

# Digital Strategies - DOH

# Tungo sa Pamilyang Malusog at Masigla (Kalusugan Pangkalahatan)

2

## Actions and Interventions

- Health Prevention and Promotion at community level
- Health Care at the LGU Health Centers
- Hospital Health Care

## Outcomes and Strategies

- Health Governance Improved
- Quality Health Care Services enjoyed by constituent
- Increased enrolment and utilization to PhilHealth packages
- Achievement of Public Health MDGs



## Kalusugan Pangkalahatan

- Improved Health condition of the community
- Minimized out-of-pocket expenses of Constituents, especially indigents

# DOH Strategies

## 1.0

### Public Health MDGs Achieved

**1.1.** Reduce  
Maternal and  
Child Deaths

**1.2.** Prevent,  
Control and  
Eliminate  
spread of  
Infectious  
Diseases

## 2.0

### Financial Risk Protection Improved

**2.1.** Expand  
enrolment to  
PhilHealth

**2.2.** Empower  
constituents  
utilization of  
PhilHealth  
Benefit  
Package

## 3.0

### Quality Care Delivery System Accessible

**3.1.** Upgrade  
and Improve  
Health  
Facilities  
including  
Hospitals

**3.2.** Hire  
adequate  
number of  
Human  
Resources for  
Health

## 4.0

### Health Governance Improved

**4.1.** Improve  
local Health  
Systems e.g.  
through  
supporting the  
functionality of  
Local Health  
board, ILHZ and  
Service Delivery  
Network

**4.2.** Enforce a  
tough Health  
Regulatory  
System

## 1.0

### Public Health MDGs Achieved

#### 1.1.

### Reduce Maternal and Child Deaths

1. Promote **facility-based deliveries**
2. Support the **Integrated Programme on Reproductive Health** (e.g. **ARH, family planning** for all mothers, women and men of reproductive age)
3. Make sure that **all babies are exclusively breastfed and vaccinated**
4. Provide **vitamins and minerals** to all children below 5 year old

*Supporting Agencies:* DSWD, DILG and LGUs,  
DepEd



## 1.0

# Public Health MDGs Achieved

## 1.2.

# Prevent, Control and Eliminate Infectious Diseases

1. Ensure that all **TB** cases are treated and cured
2. Treat and Eliminate **mosquito-borne diseases** like **Malaria, Filariasis and Dengue**
3. Prevent spread of **Sexually Transmitted Infections** including **HIV and AIDS**. Promote screening, diagnosis, and treatment
4. Give **rabies vaccine** for dog bite victims and coordinate with DA for **dog vaccination**

### Supporting Agencies:

DSWD, DILG and LGUs, DA (lead for dog vaccination)



## 2.0

### Financial Risk Protection Improved

#### 2.1.

Expand enrolment to PhilHealth

#### 2.2.

Empower constituents utilisation of PhilHealth Benefit Package

- 1. Expand PhilHealth enrolment** especially the poor and near-poor (14.7M)
- 2. Increase PhilHealth share** in total health care costs, to minimize out-of-pocket payments
- 3. Inform and guide all members** on PhilHealth availment procedures and benefits
- 4. Improve access to primary care benefit** package for the poor (drugs and diagnostics)

#### Supporting Agencies:

PHIC, DSWD, DepEd, DILG and LGUs, DOF-BIR, PRC, NCIP, DOLE



**PhilHealth**  
Your Partner in Health

*\* National government subsidy will be dependent on the current number NHTS-PR identified poor subject to the on-going validation of the DSWD and new enrollment as a result of PhilHealth's Point of Care and the new provisions of the Revised IRR of PhilHealth (women about to give birth, orphans, etc.)*

### 3.0

## Quality Care Delivery System Accessible

### 3.1.

## Upgrade and Improve operation of Health Units and Hospitals

1. **Upgrade, build, enhance and accredit to PhilHealth:**
  - a. **Barangay health stations and rural and city health units** to deliver basic preventive and curative health services
  - b. **LGU district and provincial hospitals** for quality outpatient and inpatient care
  - c. **DOH regional hospitals and medical centers** to make specialized care more affordable
2. **Make available medicines to constituents** (for common diseases like infections, diabetes, hypertension, heart diseases, etc) to poor patients

#### Supporting Agencies:

DPWH, DILG and LGUs, DSWD,  
DOE DBM NEDA ODA Philhealth Private Sector



3.0

Quality Care  
Delivery System  
Accessible

3.2.

Hire  
adequate  
number of  
Human  
Resources  
for Health

1. **Hire and fill-up appropriate personnel for the provision of health services** (Physicians, Nurses, and Midwives)
2. **Deploy human resources for health** (Physicians, Nurses, and Midwives)
3. **Support the operation of BHWs** to reach families in advocating key messages and basic preventive care

**Supporting Agencies:**

DSWD, DOLE, DepEd, DILG and LGUs





## 4.0

### Health Governance Improved

**4.1.** Improve local Health Systems by supporting the functionality of Local Health board, ILHZ and Service Delivery Network

**4.2.** Enforce Maintain a strong Health Regulatory System

- 1. Formulate health policies** that are responsive to health needs and operational realities
- 2. Reform hospital governance**
- 3. Expand Telemedicine/ e-health networks**
4. Formulate and enforce **regulations** to protect the health of Filipinos
5. Establish partnership with the **Private health sector and other social services**

**Supporting Agencies:**  
PHIC, DILG, DSWD, Private sector and LGUs




**Health  
in the  
hands  
of the  
People**

## II. Background on ICT Interventions

The DOH has learned from the results of experimentation and early adoption phase since 1988, the start of developing software for Field Health Services and Information System, and has continuously developed or built other application or information systems.

The use of ICT in the DOH has remarkably supported and improved some of the functions of the Department such as in areas like networking and infrastructure, office automation, development and implementation of computer-based systems.

From the limited resources in terms of ICT personnel and funds, the DOH Management has augmented the budget on ICT to fully accomplish and support the ICT strategic goals direction.



# III. ICT Interventions

## ➤ **i-ClinicSys**

- A computer-based system that enables entry and management of the patient's medical histories, diagnoses, treatments, medications, immunizations, alerts like allergies and drug reactions, laboratory and other test examinations and results.

It is designed for clinic health facilities like Health Centers (HCs), Rural Health Units (RHUs) and Barangay Health Stations (BHS)

## ➤ **Integrated Tuberculosis Information System (ITIS)**

- Is a web-based system and a tool for data collection, processing, reporting, and use of the information necessary for improving TB control effectiveness and efficiency.

# III. ICT Interventions

## ➤ **Maternal and Neonatal Death Reporting System (MNDRS)**

- To facilitate reporting of maternal and neonatal deaths in order to provide reliable and timely information on child mortality and improvement in maternal health.

## ➤ **Unified Disease Registry System (UDRS)**

- Establishes a database registry for the systematic collection, consolidation, analysis, interpretation and dissemination of injury and injury-related information for epidemiologic studies, policy formulation and development of injury prevention programs.
- UDRS includes the following system: Online National Electronic Injury Surveillance System (ONEISS), Violence Against Women and Children Registry System (VAWCRS), Philippine Registry for Persons With Disabilities (PRPWD), Integrated Chronic Non-Communicable Diseases Registry Systems (ICNDRS), Integrated Philippine Network for Injury Data Management System (iPNIDMS)

## III. ICT Interventions

### ➤ **National Rabies Information System (NaRIS)**

- It is a patient-based rabies program accessible to all stakeholders- DOH, DA, WHO, LGUs, RHUs, CHOs, ABTCs, NGOs, and the private sector- through the internet. It facilitates data collection, aggregation, and utilization, and has the capacity to perform drug inventory.

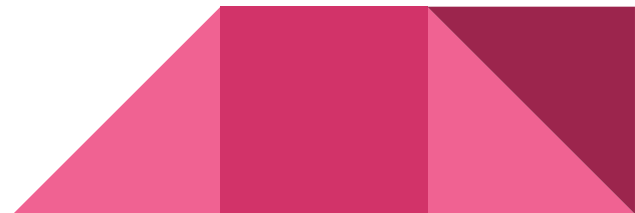
### ➤ **National Online Stock Inventory Reporting System (NOSIRS)**

- Captures inventories of all commodities purchased/received and distributed by the Materials Management Division (MMD) of the DOH to the Centers for Health Development (CHD), Retained Hospitals and other Health Facilities; purchased and dispensed/distributed by the CHDs and different Health Facilities (other than MMD)

### III. ICT Interventions

## Electronic-FHSIS

Electronic Field Health Service Information System (eFHSIS) is generally designed to address the present demands for a health information system that is consistent and keeping abreast with whatever advancements in the information and communication technology (ICT) to make health data highly accurate and timely, readily available when needed especially in setting health priorities during planning for health at various levels.



# e-FHSIS

## *OBJECTIVE:*

To produce an accurate, reliable and timely reporting system.



# System Scope

Data processing and reporting at the  
Municipal, City, Provincial and Regional  
Levels



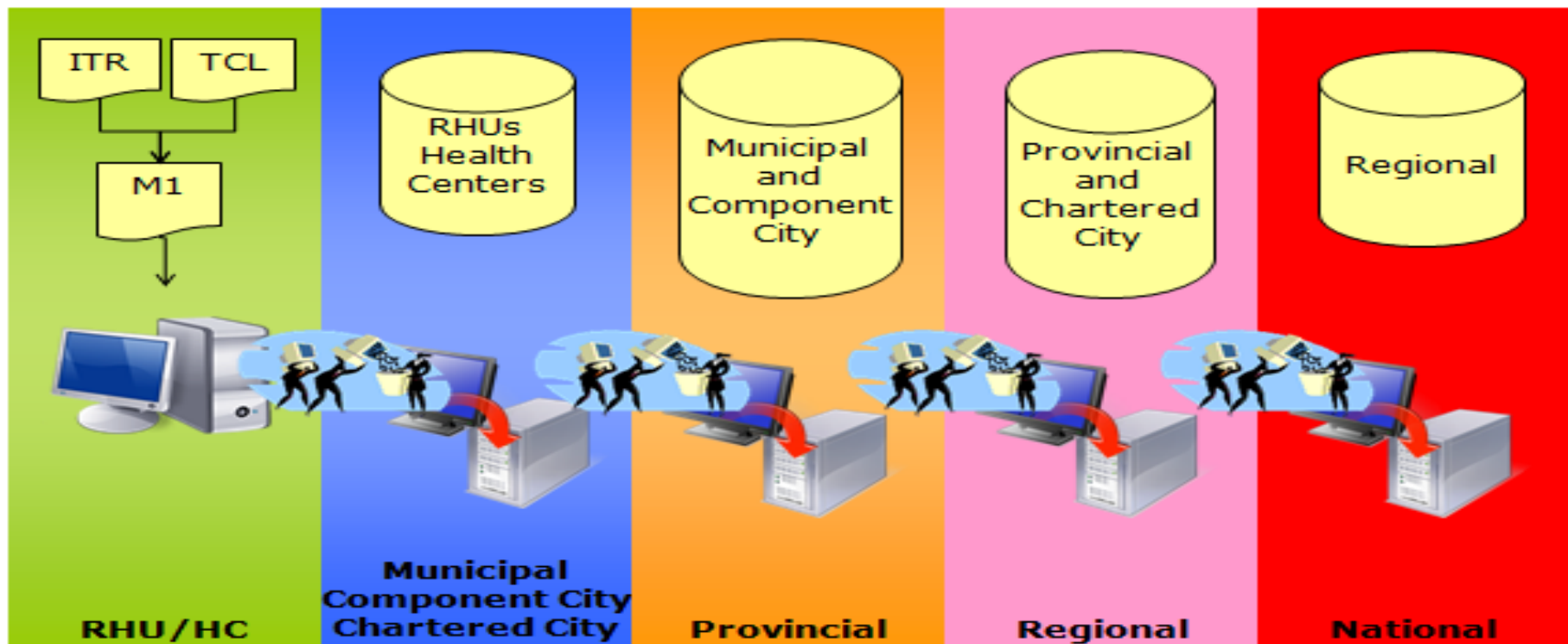


## Health Programs Supported

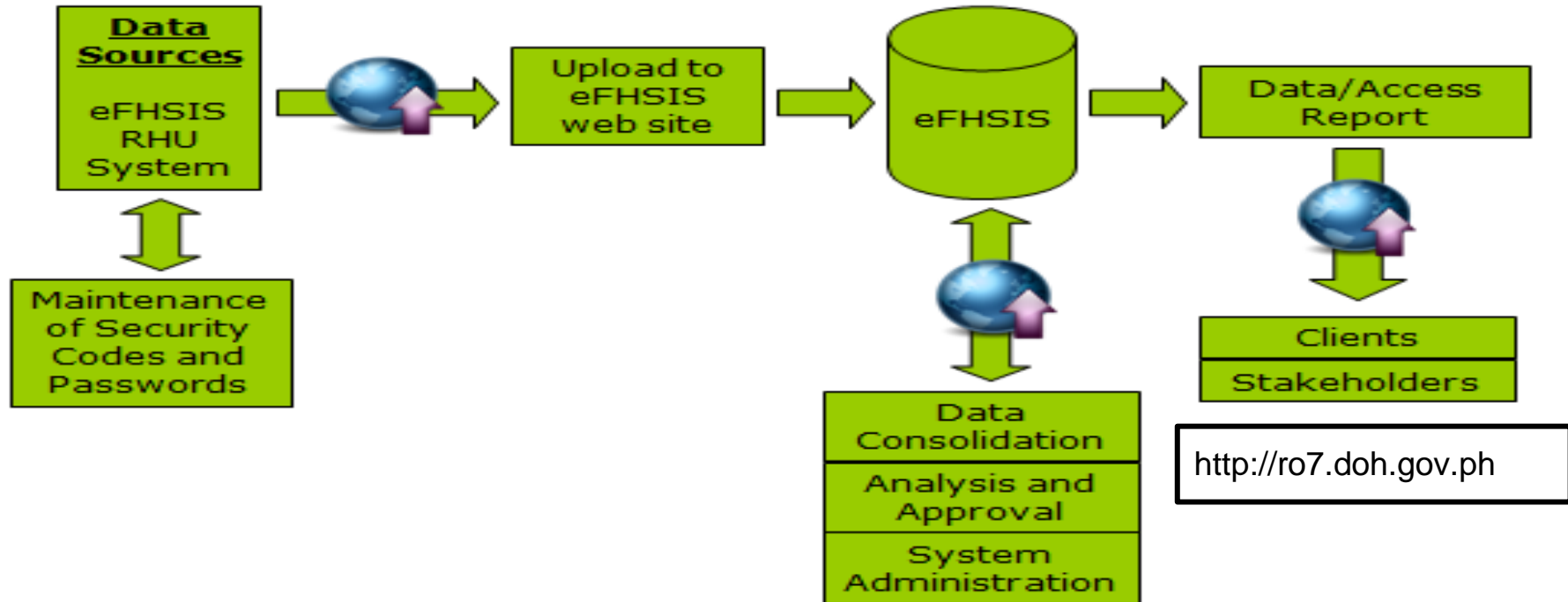


|                        |                             |
|------------------------|-----------------------------|
| <b>Child Care</b>      | <b>Schistosomiasis</b>      |
| <b>Dental Care</b>     | <b>Tuberculosis</b>         |
| <b>Family Planning</b> | <b>Environmental Health</b> |
| <b>Maternal Care</b>   | <b>Natality</b>             |
| <b>Malaria</b>         | <b>Morbidity</b>            |
| <b>Filariasis</b>      | <b>Mortality</b>            |
| <b>Leprosy</b>         | <b>Demography</b>           |

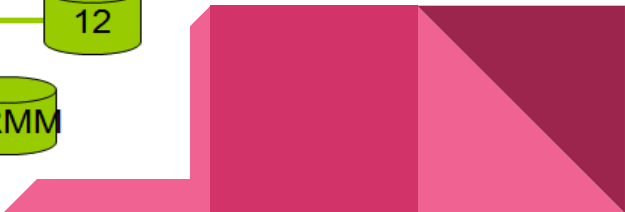
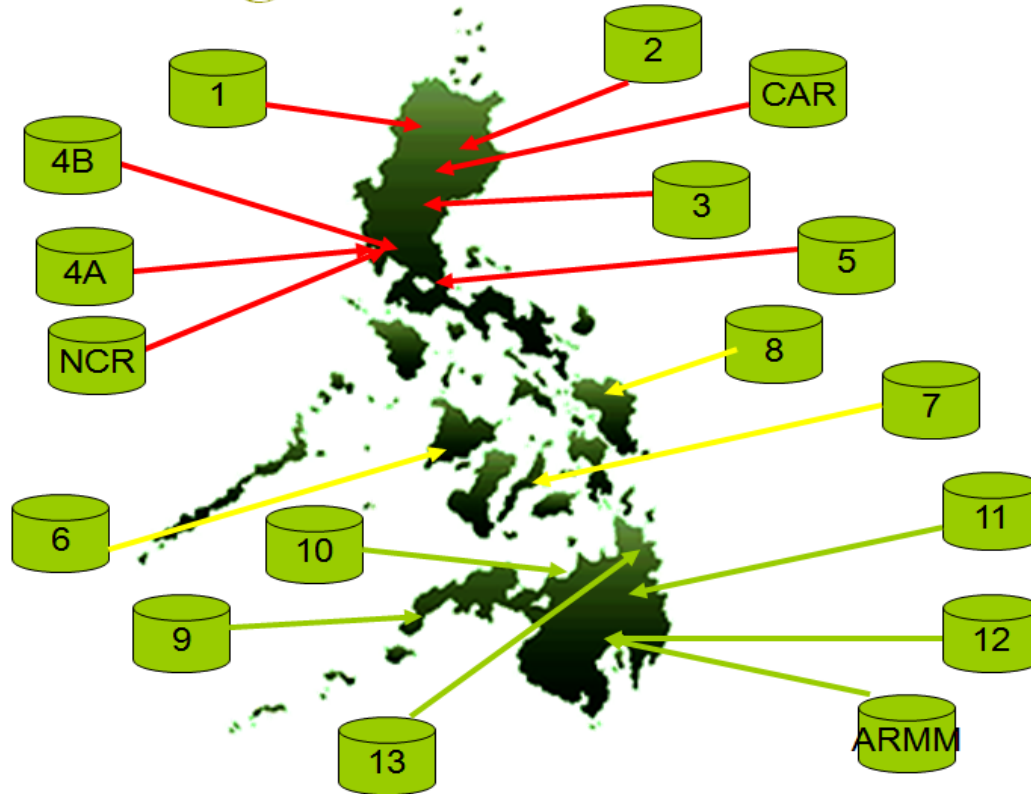
# Simplified Process Flow



# System Model



# Regional Database Server



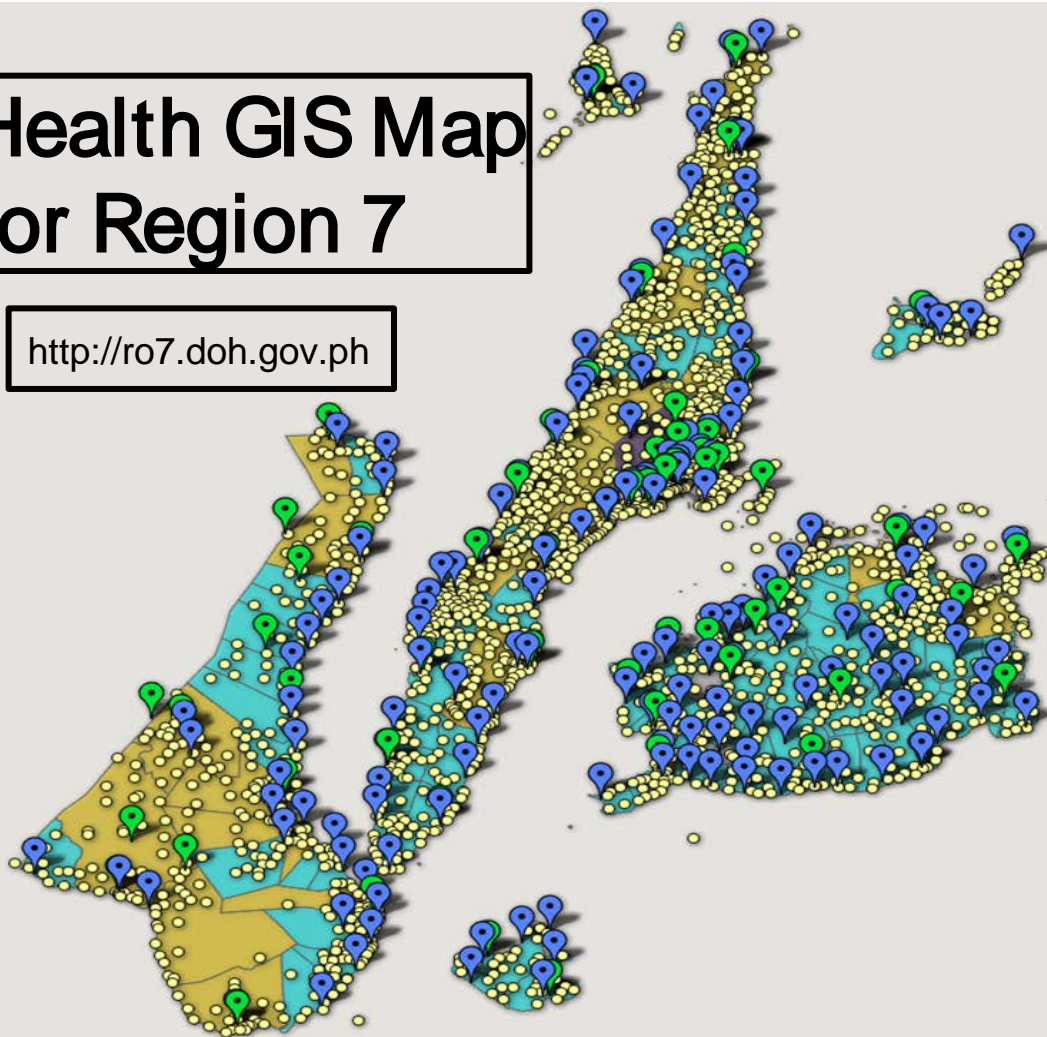
## V. Health GIS (Overview)

Health Geographic information systems (Health GIS) is a combined computer-mapping capabilities with additional database management and data analysis where spatial pattern of diseases in a population as a vital evidence for public health analysts and decision making when seeking to understand causes and plan interventions and finding solutions.



# Health GIS Map for Region 7

<http://ro7.doh.gov.ph>



**REGION VII**

- Population
  - 1-10,000
  - 10,001-50,000
  - 50,001-200,000
  - 200,001-600,000
  - 600,001-1,000,000
- Health Facilities
  - Hospitals
  - RHUs
  - Barangay Health Stations

**Health Facility by Classification**

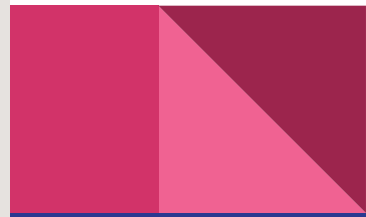
[Hospital](#)

**PhilHealth Accreditation**

[Rural Health Unit](#)

**Additional Map per Municipality**

[Province of Cebu](#)  
[Province of Bohol](#)  
[Province of Negros Oriental](#)  
[Province of Siquilor](#)



# Hospitals of Region 7

## Cebu Province Hospitals

- Population
- 1-10,000
  - 10,001-50,000
  - 50,001-200,000
  - 200,001-600,000
  - 600,001-1,000,000

## Hospitals

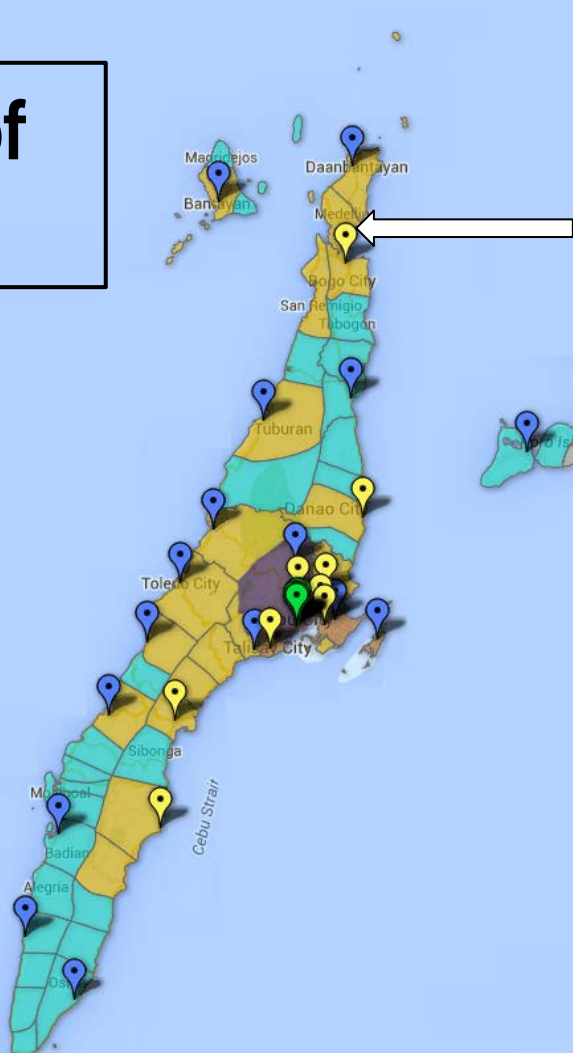
- Infirmary
- Level 1
- Level 2
- Level 3

## Additional Map

[Province of Negros Oriental](#)

[Province of Bohol](#)

[Province of Siquijor](#)



**Facility Name:** Cebu Provincial Hospital (Bogo City)

**Health Facility Type:** HOSPITAL

**Hospital Unit Classification:** Level 1

**Province Name:** CEBU

**City/Municipality Name:** BOGO CITY

**Latitude:** 11.046012

**Longitude:** 123.993989

**Source Latitude/Longitude:** google map

**Health Facility Code Short:**

**Licence Numbers:** 7-047-15-50-H1-1

**Chief of Hospital/MED. Dir.:** Dr. Zoriada G. Yurango

**Classification by Ownership:** LGU

**Authorized Bed Capacity:** 50

**Services Offered:** Clinical Lab, Secondary, Pharmacy, X-ray(L1)

**Region PSGC:** 70000000

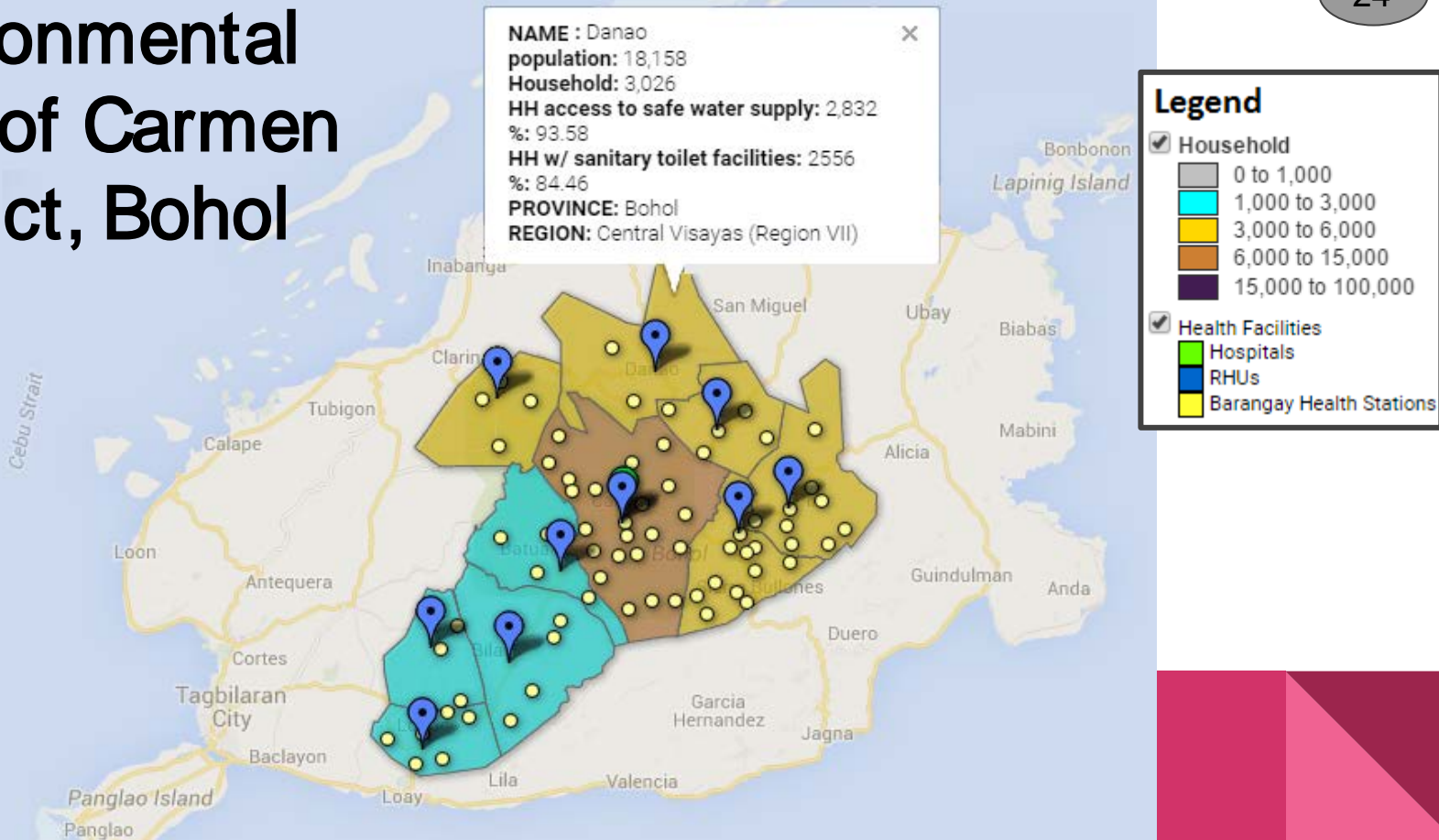
**Address:** Taytayan Hills, Bogo, Cebu

**Telephone Numbers:** (032)434-9128

**Fax Number:**

**Email Address:**

# Environmental Data of Carmen District, Bohol







*Let's join our  
hands, hearts and  
minds ...*

*Let's make  
**KALUSUGAN  
PANGKALAHATAN**  
work for the  
poor.....*



**Daghang Salamat!**