>HEALTH POLICY AND STANDARDS DEVELOPMENT PROGRAM</b>															
<i>Outcome Indicators</i>															
1. Percent of Universal Health Care Integration Sites that achieved the target number of Key Result Areas (KRAs) in the Local Health Systems Maturity Level (LHS ML)					100%	100%									To be reported in fourth quarter
<i>Output Indicators</i>															
2. Percent of policies issued based on the policy agenda list		20%	50%	75%	100%	100%	0%	0%	26.7%						Q1: 0/15 Q2: 0/15 Q3: 4/15  1. Office of the President Memorandum Circular 26 2. DOH-CHED JAO-0001 3. PhilHealth Circular 2023-0016 4. DC 2023-0452  There have been delays in the issuance of targeted policies due to the recent change in administration, recent issuance of a new medium-term strategy, changes in technical directions or policy options during policy development and consultations, and ongoing revision of the policy agenda to align with the current medium-term strategy.
3. Number of DOH research projects that have been used/cited as evidence in technical documents (i.e policies, plans, position papers, programs, DOH articles, official reports, and other policy documents)		1	1	1	1	4	4	1	1						Q3 2023 Policy Brief DM No. 2023-0330: Cost Effectiveness Evaluation Modelling of different COVID-19 vaccines in the Philippines for Emerging Variants of Concern issued September 20, 2023
<b>HEALTH SYSTEMS STRENGTHENING PROGRAM</b>															
<i>Outcome Indicators</i>															
4. Percent decrease in HRH gap in the identified priority areas based on HRH standards in primary care facilities					Equal or more than 50%	Equal or more than 50%									To be reported in fourth quarter
5. Percent of Health Facilities Enhancement Program projects completed within contract timeline					70%	70%									To be reported in fourth quarter
<i>Output Indicators</i>															
6. Percent of partners provided with technical assistance on local health systems development		100%	100%	100%	100%	100%	100%	100%	100%						Q1: 1,486 / 1,486 Q2: 1,368 / 1,368 Q3: 1,324 / 1,324
7. Percent of identified priority areas supplemented with HRH from National Health Workforce Support System (NHWSS)		100%	100%	100%	100%	100%	100%	100%	100%						Q1: 1,099 / 1,099 Q2: 1,099 / 1,099 Q3: 1,099 / 1,099
<b>PUBLIC HEALTH PROGRAM</b>															
<i>Outcome Indicators</i>															

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8. Percent of external clients who rate the technical assistance provided as satisfactory or better					100%	100%							To be reported in fourth quarter
9. Percent of fully immunized children					95%	95%							To be reported in fourth quarter
10. Percent demand satisfied with modern family planning methods					69%	69%							To be reported in fourth quarter; Target was reinstated from 81% as reflected in GAA to 69% due to the Philippine commitment to the FP2030 Global Partnership
11. Number of malaria-free provinces					66	66							To be reported in fourth quarter; Target was increased from 65 (as reflected in GAA to 66)
12. Number of filariasis-free provinces					44	44							To be reported in fourth quarter; Target was decreased from 45 (as reflected in GAA to 44)
13. Number of rabies-free zones (provinces)					9	9							To be reported in fourth quarter
14. Percent of people living with Human Immunodeficiency Virus (HIV) on Anti-Retroviral Treatment					70%	70%							To be reported in fourth quarter; Target was reinstated from 43% (as reflected in GAA to 70%)
15. Treatment success rate for all forms of Tuberculosis					90%	90%							To be reported in fourth quarter
<b>Output Indicators</b>													
16. Percent of LGUs and other health partners provided with technical assistance on public health programs		100%	100%	100%	100%	100%	104.09%	104.11%	100.00%				Q1: 2,419 / 2,324 Q2: 2,672 / 2,570 Q3: 3,210 / 3,210
17. Percent of received health commodities from the Central Office distributed to health facilities based on the allocation list		Varies per Region	Varies per Region	Varies per Region	Varies per Region	Varies per Region	84.27%	91.08%	79.28%				Q1: 1,850,669 / 2,196,096 Q2: 3,648,848 / 4,006,067 Q3: 3,986,762 / 5,028,409  Please see Annex for the regional breakdown of Q1, Q2 and Q3 accomplishment reports.
18. Percent of procured cancer commodities distributed to access sites		80%	80%	80%	80%	80%							To be reported in fourth quarter

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19. Percent of CHDs with no stock out of centrally procured major health commodities for Integrated Comprehensive Essential Service Delivery Package (ICESDP) as identified by the Programs		85%	85%	85%	85%	85%	94%	94%	100%				Q1: 15 / 16 - Corrected/Updated denominator DOH-SCMS directly delivered to provinces of Region IV-B Q2: 15 / 16 Stockout in Davao CHD for April and May 2023 Q3: 16/16
<b>EPIDEMIOLOGY AND SURVEILLANCE PROGRAM</b>													
<i>Outcome Indicators</i>													
20. Percent of epidemiological and public health surveillance reports generated and disseminated					90%	90%	99.61%	99.86%	99.79%				Q1: 1,985 / 1,994 (adjustment: 2,028/2,036 = 99.61%) Q2: 3,176 / 3,179 (adjustment: 2,196/2,199 = 99.86%) Q3: 2,380 / 2,385  *There are 8 CHDs were identified to be reporting by Q4.
21. Percent of Functional Regional Epidemiology and Surveillance Units (RESUs)					70%	70%							To be reported in fourth quarter
<i>Output Indicators</i>													
22. Percent of outbreaks and health events of public health concern requiring investigations are investigated by the Regional Epidemiology and Surveillance Units and/or the Epidemiology Bureau (EB)		90%	90%	90%	90%	90%	100%	100%	100%				Q1: 474 / 474 (adjustment: 502/502 = 100%) Q2: 600 / 600 Q3: 569 / 569  Epidemiology Bureau (EB) has set a 90 % target for investigation of health events, allowing for a 10% margin of events that cannot be investigated due to inaccessible areas. However, all the areas where health events requiring investigation are accessible.
23. Percent of technical assistance, capacity development, and other support provided by EB and/or RESU		90%	90%	90%	90%	90%	99.54%	99.61%	99.19%				Q1: 581 / 583 (adjustment: 429/431 = 99.53%) Q2: 11,507 / 11,511 (adjustment: 510/512 = 99.60%) Q3: 859 / 866  Reason for the adjustment of Q1 and Q2 accomplishments: In the previous quarter, ticket being addressed by SISDD were included in the total counts. However, upon clarification during the conduct of Management Review this is not considered as technical assistance hence total counts were adjusted.
<b>HEALTH EMERGENCY MANAGEMENT PROGRAM</b>													
<i>Outcome Indicators</i>													

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24. Percent of LGUs with institutionalized Disaster Risk Reduction Management for Health (DRRM-H) Systems					40%	40%							To be reported in fourth quarter
<b>Output Indicators</b>													
25. Percent of LGUs provided with technical assistance on the institutionalization of DRRM-H System		30%	40%	80%	100%	100%	38%	68%	97.06%				Q1: 459 / 1223 Q2: 836 / 1223 Q3: 1,187 / 1,223
<b>OO2: Access to Curative and Rehabilitative Health Care Services Improved</b>													
<b>HEALTH FACILITIES OPERATION PROGRAM</b>													
<b>Outcome Indicators</b>													
26. Hospital infection rate					<1%	<1%							To be reported in fourth quarter
27. Drug Abuse Treatment Completion Rate		85%	85%	85%	85%	85%	95%	96.36%	102.39%				People Who Use Drugs (PWUDs) who are originally expected to complete their primary drug treatment program from the previous rating period but had failed to do so and had completed their treatment and rehabilitation in the current rating period.
<b>Output Indicators</b>													
28. Number of policies, manuals and plans developed on health facility development		2	2	4	4	12	7	5	11				The exceeding of the target and over accomplishment for Q1-Q3 is due to several unplanned policies that were developed and issued out. Further, some of these issuances were directed to HFDB to be developed during this implementation year, which is not accounted for during the target setting done the previous year.
29. Percent of National External Quality Assurance Scheme (NEQAS) provided to Health Facilities by the National Reference Laboratories (NRLs)					90%	90%							To be reported in fourth quarter. Pursuant to the Department Circular No. 2017-0173, the annual reporting for this indicator is aligned with the timeline of quality assurance activities (i.e. registration, preparation of materials, distribution to laboratories, testing, etc.) which takes about one year.
30. Number of blood units collected by Blood Service Facilities		47,369	71,053	71,053	47,369	236,844	60,584	86,649	To follow				Q1 Total: 60,584 Q2 Total: 86,649 Q3 Total: Q2: NVBSP: 78,745 PBC: 7,904 Q3: NVBSP: No report submission as of October 27, 2023 PBC: 9,602

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31. Percent of in-patients, out-patients, and aftercare drug abuse cases managed		100%	100%	100%	100%	100%	113%	109.13%	102.96%				Q1: 26,318 / 23,253 Q2: 30,084 / 27,566 Q3: 28,640 / 27,817  The reason why the percentage of patients, out-patients, and aftercare drug abuse cases managed is higher than the 100% quarterly target is because there is an increase in drug cases managed by the DATRCs compared with the set target before the year started.
<b>OO3: Access to Safe and Quality Health Commodities, Devices, and Facilities Ensured</b>													
<b>HEALTH REGULATORY PROGRAM</b>													
<b>Outcome Indicators</b>													
32. Percent of health establishments and health products compliant to regulatory policies					75%	75%							To be reported in fourth quarter
33. Percent of Public Health Emergencies of International Concern (PHEIC) and/or Public Health Risks (PHR) rapidly responded at Points of Entry (POE)		100%	100%	100%	100%	100%	100%	100%	100%				Q1: 4 / 4 Q2: 4 / 4 Q3: 4 / 4  All PHEIC/PHR captured were responded through the following activities of the bureau: 1. Event-based surveillance 2. Indicator-based surveillance 3. COVID-19 response 4. Conceptualization, production, and dissemination of IEC materials and other trimedia
<b>Output Indicators</b>													
34. Percent of applications for permits, licenses, or accreditation processed within the citizen's charter timeline		85% (FDA)	85%	85%	85%	85%	80.30%	84.98%	86.23%				Q1: 45,944 / 57,213 Q2: 61,453 / 72,314 Q3: 84,362 / 97,836
		92% (OSEC)	92%	92%	92%	92%	99.98%	100.00%	99.96%				Q1: 6,874 / 6,887 Q2: 5,146 / 5,146 Q3: 5,557 / 5,559
		90% (BOQ)	90%	90%	90%	90%	98.31%	98.47%	93.92%				Q1: 12,183 / 12,392 Q2: 13,203 / 13,408 Q3: 13,006 / 13,848  Breakdown: 1. Monitoring of arriving aircraft - (12,541 / 13,366) 2. Inspected international vessel - (258 / 269) 3. Inspected Food service establishment - (207 / 213)

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35. Percent of licensed health facilities and services monitored and evaluated for continuous compliance to regulatory policies					98%	98%	32.21%	62.91%	90.32%				Q1: 3,255 / 10,107 Q2: 6,949 / 11,046 Q3: 9,625 / 10,656
36. Percent of establishments and health products monitored and evaluated for continuous compliance to regulatory policies		15%	30%	50%	65%	65%	11.33%	29.00%	53.46%				Q1: 13,050 / 115,160 Q2: 33,402 / 115,160 Q3: 61,565 / 115,160
37. Percent of timely and high quality evidence-based recommendations (out of all priority topics submitted to HTAD and HTAC)					80%	80%							Transferred to DOST due to transfer of HTAD budget, pursuant to National Budget Circular No. 590 dated January 3, 2023
38. Percent of border control and port health surveillance reports generated and disseminated		100%	100%	100%	100%	100%	100%	100%	100%				Q1: 366 / 366 Q2: 370 / 370 Q3: 308 / 308*  Breakdown of 308: a. Inbound COVID-19 Positive Database - 28 reports b. BOQ Dashboard - 92 reports c. Aircraft Daily Report - 91 reports d. Vessel Daily report - 91 reports e. Aircraft Monthly Report - 3 reports f. Vessel Monthly Report - 3 reports
<b>OO4: Access to Social Health Protection Assured</b>													
<b>SOCIAL HEALTH PROTECTION PROGRAM</b>													
<i>Outcome Indicators</i>													
39. Percent of excess net bill covered by the Medical Assistance for Indigent Patients (MAIP) Program incurred by indigent and financially-incapacitated patients					100%	100%							To be reported in fourth quarter
<i>Output Indicators</i>													

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40. Percent of patients requesting assistance provided with medical and financial assistance		100%	100%	100%	100%	100%	170.81%	189.27%	272.12%		158.05%		Q1: 640,550 / 375,000 Q2: 709,754 / 375,000 Q3: 1,020,443 / 375,000  Total: (2,370,747/1,500,000)  Reason for overaccomplishment in Q1 - Q3: The expansion of MAIPP beneficiary coverage now encompasses financially-incapacitated patients in addition to indigent individuals, leading to a rise in the number of patients receiving support. The introduction of additional Matasakit Centers (MCs) in Q1 - Q3 has also resulted in an increased capacity to assist patients in need of medical and financial aid within hospitals. Moreover, the relaxation of health protocols has encouraged a higher health-seeking behavior among patients, leading to an increased influx of individuals seeking medical attention at hospitals.

Prepared by:

*Mary Joy C. Padilla*  
MARY JOY CUPADILLA  
Senior Health Program Officer  
Performance Monitoring and Strategy Management Division

Noted by:

*LJV*  
LINDSLEY JEREMIAH D. VILLARANTE, RN, MPH  
Division Chief  
Performance Monitoring and Strategy Management Division

Approved by:

*Kenneth G. Ronquillo*  
KENNETH G. RONQUILLO, MD, MPH, CESO III  
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1. Percent of Universal Health Care Integration Sites that achieved the target number of Key Result Areas (KRAs) in the Local Health Systems Maturity Level (LHS ML)					100%	100%							To be reported in fourth quarter
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5. Percent of Health Facilities Enhancement Program projects completed within contract timeline					70%	70%							To be reported in fourth quarter
<i>Output Indicators</i>													
6. Percent of partners provided with technical assistance on local health systems development		100%	100%	100%	100%	100%	100%	100%	100%		100%		Q1: 38 / 38 Q2: 40 / 40 Q3: 40 / 40  As of September 30, 2023, 40/40 target partners were provided with technical assistance on local health systems development. Additional partners provided with TA in Q3 (as requested/needed): 20
7. Percent of identified priority areas supplemented with HRH from National Health Workforce Support System (NHWS)		100%	100%	100%	100%	100%	100%	100%	100%		100%		Q1: 1,099 / 1,099 Q2: 1,099 / 1,099 Q3: 1,099 / 1,099

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14. Percent of people living with Human Immunodeficiency Virus (HIV) on Anti-Retroviral Treatment					70%	70%								To be reported in fourth quarter; Target was reinstated from 43% (as reflected in GAA to 70%)
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<b>Output Indicators</b>														
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17. Percent of received health commodities from the Central Office distributed to health facilities based on the allocation list		Varies per Region	Varies per Region	Varies per Region	Varies per Region	Varies per Region	84.27%	91.08%	79.28%					Q1: 1,850,669 / 2,196,096 Q2: 3,648,848 / 4,006,067 Q3: (3,986,762 / 5,028,409)  Please see Annex for the regional breakdown of Q1, Q2 and Q3 accomplishment reports.

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<b>EPIDEMIOLOGY AND SURVEILLANCE PROGRAM</b>														
<i>Outcome Indicators</i>														
20. Percent of epidemiological and public health surveillance reports generated and disseminated					90%	90%	99.85%	99.88%	99.26%					Q1: 650 / 651 (adjustment: 693 / 693 = 100%) Q2: 2,552 / 2,555 (adjustment: 741 / 744 = 99.59%) Q3: 670 / 675  *Changes in the counts of Daily ESR reports of Q1 and Q2 of 2023 since only verified and follow up report are needed on the counts and previously submitted counts are all captured events in ESR.
21. Percent of Functional Regional Epidemiology and Surveillance Units (RESUs)					70%	70%								To be reported in fourth quarter
<i>Output Indicators</i>														
22. Percent of outbreaks and health events of public health concern requiring investigations are investigated by the Regional Epidemiology and Surveillance Units and/or the Epidemiology Bureau (EB)		90%	90%	90%	90%	90%	100%	100%	100%					Q1: 2 / 2 Q2: 6 / 6 Q3: 2 / 2
23. Percent of technical assistance, capacity development, and other support provided by EB and/or RESU		90%	90%	90%	90%	90%	97.87%	99.91%	94.59%					Q1: 46 / 47 (adjustment: 56/57 = 98.24% ) Q2: 10,756 / 10,766 (adjustment: 36/38 = 94.73% ) Q3: 70 / 74  Reason for the adjustment of Q1 and Q2 accomplishments: In the previous quarter, ticket being addressed by SISDD were included in the total counts. However, upon clarification during the conduct of Management Review this is not considered as technical assistance, hence total counts were
<b>HEALTH EMERGENCY MANAGEMENT PROGRAM</b>														
<i>Outcome Indicators</i>														

**QUARTERLY PHYSICAL REPORT OF OPERATION**  
As of September 30, 2023

Department: Department of Health  
Agency: Office of the Secretary  
Operating Unit: Office of the Secretary - Central Office  
Organization Code (UACS): 130010300013

Program Expenditure Classification(PrExC)	UACS Code	PHYSICAL TARGETS					PHYSICAL ACCOMPLISHMENT					Variance	REMARKS
		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL		
1	2	3	4	5	6	7	8	9	10	11	12 = 8+9+10+11	13 = 12 - 7	14
24. Percent of LGUs with institutionalized Disaster Risk Reduction Management for Health (DRRM-H) Systems					40%	40%							To be reported in fourth quarter
<b>Output Indicators</b>													
25. Percent of LGUs provided with technical assistance on the institutionalization of DRRM-H System		30%	40%	80%	100%	100%	28%	48%	90%				Q1: 11 / 40 Q2: 19 / 40 Q3: 36 / 40
<b>OO2: Access to Curative and Rehabilitative Health Care Services Improved</b>													
<b>HEALTH FACILITIES OPERATION PROGRAM</b>													
<b>Outcome Indicators</b>													
26. Hospital infection rate					<1%	<1%							To be reported in fourth quarter
27. Drug Abuse Treatment Completion Rate		85%	85%	85%	85%	85%							Only applicable to DATRCs
<b>Output Indicators</b>													
28. Number of policies, manuals and plans developed on health facility development		2	2	4	4	12	7	5	11				The exceeding of the target and over accomplishment for Q3 is due to several unplanned policies that were developed and issued out. Further, some of these issuances were directed to HFDB to be developed during this implementation year, which is not accounted for during the target setting done the previous year.
29. Percent of National External Quality Assurance Scheme (NEQAS) provided to Health Facilities by the National Reference Laboratories (NRLs)					90%	90%							To be reported in fourth quarter. Pursuant to the Department Circular No. 2017-0173, the annual reporting for this indicator is aligned with the timeline of quality assurance activities (i.e. registration, preparation of materials, distribution to laboratories, testing, etc.) which takes about one year.

**QUARTERLY PHYSICAL REPORT OF OPERATION**  
As of September 30, 2023

Department: Department of Health  
Agency: Office of the Secretary  
Operating Unit: Office of the Secretary - Central Office  
Organization Code (UACS): 130010300013

Program Expenditure Classification(PrExC)	UACS Code	PHYSICAL TARGETS					PHYSICAL ACCOMPLISHMENT					Variance	REMARKS
		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL		
1	2	3	4	5	6	7	8	9	10	11	12 = 8+9+10+11	13 = 12 - 7	14
30. Number of blood units collected by Blood Service Facilities		47,369	71,053	71,053	47,369	236,844	60,584	86,649					Q1 Total: 60,584 Q2 Total: 86,649 Q3 Total:  Q2: NVBSP: 78,745 PBC: 7,904  Q3: NVBSP: No report submission as of October 27, 2023 PBC: 9,602
31. Percent of in-patients, out-patients, and aftercare drug abuse cases managed		100%	100%	100%	100%	100%							Only applicable to DATRCs
<b>OO3: Access to Safe and Quality Health Commodities, Devices, and Facilities Ensured</b>													
<b>HEALTH REGULATORY PROGRAM</b>													
<i>Outcome Indicators</i>													
32. Percent of health establishments and health products compliant to regulatory policies					75%	75%							To be reported in fourth quarter
33. Percent of Public Health Emergencies of International Concern (PHEIC) and/or Public Health Risks (PHR) rapidly responded at Points of Entry (POE)		100%	100%	100%	100%	100%	100%	100.00%	100.00%				Q1: 4 / 4 Q2: 4 / 4 Q3: 4 / 4  All PHEIC/PHR captured were responded through the following activities of the bureau:  1. Event-based surveillance 2. Indicator-based surveillance 3. COVID-19 response 4. Conceptualization, production, and dissemination of IEC materials and other trimedia
<i>Output Indicators</i>													
		85% (FDA)	85%	85%	85%	85%	80.30%	84.98%	86.23%				Q1: 45,944 / 57,213 Q2: 61,453 / 72,314 Q3: 84,362 / 97,836

**QUARTERLY PHYSICAL REPORT OF OPERATION**  
As of September 30, 2023

Department: Department of Health  
Agency: Office of the Secretary  
Operating Unit: Office of the Secretary - Central Office  
Organization Code (UACS): 130010300013

Program Expenditure Classification(PrExC)	UACS Code	PHYSICAL TARGETS					PHYSICAL ACCOMPLISHMENT					Variance	REMARKS
		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL		
34. Percent of applications for permits, licenses, or accreditation processed within the citizen's charter timeline		92% (OSEC)	92%	92%	92%	92%	99.56%	100%	99.92%				Q1: 2,726 / 2,738 Q2: 2,096 / 2,096 Q3: 2,361 / 2,363  During the third quarter of 2023, an accomplishment of 99.9% (2,361 out of 2,363) exceeded the physical target of 92%. To further improve the processes, several efforts are being implemented, including the following:  a. Virtual inspections are now conducted in addition to on-site inspections and table evaluations. b. Staff have been designated to monitor the timeline for the citizens' charter for applications received in the issuance of authorizations for permits and licenses. c. The monitoring log sheets for health facility applications received have been enhanced.
		90% (BOQ)	90%	90%	90%	90%	98.31%	98.47%	93.92%				Q1: 12,183 / 12,392 Q2: 13,203 / 13,408 Q3: 13,006 / 13,848  Breakdown:  1. Monitoring of arriving aircraft - (12,541 / 13,366) 2. Inspected international vessel - (258 / 269) 3. Inspected Food service establishment - (207 / 213)
35. Percent of licensed health facilities and services monitored and evaluated for continuous compliance to regulatory policies					98%	98%	25.72%	55.38%	92.39%				Q1: 98 / 381 Q2: 211 / 381 Q3: 352 / 381
36. Percent of establishments and health products monitored and evaluated for continuous compliance to regulatory policies		15%	30%	50%	65%	65%	11.33%	29%	53.46%				Q1: 13,050 / 115,160 Q2: 33,402 / 115,160 Q3: 61,565 / 115,160
37. Percent of timely and high quality evidence-based recommendations (out of all priority topics submitted to HTAD and HTAC)					80%	80%							Transferred to DOST due to transfer of HTAD budget, pursuant to National Budget Circular No. 590 dated January 3, 2023
38. Percent of border control and port health surveillance reports generated and disseminated		100%	100%	100%	100%	100%	100.00%	100.00%	100.00%				Q1: 366 / 366 Q2: 370 / 370 Q3: 308 / 308 Breakdown of 308: a. Inbound COVID-19 Positive Database - 28 reports b. BOQ Dashboard - 92 reports c. Aircraft Daily Report - 91 reports d. Vessel Daily report - 91 reports e. Aircraft Monthly Report - 3 reports f. Vessel Monthly Report - 3 reports

**QUARTERLY PHYSICAL REPORT OF OPERATION**  
As of September 30, 2023

Department: Department of Health  
Agency: Office of the Secretary  
Operating Unit: Office of the Secretary - Central Office  
Organization Code (UACS): 130010300013

Program Expenditure Classification(PrExC)	UACS Code	PHYSICAL TARGETS					PHYSICAL ACCOMPLISHMENT					TOTAL	Variance	REMARKS
		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter				
1	2	3	4	5	6	7	8	9	10	11	12 = 8+9+10+11	13 = 12 - 7	14	
<b>OO4: Access to Social Health Protection Assured</b>														
<b>SOCIAL HEALTH PROTECTION PROGRAM</b>														
<i>Outcome Indicators</i>														
39. Percent of excess net bill covered by the Medical Assistance for Indigent Patients (MAIP) Program incurred by indigent and financially-incapacitated patients					100%	100%							To be reported in fourth quarter	
<i>Output Indicators</i>														
40. Percent of patients requesting assistance provided with medical and financial assistance		100%	100%	100%	100%	100%	170.81%	189.27%	272.12%		158.05%		Q1: 640,550 / 375,000 Q2: 709,754 / 375,000 Q3: 1,020,443 / 375,000  Total: (2,370,747/1,500,000)  Reason for overaccomplishment in Q1 - Q3: The expansion of MAIPP beneficiary coverage now encompasses financially-incapacitated patients in addition to indigent individuals, leading to a rise in the number of patients receiving support. The introduction of additional Malasakit Centers (MCs) in Q1 - Q3 has also resulted in an increased capacity to assist patients in need of medical and financial aid within hospitals. Moreover, the relaxation of health protocols has encouraged a higher health-seeking behavior among patients, leading to an increased influx of individuals seeking medical attention at hospitals.	

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## QUARTERLY PHYSICAL REPORT OF OPERATION As of September 30, 2023

**Department** : Department of Health (DOH)  
**Agency/Entity** : Office of the Secretary  
**Operating Unit** : Central Office  
**Organization Code (UACS)** : 13 001 0100000

Particulars	UACS CODE	Physical Target (Budget Year)					Physical Accomplishment (Budget Year)					Variance as of September 30, 2023	Remarks
		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total		
1	2	3	4	5	6	7	8	9	10	11	12	13	14
<b>HEALTH POLICY AND STANDARDS DEVELOPMENT PROGRAM</b>	3101000000000000												
OO : Access to promotive and preventive health care services improved													
Outcome Indicators													
1. Performance Governance Strategic Readiness Score													
2. Performance Governance Institutionalization Certification													
3. Percent of Universal Health Care Integration Sites that achieved the target number of Key Result Areas (KRAs) in Local Health System Maturity Level (LHS ML)													
		N/A	N/A	N/A	100%	100%							To be reported in fourth quarter
Output Indicators													
1. Percent of policies issued based on the policy agenda list													
		N/A	N/A	N/A	100%	100%	0%	0%	26.67%				Q1: 0/15 Q2: 0/15 Q3: 4/15 1. Office of the President Memorandum Circular 26 2. DOH-CHED JAO-0001 3. PhilHealth Circular 2023-0016 4. DC 2023-0452 There have been delays in the issuance of targeted policies due to the recent change in administration, recent issuance of a new medium-term strategy, changes in technical directions or policy options during policy development and consultations, and ongoing revision of the policy agenda to align with the current medium-term strategy.
2. Percent of research/policy briefs rated as useful or adoptable													
3. Number of briefs based on researches (including but not limited to DOH funded researches) developed and disseminated (e.g. research, policy, etc.)													
		1	1	1	1	4	4	1	1				Q3 2023 Policy Brief DM No. 2023-0330: Cost Effectiveness Evaluation Modelling of different COVID-19 vaccines in the Philippines for Emerging Variants of Concern issued September 20, 2023
HEALTH SYSTEMS STRENGTHENING PROGRAM													
OO : Access to promotive and preventive health care services improved													
Outcome Indicators													
1. Percentage of decrease in HRH gap in the identified priority areas based on HRH standards in primary care facilities													
		N/A	N/A	N/A	Equal or more than 50%	Equal or more than 50%							To be reported in fourth quarter
2. Percentage of Health Facilities Enhancement Program projects completed within contract timeline													
		N/A	N/A	N/A	70%	70%							To be reported in fourth quarter
Output Indicators													
1. Percent of partners provided with technical assistance on local health systems development													
		100%	100%	100%	100%	100%	100%	100%	100%				Q1: 1,486 / 1,486 Q2: 1,368 / 1,368 Q3: 1,324 / 1,324





Particulars	UACS CODE	Physical Target (Budget Year)					Physical Accomplishment (Budget Year)					Variance as of September 30, 2023	Remarks
		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total		
1	2	3	4	5	6	7	8	9	10	11	12	13	14
3. Percent of identified priority areas supplemented with HRH from National Health Workforce Support System (NHWSS)		100%	100%	100%	100%	100%	100%	100%	100%				Q1: 1,099 / 1,099 Q2: 1,099 / 1,099 Q3: 1,099 / 1,099
<b>PUBLIC HEALTH PROGRAM</b>	<b>3103000000000000</b>												
OO : Access to promotive and preventive health care services improved													
Outcome Indicators													
1. Percent of public health facilities with no stock-outs													
2. Percent of external clients who rate the technical assistance provided as satisfactory or better		N/A	N/A	N/A	100%	100%							To be reported in fourth quarter
3. Percent of fully immunized children		N/A	N/A	N/A	95%	95%							To be reported in fourth quarter
4. Modern contraceptive prevalence rate													
5. Percent demand satisfied with modern family planning method		N/A	N/A	N/A	61%	61%							To be reported in fourth quarter; Target was reinstated from 61% as reflected in GAA to 69% due to the Phillipine commitment to the FP2030 Global Partnership
6. Number of malaria-free provinces		N/A	N/A	N/A	65	65							To be reported in fourth quarter; Target was increased from 65 as reflected in GAA to 66
7. Number of filariasis-free provinces		N/A	N/A	N/A	45	45							To be reported in fourth quarter; Target was decreased from 45 as reflected in GAA to 44
8. Number of rabies-free zones (provinces)		N/A	N/A	N/A	9	9							To be reported in fourth quarter
9. Percent of people living with Human Immunodeficiency Virus (HIV) on Anti-Retroviral Treatment		N/A	N/A	N/A	43%	43%							To be reported in fourth quarter; Target was reinstated from 43% as reflected in GAA to 70%
10. Treatment success rate for all forms of Tuberculosis		N/A	N/A	N/A	90%	90%							To be reported in fourth quarter
Output Indicators													
1. Percent of Local Government Units (LGUs) and other health partners provided with technical assistance on public health programs		N/A	N/A	N/A	100%	100%	104.08%	104.11%	100%				Q1: 2,419 / 2,324 Q2: 2,672 / 2,570 Q3: 3,210 / 3,210
2. Percent of received health commodities from the Central Office distributed to health facilities based on the allocation list		N/A	N/A	N/A	Varies per Region	Varies per Region Baseline: 83%	84.27%	91.08%	79.28%				Q1: 1,850,669 / 2,196,096 Q2: 3,648,848 / 4,006,067 Q3: 3,986,762 / 5,028,409 Please see Annex for the regional breakdown of Q1, Q2 and Q3 accomplishment reports.
3. Percent of procured cancer commodities distributed to access sites		80%	80%	80%	80%	80%							To be reported in fourth quarter
4. Percent of Centers for Health Development (CHDs) with no stock-outs of centrally procured major health commodities for Integrated Comprehensive Essential Service Delivery Package (ICESDP) as identified by the Programs		85%	85%	85%	85%	85%	100%	94%	100%				Q1: 15 / 16 - Corrected/Updated denominator DOH-SCMS directly delivered to provinces of Region IV-B Q2: 15 / 16 Stockout in Davao CHD for April and May 2023 Q3: 16/16
<b>EPIDEMIOLOGY AND SURVEILLANCE PROGRAM</b>	<b>3104000000000000</b>												
OO : Access to promotive and preventive health care services improved													
Outcome Indicators													
1. Percent of epidemiological and public health surveillance strategic report disseminated													
2. Percent of epidemiological and public health surveillance reports generated and disseminated		N/A	N/A	N/A	90%	90%	99.61%	99.86%	99.79				Q1: 1,985 / 1,994 (adjustment: 2,028/2,036 = 99.61%) Q2: 3,176 / 3179 (adjustment: 2,198/2,199 = 99.86%) Q3*: 2,380 / 2,385 **There are 8 CHDs were identified to be reporting by Q4.


Particulars	UACS CODE	Physical Target (Budget Year)					Physical Accomplishment (Budget Year)					Variance as of September 30, 2023	Remarks
		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total		
1	2	3	4	5	6	7	8	9	10	11	12	13	14
3. Percent of Functional Epidemiology and Surveillance Units (Maturity Level 2) in 17 Regional Epidemiology and Surveillance Unit (RESUs), 58 Universal Health Care (UHC) Integration Sites, 81 Provinces, 33 Highly Urbanized Cities (HUCs), and 5 Independent Component Cities (ICCs)													
4. Percent of Functional Regional Epidemiology and Surveillance Units (RESUs)		N/A	N/A	N/A	70%	70%							To be reported in fourth quarter
Output Indicators													
1. Percent of outbreak/epidemiologic investigations conducted													
2. Percent of outbreaks and health events of public health concern requiring investigations are investigated by the RESUs and/or the Epidemiology Bureau (EB)		90%	90%	90%	90%	90%	100%	100%	100%				Q1: 474 / 474 (adjustment: 502/502 = 100%) Q2: 600 / 600 Q3: 569 / 569 Epidemiology Bureau (EB) has set a 90 % target for investigation of health events, allowing for a 10% margin of events that cannot be investigated due to inaccessible areas. However, all the areas where health events requiring investigation are accessible.
3. Percent of technical assistance, capacity development, and other support provided by EB and/or RESU		90%	90%	90%	90%	90%	99.54%	99.61%	99.19				Q1: 581 / 583 (adjustment: 429/431 = 99.53%) Q2: 11,507 / 11,511 (adjustment: 510/512 = 99.60%) Q3: 859 / 866 Reason for the adjustment of Q1 and Q2 accomplishments: In the previous quarter, ticket being addressed by SISDD were included in the total counts. However, upon clarification during the conduct of Management Review this is not considered as technical assistance hence total counts were adjusted.
<b>HEALTH EMERGENCY MANAGEMENT PROGRAM</b>	<b>3105000000000000</b>												
OO : Access to promotive and preventive health care services improved													
Outcome Indicator													
1. Percent of LGUs with Institutionalized Disaster Risk Reduction Management for Health (DRRM-H) System		N/A	N/A	N/A	40%	40%							To be reported in fourth quarter
Output Indicators													
1. Percent of LGUs provided with technical assistance on the development or updating of DRRM-H													
2. Percent of LGUs provided with technical assistance on the institutionalization of DRRM-H System		N/A	N/A	N/A	100%	100%	38%	68%	97.06%				Q1: 459 / 1223 Q2: 836 / 1223 Q3: 1,187 / 1,223"
<b>HEALTH FACILITIES OPERATION PROGRAM</b>	<b>3201000000000000</b>												
OO : Access to curative and rehabilitative health care services improved													
Outcome Indicators													
1. Hospital infection rate		N/A	N/A	N/A	<1%	<1%							To be reported in fourth quarter
2. Percent of drug dependents who completed the treatment program													
3. Drug Abuse Treatment Completion Rate		85%	85%	85%	85%	85%	95%	96.36%	102.39%				Q1: 578 / 609 Q2: 873 / 906 DATRC cumulatively adds the number of People Who Use Drugs (PWUDs) who are originally expected to complete their primary drug treatment program from the previous rating period but had failed to do so and had completed their treatment and rehabilitation in the current rating period to the PWUDs who completed their primary treatment and rehabilitation in the current rating period.

Particulars	UACS CODE	Physical Target (Budget Year)					Physical Accomplishment (Budget Year)					Variance as of September 30, 2023	Remarks
		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total		
1	2	3	4	5	6	7	8	9	10	11	12	13	14
Output Indicators													
1. Number of policies, manuals and plans developed on health facility development		2	2	4	4	12	7	5	11				
2. Percent of National External Quality Assurance Scheme (NEQAS) provided to Health Facilities by the National Reference Laboratories (NRLs)		N/A	N/A	N/A	90%	90%							To be reported in fourth quarter. Pursuant to the Department Circular No. 2017-0173, the annual reporting for this indicator is aligned with the timeline of quality assurance activities (i.e. registration, preparation of materials, distribution to laboratories, testing, etc.) which takes about one year.
3. Number of blood units collected by Blood Service Facilities		47,369	71,053	71,053	47,369	236,844	60,584	86,649	To follow				Q1 Total: 60,584 Q2 Total: 86,649 Q2: NVBSP: 78,745 PBC: 7,904
4. Number of in-patient and out-patient drug abuse cases managed													
5. Percent of in-patients, out-patients and aftercare drug abuse cases managed		100%	100%	100%	100%	100%	113%	109.13%	102.96				Q1: 26,318 / 23,253 Q2: 30,084 / 27,566 Q3: 28,640 / 27,817 The reason why the percentage of patients, out-patients, and aftercare drug abuse cases managed is higher than the 100% quarterly target is because there is an increase in drug cases managed by the DATRCs compared with the set target before the year started.
<b>HEALTH REGULATORY PROGRAM</b>	<b>330100000000000</b>												
OO : Access to safe and quality health commodities, devices and facilities ensured													
Outcome Indicators													
1. Percent of health establishments and health products compliant to regulatory policies		N/A	N/A	N/A	N/A								To be reported in fourth quarter
2. Percent of Public Health Emergencies of International Concern (PHEIC) and/or Public Health Risks (PHR) rapidly responded at Point of Entry (POE)		N/A	N/A	N/A	N/A		100%	100%	100%				Q1: 4 / 4 Q2: 4 / 4 Q3: 4 / 4 All PHEIC/PHR captured were responded through the following activities of the bureau: 1. Event-based surveillance 2. Indicator-based surveillance 3. COVID-19 response 4. Conceptualization, production, and dissemination of IEC materials and other trimedia
Output Indicators													
							80.30% (FDA)	84.98%	86.23				Q1: 45,944 / 57,213 Q2: 61,453 / 72,314 Q3: 84,362 / 97,836
1. Percent of applications for permits, licenses, or accreditation processed within the Citizen's Charter Timeline		92% (DOH-OSEC)	92% (DOH-OSEC)	92% (DOH-OSEC)	92% (DOH-OSEC)	92% (DOH-OSEC)	99.98%	100%	99.96				Q1: 6,874 / 6,887 Q2: 5,146 / 5,146 Q3: 5,557 / 5,559
							98.31% (BOQ)	98.47%	93.92				Q1: 12,183 / 12,392 Q2: 13,203 / 13,408 Q3: 13,006 / 13,848 Breakdown: 1. Monitoring of arriving aircraft - (12,541 / 13,366) 2. Inspected International vessel - (258 / 269) 3. Inspected Food service establishment - (207 / 213)
2. Percent of licensed health facilities and services monitored and evaluated for continuous compliance to regulatory policies		N/A	N/A	N/A	98%	98%	32.21%	62.91%	90.32				Q1: 3,255 / 10,107 Q2: 6,949 / 11,046 Q3: 9,625 / 10,656
3. Percent of establishments and health products monitored and evaluated for continuous compliance to regulatory policies		N/A	N/A	N/A	N/A		11.33%	29%	53.46				Q1: 13,050 / 115,160 Q2: 33,402 / 115,160 Q3: 61,565 / 115,160
4. Percent of timely and high quality evidence-based recommendations (out of all priority topics submitted to Health Technology Assessment Division and Health Technology Assessment Council)		N/A	N/A	N/A	80%	80%							Transferred to DOST due to transfer of HTAD budget, pursuant to National Budget Circular No. 590 dated January 3, 2023
5. Percent of border control and port health surveillance reports generated and disseminated		N/A	N/A	N/A	N/A		100%	100%	100%				Q1: 366 / 366 Q2: 370 / 370 Q3: 308 / 308* Breakdown of 308: a. Inbound COVID-19 Positive Database - 28 reports b. BOQ Dashboard - 92 reports c. Aircraft Daily Report - 91 reports d. Vessel Daily report - 91 reports e. Aircraft Monthly Report - 3 reports f. Vessel Monthly Report - 3 reports

Particulars	UACS CODE	Physical Target (Budget Year)					Physical Accomplishment (Budget Year)					Variance as of September 30, 2023	Remarks
		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total		
1	2	3	4	5	6	7	8	9	10	11	12	13	14
<b>SOCIAL HEALTH PROTECTION PROGRAM</b>	3401000000000000												
OO : Access to social health protection assured													
Outcome Indicator													
1. Percent of excess net bill covered by Medical Assistance Program (MAP) incurred by poor in-patients admitted in basic accommodation or service ward													
2. Percent of excess net bill covered by Medical Assistance for Indigent Patients (MAIP) Program incurred by indigent and financially-incapacitated patients													
		N/A	N/A	N/A	100%	100%							To be reported in fourth quarter
Output Indicator													
1. Number of patients provided with medical assistance													
2. Number of patients provided with medical and financial assistance													
													Q1: 640,550 / 375,000 Q2: 709,754 / 375,000 Q3: 1,020,443 / 375,000 Total: (2,370,747/1,500,000) Reason for overaccomplishment in Q1 - Q3: The expansion of MAIPP beneficiary coverage now encompasses financially-incapacitated patients in addition to indigent individuals, leading to a rise in the number of patients receiving support. The introduction of additional Malasakit Centers (MCs) in Q1 - Q3 has also resulted in an increased capacity to assist patients in need of medical and financial aid within hospitals. Moreover, the relaxation of health protocols has encouraged a higher health-seeking behavior among patients, leading to an increased influx of individuals seeking medical attention at hospitals.
3. Percent of patients requesting assistance provided with medical and financial assistance		100%	100%	100%	100%	100%	170.81%	189.27%	272.12%				

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In coordination with:  
  
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 Division Chief  
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Approved By:  
  
**KENNETH G. RONQUILLO, MD, MPH, CESO III**  
 Undersecretary of Health  
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