



Republic of the Philippines
Province of Isabela
MANUEL A. ROXAS DISTRICT HOSPITAL
San Antonio, Roxas, Isabela
PHIHEALTH ACCREDITED

2017 NARRATIVE ACCOMPLISHMENT REPORT

A. BRIEF BACKGROUND

Roxas District Hospital is an authorized 50 bed capacity general hospital and actually implementing a total of 75 beds since it transferred to a bigger building which was completed and inaugurated in June 2004, it was granted by the Department of Health (DOH) as Level I Referral Hospital and was accredited by the PHILHEALTH (PHIC) as a Secondary Care Hospital. It is a one (1) storey concrete and painted building with a floor area of more or less 4,500 sq. m. in a lot area of more or less 26,869 sq. m. located along the National Highway in Barangay San Antonio, Roxas, Isabela. The construction of extension building of communicable diseases/ cases was started in 2016 with a floor area of 165 sq. m. It is of great importance that another building or extension has been under construction. This building is for the isolation of communicable disease cases, it will be equipped with necessary equipment, medicine and supplies for the treatment of such cases. This area is exclusively for them, an area where they can move freely, with enough ventilation and lighting. Standard precautions in isolation will be observed in this area to lessen the transmission of these diseases. With this, patient will be treated accordingly and will have a faster recovery. The hospital is owned and operated by the Provincial Government of Isabela and ranked fifth in the entire Region II for NBB compliance in 2016.

The Manuel A. Roxas Hospital has served patients with:

	2015	2016	2017
Philhealth	5,782	5,899	5,728
Provincial Health	670	633	532
Service Indigent	1,088	17	915
Pay Patients	598	463	396
TOTAL	8,138	7,912	7,628

Animal Bite Center

	2015	2016	2017
Total Number of Patients Served	2,354	2,661	9,696

Anti-rabies Consumption					
2015		2016		2017	
RIG	883	RIG	1,013	RIG	1,117
Rabipur	1,288	Rabipur	356	Rabipur	0
Verorab	1,066	Verorab	2,235	Verorab	3,833

Newborn Screening Percentage

	Inborn	Outborn	Percentage
2015	1,728	35	97.7%
2016	1,802	22	99.06%
2017	1,602	14	99.37%

Radiology Section

	X-ray	Ultrasound	Total
2015	2,602	570	3,172
2016	4,807	408	5,215
2017	3,528	420	3,948

Laboratory Section

	Lab Test Done	# of Admission
2015	35,445	8,185
2016	37,628	9,481
2017	27,018	8,973

B. BED CAPACITY AND OCCUPANCY RATE (BOR)

2015	123.01%
2016	153.98%
2017	146.73%

C. DEPARTMENT/SERVICES AVAILABLE

The District Hospital provides the following services to its client:

1. Out-Patient Services
2. In-patient Care
3. Emergency Room Services
4. Dental
5. Pharmacy
6. Laboratory
7. Radiology (X-Ray and Ultrasound)
8. Animal Bite Treatment Center (ABTC)
9. Immunization Services (Hepa B at birth and BCG)
10. Newborn Screening
11. Mother Baby Friendly Hospital (Exclusive Breastfeeding)

12. Family Planning
13. TB DOTS Referral Clinic
14. Orthopedics
15. Ear Nose Throat
16. BEMONC Provider
17. Blood Station

D. HOSPITAL OPERATIONS

a. Out-patient Department Census

2015	14,868
2016	27,828
2017	29,430

b. Ten (10) Leading Causes of OPD-Consultations 2017

1. Injuries 2° to Animal bites, gunshot wound, lacerated wound, stab wound
2. Follow-up examination after other treatment for other conditions
3. Acute upper Respiratory Infection
4. Physical examination
5. Multiple injuries
6. Urinary Tract Infection
7. Routine follow-up postpartum examination
8. Acute Gastroenteritis (AGE) with moderate dehydration
9. Acute bronchitis

c. Average Total Admission per Year

2015	8,185
2016	9,481
2017	8,973

d. Average Length of Stay/Confinement 3-4 days

e. Ten (10) Leading Causes of Admission 2017

1. AGE
2. Pneumonia
3. Urinary Tract Infection
4. Acute gastritis
5. Hypertension
6. Bronchial asthma
7. Traumatic asthma
8. Acute bronchitis
9. Influenza
10. Chronic obstructive Pulmonary Disease

f. Ten (10) Leading Causes of Mortality 2017

1. Cerebro Vascular Accident
2. Pneumonia , High Risk
3. COPD
4. Pulmonary Tuberculosis
5. Prematurity
6. Congestive Heart Failure
7. Rheumatic Heart Disease
8. Chronic Obstructive Pulmonary Disease
9. Bronchial Asthma

g. Consultation Rate

2015	22.23%
2016	23.30%
2017	31.18%

h. Admission-Consultation Ratio

2015	1:22
2016	1:23
2017	1:31

i. Gross Death Rate

2015	0.94%
2016	1.05%
2017	1.18%

j. Gross Infection Rate

k. Maternal Mortality Rate (MMR)

2015	0.05%
2016	0%
2017	0.13%

l. Neonatal Mortality Rate (NMR)

2015	0.45% - 8 cases
2016	0.27% - 5 cases
2017	0.43%- 7 cases

m. Infant Mortality Rate (IMR)

2015	0.45%
2016	0%
2017	0%

n. Fetal Death Rate

2015	0.17% - 3cases
2016	0.70% - 13cases
2017	1.0 % - 16cases

o. ER Death **14 cases**

p. Dead on Arrival **49 cases**

q. Average Total Surgery **672**

Caesarian Section	- 299
Major surgeries	- 88
Minor Surgeries	- 285

r. Deliveries

	2015	2016	2017
Normal Deliveries	1,483	1,434	1,330
NID	166	127	14
Caesarian Section	282	411	299
Total	1,931	1,972	1,643

E. PERSONNEL / STAFFING

Currently there are eighty-six (86) Plantilla positions, forty-three (43) personnel with permanent appointment, forty-three (43) vacant funded positions and five (5) vacant unfunded positions. At present, in the Administrative Services there are eight (8) permanent employees and twenty-three (23) contractuels; in the Nursing Service, there are thirteen (13) permanent nurses, four (4) contractual nurses, six (6) permanent nursing attendants, five (5) detailed midwives, thirty-three (33) contractual nursing attendants, while in the Clinical and Ancillary Services, we have fifteen (15) permanent employees including the nine (9) permanent Physicians and two (2) permanent dentist, nine (9) contractuels. There are thirteen (13) private doctors with different specialty have memorandum of Agreement (MOA) with the Provincial Government serving in this hospital.

F. ANNUAL BUDGET – MOOE

2015	P 4,786,750.00
2016	P 4,956,750.00
2017	P 5,231,000.00

G. HOSPITAL INCOME

	2015	2016	2017
PHIC	23,048,222.00	49,644,561.00	47,710,275.00
PAYING	5,184,979.00	4,358,692.00	5,768,763.00
TOTAL	28,233,201.00	54,003,253.00	53,479,038.00

H. EXISTING PHYSICAL FACILITIES

1. WATER SOURCE
 - Electric Deep Well
2. ELECTRICITY
 - ISELCO II
 - 120 KVA PERKINS Generator Set (Diesel Engine)
3. COMPUTERS
 - Computer Desktop on different departments (10units)
4. TRANSPORTATION
 - KIA-SGZ 876
 - JINBAE MOTOR Ambulance SJA-418
 - FOTON Ambulance GB 6954 (from PCSO)
5. COMMUNICATIONS
 - 2 units PLDT Telephone with Internet and Fax Machine
6. LABORATORY EQUIPMENTS
 - Hematocrit Centrifuge
 - Microscope
 - Mindray C-3200
 - RAYTO RT-9200 Semi-Auto Chemistry Analyzer
 - Differential Counter
 - Tally Counter
 - Finicare –PSA / HbA1c (Confirmatory Test for Diabetes) - New
 - Cornley AFT-500 Electrolytes Analyzer - New

I. ACHIEVEMENTS

- ✓ Recipient of Outstanding Performing Facility 99% Newborn Screening for the Year 2016
- ✓ Hospital D.O.T.S. Achiever Award program implementation Review July 12-13, 2016
- ✓ Ranked fifth in the entire Region II for NBB compliance in 2016

Submitted by:

NELSON O. PAGUIRIGAN,MD,MPH
Chief of Hospital

Accomplishments/Improvements

1. Our 24 hours duty Physician daily and one more Physician for the Out-patient department has become a policy for the hospital as per directive of the Chief of Hospital in order to give immediate attention to patients who came for consultation at the OPD and to attend to our Emergency cases while the 24-hour duty physician is busy with their course in the ward specially in the morning.
2. The Laboratory & Pharmacy Sections are now transferred to the newly renovated room. (see attached photos).
3. The Out-Patient Department had been divided into two rooms, one for Consultation, and the other for minor surgery room. This was done to accommodate the minor surgery cases while attending to other out-patients on the other room.
4. The continuous improvement of Manuel A. Roxas District Hospital under the management of Dr. Nelson O. Paguirigan, the undersigned did not stop on the improvement of the hospital from its façade by fencing the perimeter and painting it to recognize the hospital entrance vividly.
5. The tiling of the lobby, corridor, various offices and the hallway of the hospital has been completed and repaired.
6. Repair of aluminum and glass doors on various offices and at the entrance at the emergency room of the hospital replacement of broken glass door of the Operating Room.
7. Preparation of the newly built Extension building for Communicable Diseases was started by installing mechanical beds with foams.

Prepared by:

NELSON O. PAGUIRIGAN, MD, MPH

Chief of Hospital I

J. INDICATORS	Performance Standard	ACCOMPLISHED 2015	ACCOMPLISHED 2016	ACCOMPLISHED 2017
OUTCOME/OUTPUT MEASURES		Green Color – achieved Red color – not achieved		
Bed Occupancy Rate	85%	123.01%	153.98%	146.73%
Average Length of Stay	3 days	3 days	3 days	3-4 days
Consultation Rate	10-15%	22.23%	23.30%	31.18 %
Laboratory Utilization Rate	200-300%	433%	396%	301%
Net Death Rate (total number of deaths after 48 hours in the hospital)	4-5%	0.37%	0.58%	0.53%
Gross Death Rate (all deaths in the hospital including death less than 4 hours)	3-4%	0.94%	1.05%	1.18%
Maternal Death Rate	0	0.05%	0%	0.13
Neonatal Death Rate	<2%	0.45%	0.27%	0.43%
Fetal Death Rate	<2%	0.17%	0.7%	1%
Infant Death Rate	<2%	0.45%	0%	0%
Post-Op Death Rate	Up to 1%, 10-15%	0	0	0
Post-Op Infection Rate	10-15%	-		0
Gross Infection Rate (ratio of infections following clean wound operations or birth or have developed in medical cases after admission to hospital)	10-15%	-		
Caesarian Section Rate	10%	14.60%	20.84%	18.35%
Filled Prescription Rate	80%	80.38%	95.39%	97.4%
% of Indigent Patients served	80%	13.37%	11.59%	11.99%

Admission: Consultation Ratio	1:10	1:25	1:19	1:31
PUBLIC HEALTH PROGRAMS IMPLEMENTATION (Hospital as Center of Wellness)				
<i>TB-DOTS</i>				
1. No. of TB cases diagnosed by sputum microscopy		23	39	354
2. No. of TB cases diagnosed by sputum microscopy referred to RHU for treatment		57	38	44
3. No. of TB cases diagnosed by X-Ray		83	83	65
4. No. of TB cases diagnosed by X-Ray referred for sputum microscopy		70	70	56
5. No. of sputum positives cases initiated treatment		38	38	42
6. No. of TB patients under-going DOTS		98	98	160
<i>MALARIA Program</i>				
1. No. of Malaria cases diagnosed by thick & thin smear		0	0	0

2. BSMP accuracy rate				0
MOTHER BABY FRIENDLY CERTIFIED				
1. No. of newborns initiated breastfeeding		100%	100%	100%
NEWBORN SCREENING				
2. No. of newborns with newborn screening		1,763 97.7%	1,824 99.06%	1,612 99.37%
FAMILY PLANNING				
1. No. of BTL performed		7	38	156
2. No. of NSV performed/ Surgical Vasectomy			0	0
3. No. of IUD clients			39	82
REFERRAL SYSTEM				
1. % of cases admitted with referral slip from RHU			0.91% 73 cases	
2. % of cases discharged with referral slip to RHU				0
3. % of cases referred to higher facilities			2.6%	3%
Category of DOH-LTO		Level I	Level I	Level I
Category of PHIC Accreditation		Secondary Care	Secondary Care	Secondary Care

PHIC patients served:				
1. Percent indigent PHIC cardholder		74.13%	75.91%	78.09%
2. Percent IP PHIC cardholder		25.87%	24.09%	21.96%

Submitted by:

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