



Likewise, the surgical procedures done, both elective and emergency have slightly decreased as compared from 2016 due to renovation on the Operating Room, but still surpassed our target for this year. With a total 10,501 patients operated, we have exceeded by more than 68.29% of our target.

As there was an increased in patients served, we are glad that there was a decline in net death rate and hospital acquired infection rate. Though we still haven't met our target of 3% net death rate, 5.05% net death rate is considered an improvement in comparison to last year's 5.42% death rate. The determined effort of the Infection Control Committee and the rest of the staff of our hospital found to be effective as our infection rate curve further to 0.53% as compared to last year's 0.97%.

And inspite of increased census, we still managed to maintain the high level of satisfaction of the clientele with a rating of 99.85%.

Constant growth and development in the training of our staff also took the forefront on this year's activities as many participated in several seminars, workshops, postgraduate courses and skills enhancement programs, such as, Leadership Training, BLS & ACLS Training, Basic Infection Control Practices Seminar, Gender Sensitivity Training, etc. This is in addition to the regular monthly Mortality and Morbidity Conferences, Tumor Board, Specialty Case/CPC Conferences, and various orientations.

As for the residency training, the hospital had a total of 262 residents trained. Among the graduates, we have an average of 99% passing rate in the specialty board exams. All 15 Clinical Departments have maintained their accreditation status from their respective specialty boards.

We had a total of 3,585 trainees for the year with 13 affiliate residents for the year, 375 postgraduate interns, and 2,131 affiliate Medical Clerks rotating in different areas. In the paramedical affiliate training, 238 Medical Technology Interns, 78 Radiological Interns, 402 Physical Therapy/Occupational Therapy Interns, 23 Psychiatry Interns and 43 Pharmacy Interns rotated in our institution.

In research, the different clinical departments also produced relevant researches published in local journals and winning prizes from the different research fora both here and abroad. For this year, we have 185 research papers proposed/approved by the IRB, 12 accomplished researches, and 77 on-going researches.

Continuous upgrading of facilities, wards/department renovations, repainting of some areas and procurement of several equipment were also done for improvement and for better delivery of services. The Medical Arts Building became fully operationalized, as well the Neurology and Urology Wards at the Central Block Building.

The Wellness Programs of the different departments continued to provide activities/lectures/information dissemination programs conducted for patients as well as 17 surgical missions such as "Operation Tule", Breast, Thyroid, Hernia Missions and BTL, Gynecology, Oncology and REI Missions, among others. There were wellness programs conducted: 6 Awareness Preventive Programs (Cancer, DRE, Immunization,

Deworming, Garantisadong Pambata, HIV and other STIs); 6 Health Clubs (ARUGA, KADS JR, Leprosy Club, Pusong Malusog, Hinga, Stroke Club); and 42 lectures & lay fora aside from daily lectures at the OPD Waiting Area about Wellness activities.

The Medical Staff also participated in different hospital activities throughout the year, like the Hospital Foundation Week Celebration, Disaster Drill, National Hospital Week and JRRMMC Sports Fest and Hospital Christmas Party.

The GAD Focal Point System (GFPS) also took the forefront this year in accelerating gender mainstreaming within the agency especially in monitoring the development and implementation of its programs, projects, and various activities such as Gender Sensitivity Training (GST), Workshop on Gender Indicators and Sex Disaggregated Data, Orientation Seminar on the 4Rs of WCPU and HIV-AIDS Voluntary Counselling and Testing Training Course. Moreover, the GFPS timely submitted the Annual GAD Accomplishment Report of 67.4 Million agency accomplishment for 2017 and the GAD Plan and Budget FY 2019. This signifies commitment in providing the highest level of training, service and care to all of its clients.

The Health Emergency Management System (HEMS) conducted the Manila City Wide Multi-Disaster Drill. HEMS also conducted three types of BLS Trainings in which 34 sessions were conducted and 81% of employees have been trained as of December. The HEMS participated on various government & non-government deployment to 29 various activities such as Medical Quiapo Feast Day, 65<sup>th</sup> Miss Universe Pageant, ASEAN 31<sup>st</sup> Meeting, Office of the President Fun Run Event, National Women's Month Celebration, 119<sup>th</sup> Independence Day and other Medical and Dental Missions.

The Infection Prevention and Control Committee (IPCC) have accomplished less than 1% hospital acquired infection rate of 0.53% and less than 2% needle stick injury and splash injury of 1.29%. There was also a decrease of 10% in ship rate from the previous year. Several new and revised policies were also approved and implemented.

The Nutrition and Dietetics Management Department (NDMD) was able to comply with the regulatory requirements of sanitary permit and individual health certificates. Total expenditure for food service and other activities was **P 14,047,828.35** with a total of **468,184 patients' meals served (JRRMMC and GGHS) including tube-feeding formulas**. As a whole, food service, diet counselling and involvement in the Wellness Programs particular to nutrition were all very satisfactorily rendered by the NDMD.

As to the facilities, different in-house infrastructure projects as well as outsourced repair/renovations/ building improvements were continually monitored and supervised by the FMD-Engineering, the following projects were completed in 2017:

1. Conversion/Renovation of Existing office to Legal & Statistics - January 21, 2017
2. Conversion of Stock room to Pulmonary Laboratory and Renovation of hallway - April 19, 2017
3. Design and build of Powerhouse phase I - May 29, 2017
4. Development of MRI Room - June 16, 2017

5. Provision of CBB window grills and technician ledge - July 15, 2017
6. Conversion of OPD Comfort Room to Wound Care Unit - July 26, 2017
7. Development of Dialysis Clinic - November 10, 2017
8. Design and build of proposed Powerhouse Phase II - December 29, 2017
9. Re-piping of LPG Pipeline & Provision of two (2) 600kg bullet tank

Attached are the pictures of the above-mentioned infrastructures.

On financial aspects, this Medical Center has a total cash allocation received for the year 2017 amounted to Php1,056,238,212.00 of which 64.82% was utilized for Personnel Services, 29.78% for Maintenance & Other Operating Expenses and 4.72% for Capital Outlay with a total of 99.32% cash utilized and only 0.68% unutilized.

JRRMMC was able to collect PhP 464,020,894.00 from PHIC, a more or less 95.01% of the total amount transmitted by BPC which is PhP 488,350,907.13. Although there were months with lesser collection but still we exceeded last year's collection which is PhP 408,934,991.60 by 6.32%. Some of the months with lesser collection was due to system adjustments.

With the marketing strategy and effort done by the different departments from the Medical, Nursing, HOPSD and Finance, this Medical Center PHIC utilization rate of 87.24%. Out of 21,819 discharged patients from January to December 2017, only 2,784 (12.76%) are Non-PHIC and 19,035 (87.24%) were PHIC patients.

Events and forces have molded our institution. We continue to innovate and provide quality service despite the limited resources available. There are still many things to be done for the coming year. It includes continuous improvement of our services with acquisition of new equipment, specialty services and infrastructure developments. We need to improve our quality assurance programs in providing better care to our patients. This is line with our vision that JRRMMC will be a one-stop, world class, state-of-the-art institution providing high-quality, safe and cost-effective care and the leading center for education and training.

The following are the highlighted accomplishments of the different services with the problems, issues encountered and recommendation of each Division:

### **MEDICAL SERVICE**

#### **ANESTHESIA:**

Highlight of Accomplishments:

1. Granted full three-year accreditation by the Philippine Board of Anesthesiology
2. Conduction of lectures
3. Serviced a total of 13 Medical Surgical Missions
4. Attendance to lectures/seminars/workshops/conferences

#### Issues and Concerns:

1. Need for additional staff
2. Lack of Biomed engineer to maintain machines
3. Deficiency in the number of anesthesia machines, patient monitors and other required equipment for training
4. Continuous procurement of anesthetic drugs which compromise anesthesia service
5. Inconsistent internet connection needed for Anesthesia Digital Census System

#### **BEHAVIORAL MEDICINE:**

##### Highlight of Accomplishments:

1. Conduction of lectures/lay fora
2. Additional administrative staff
3. Attendance to lectures/seminars/workshops/conferences

##### Issues and Concerns:

1. Need for additional staff
2. Procurement of office supplies and equipment
3. Need for internet connection

#### **DENTAL SECTION:**

##### Highlight of Accomplishments:

1. Conduction of Wellness programs
2. Attendance to seminars/lectures/meetings

##### Issues and Concerns:

1. Insufficient/inconsistent dental supplies

#### **DERMATOLOGY:**

##### Highlight of Accomplishments:

1. Chosen to be one of the Regional Dermatology Specialty Centers in the country
2. Passing rate of 100% in the specialty board exam with 6 over 8 residents in the top10
3. Awards in research presentations and academic excellence
4. Patient education, assistance and outreach programs through wellness lectures and medical missions

5. Acquisition of Yag laser and 5-header microscope
6. Conduction of Wellness programs/lay fora
7. Attendance to lectures/seminars/workshops/conferences

**Issues and Concerns:**

1. Difficulty encoding in the Bizbox because of the slow system resulting in delayed turnaround time
2. Shortage of supplies
3. Unavailability of special stains and immunohistochemical stains
4. Unavailability of most Dermatological medication in the DOH Botika
5. Discontinuation of foreign residents which give international recognition to the Department

**EMERGENCY SERVICE COMPLEX:**

**Highlight of Accomplishments:**

1. Complete and real-time posting of patients' charges because of provision of On the Go Medicines
2. Centralization of supplies and medicines by designating a specific area for dispensing (Cubicle C) and provision of main stock room
3. Utilization of a portion at the Minor Operating Room as Resuscitation Area for patients needing immediate resuscitation
4. Creation of Isolation Room for infectious diseases
5. Acquisition of new equipment such as refrigerators, suction machines, defibrillators

**Issues and Concerns:**

1. Shortage of emergency medication and supplies
2. Increased number of bed at ward due to:
  - Unavailability of bed at the ward
  - Waiting for OR slot for Direct operation and lack of manpower at OR
  - Delayed ancillary results
  - Some OPD patients that were not accommodated for admission are being advised to proceed to ESC for admission (elective cases)
  - Unavailability of forms from Printing Section
  - Delayed transfer of admitted patient to ward
  - Overcrowding due to Medico Legal and Alcohol Breath cases
  - No paging system in the Unit
  - Overused equipment specifically stretchers and ECG machines

## **ENT-HNS:**

### Highlight of Accomplishments:

1. Establishment of ENT-HNS Center
2. Granted full accreditation by the Philippine Board of Otolaryngology-Head and Neck Surgery
3. Held its first In-House Temporal Bone Course & Dissection Workshop last April
4. Additional one new visiting consultant
5. Conduction of surgical mission
6. Conduction of wellness programs/lay fora
7. Conduction of first post-graduation course on Silicone Implant
8. Awards in research presentations
9. Fund raising activity (raffle)
10. Acquisition of new equipment and instruments
11. Attendance to lectures/seminars/workshops/conferences

### Issues and concerns:

1. Procurement of new equipment and instruments
2. Prompt completion of the OR with additional personnel, operative sets and gowns and regular furnishing of supplies

## **INTERNAL MEDICINE:**

### Highlight of Accomplishments:

1. Additional two new visiting consultants
2. Remains active in different outreach programs
3. Conduction of wellness lectures/lay fora
4. Held the 1<sup>st</sup> Rayuma Klinik Post Graduate course last October
5. Participation in various medical missions
6. Fund raising activities (Valentine cupcake and movie block screenings)
7. In-House Blood Letting activity
8. Hosted Post graduate course last September 16, 2016
9. Acquisition of new equipment (aircon, computer, printer, etc.) in the Medical Oncology Section
10. Attendance to lectures/seminars/workshops/conferences

### Issues and concerns:

1. Limited access to laboratory exams used in emergency cases which are frequently unavailable
2. Delayed laboratory results
3. Inadequate blood products
4. Limited access to emergency medications at the ER
5. Accessibility of portable x-ray utilization

6. Additional equipment for Medical Oncology
7. Availability of Chemotherapy drugs including morphine for indigent patients at the Pharmacy

## **NEUROLOGY:**

### Highlight of Accomplishments:

1. Chosen to be one of the Regional Brain Centers in the country
2. Successful transfer of the Neurology Ward to the Central Block
3. Conduction of wellness lectures/lay forums
4. Awards in research presentations
5. Fund raising activity at the OPD (rummage sale)
6. Attendance to lectures/seminars/workshops/conferences

### Issues and concerns:

1. Need for additional essential diagnostic machines such as MRI, EEG machine, EMG-NCV machine, etc.

## **NUCLEAR MEDICINE:**

### Highlight of Accomplishments:

1. One graduate passed the Nuclear Medicine Specialty Exam, Nepal Medical Council (Dr. Madhu Neupane)
2. Attendance to lectures/seminars/workshops/conferences & participation in various hospital activities

### Issues and concerns:

1. Lack of additional imaging equipment needed to accommodate large volume of patients
2. Mode of procurement resulting to disruption of diagnostic services
3. Need for secretary
4. Need for cardio fellows to perform cardiac scan which is now being offered by the department

## **OB-GYNECOLOGY:**

### Highlight of Accomplishments:

1. Significant increase in the number of patients since the opening of the ward
2. Acquisition of various equipment (fetal monitors and hand-held doppler)
3. Additional three new visiting consultants

4. Full operation of the DR - Operating Room
5. Celebration of annual wellness activities such as Buntis Day and Menopause Day
6. Conduction of several surgical missions
7. Participation in various AD activities
8. Conducted post graduate course
9. Awards in research presentations
10. Attendance to lectures/seminars/workshops/conferences

Issues and concerns:

1. Additional staff in the OB DR/LR/OR complex to operate to maximum potential
2. Need for various additional equipment
3. Expedite procurement of equipment

**OPHTHALMOLOGY:**

Highlight of Accomplishments:

1. Pay consultation area at the OPD has been identified as the site of the proposed Eye Center
2. Provided daily ophthalmic services at the National Center for Geriatric Health
3. Additional one new visiting consultant
4. Improved utilization of Philhealth benefits by offering cataract services to patients with compliance to the No Balance Billing policy
5. PHIC Claim Form 2 completely filled out and signed immediately after operative procedure before submission to Philhealth, which undoubtedly facilitated collection of PHIC reimbursements of the hospital
6. Acquisition of new equipment (CRK 2000 Automated Refractometer)
7. Attendance to lectures/seminars/workshops/conferences

**OUT PATIENT DEPARTMENT:**

Highlight of Accomplishments:

1. Conducted various activities/campaigns/lectures by different departments in accordance with DOH-Health Events
2. Increase of patients seen/checked at the OPD
3. Maintained cleanliness and orderliness
4. Staff were able to update trainings and licenses
5. Installation of Bizbox to all clinical departments
6. Installation of TV sets for DOH wellness information at the OPD lobby

Issues and concerns:

1. Need for elevator/ramp for patient transport to and from second floor
2. Late arrivals of resident physicians

3. Need for additional personnel (residents, nurses, nursing attendants and social workers)
4. Lack of utility personnel to clean the area after 4:00PM
5. Difficulty in availing maintenance services from the Engineering Department
6. Cases of theft or loss of belongings of the hospital personnel
7. Need for CCTV to monitor patients/relatives/visitors coming in and out of the clinics/offices

## **ORTHOPAEDICS:**

### Highlight of Accomplishments:

1. Granted full accreditation by the Philippine Board of Orthopedics
2. Additional two new visiting consultants
3. Participated in the DOH campaign against firecracker-related injury by actively handling Aksyon Paputok Injury Reduction (APIR) patients at the emergency room
4. Awards in research presentations
5. Key members of consultant staff holding positions in National Organizations
6. Attendance to lectures/seminars/workshops/conferences

### Issues and concerns:

1. Some key drugs were not available
2. MRI is a key diagnostic tool in orthopedic pathology but also not available
3. Procurement of new equipment
4. Additional staff (nurses and helpers) at the OR

## **PATHOLOGY & LABORATORIES:**

### Highlight of Accomplishments:

1. Re-accreditation by the Philippine Society of Pathology
2. Promotion of staff
3. Acquisition of various new equipment
4. Implementation of "same day" release of OPD results
5. Operational ESC Satellite Laboratory and Point of Care Testing to be available in the area
6. Increased MBD activities
7. Availability of Petty cash fund for laboratory tests which are not available in the hospital
8. MOA for outsourcing with Dr. Jose Fabella Hospital
9. Celebration of World Blood Donors Day last June
10. Won 1<sup>st</sup> Place in the Resident's Physicians Organization (RPO) Night together with Radiology, Radiology and Nuclear Medicine departments
11. Attendance to lectures/seminars/workshops/conferences

Issues and concerns:

1. Need for renovation of the entire department
2. Procurement of new equipment
3. Problems in procurement resulting in unavailability of laboratory services
4. Limited space and facilities
5. Slow process in requests for replacement of needed machines/equipment
6. Difficulty in availing maintenance services from the Engineering Department

### **PEDIATRICS:**

Highlight of Accomplishments:

1. Collaboration with the Miss World Organization for the Human Milk Bank project
2. Celebration of 18 Day Campaign last November 25 to December 12, 2017
3. Participation in various GAD activities
4. Attendance to lectures/seminars/workshops/conferences

Issues and concerns:

1. Deficiency of subspecialty consultants
2. Procurement of new equipment
3. Need for adolescent ward (separate male and female ward ) for patients 13 to 18 years of age
4. Lack of equipment such as mechanical ventilator, ECG machine, laryngoscope and defibrillators at the NICU, PICU and ward

### **PHYSICAL MEDICINE AND REHABILITATION:**

Highlight of Accomplishments:

1. Acquisition of various new equipment
2. Conduction of wellness lectures/lay fora
3. No valid complaint was reported or written based from Public Assistance and Complaints Desk and Customer Satisfaction Survey Form
4. Participation to various hospital activities
5. Recipient of Certificate of Recognition for Occupational Therapy Section by the UST College of Rehabilitation Sciences
6. Attendance to lectures/seminars/workshops

### **RADIOLOGY:**

Highlight of Accomplishments:

1. Acquisition of new equipment

2. Participation to hospital activities
3. Won 1<sup>st</sup> Place in the Resident's Physicians Organization (RPO) Night together with Radiotherapy, Pathology and Nuclear Medicine departments
4. Attendance to lectures/seminars/workshops/conferences

Issues and concerns:

1. MRI machine still awaiting installation at the Central Block Building
2. Additional consultants per section or modality
3. Procurement of new equipment

## **RADIOTHERAPY:**

Highlight of Accomplishments:

1. Conducted two Post Graduate Courses last January and October
2. Consultants conducted lectures both locally and abroad
3. Won 1<sup>st</sup> Place in the Resident's Physicians Organization (RPO) Night together with Radiology, Pathology and Nuclear Medicine departments
4. Fund raising activity (movie screening)
5. Registered and officially participated on Safety in Radiation Oncology (SAFRON) Incident Learning Center of the International Atomic Energy to ensure quality and safety of treatment of our patients, personnel and general public
6. The department has been a training hub/center for medical physicist and radiologic technology therapists of other DOH hospitals in the provinces that are acquiring LINAC machines and brachytherapy facilities
7. Participation in local and international conferences
8. Attendance to lectures/seminars/workshops/conferences

Issues and concerns:

1. Procurement of 2<sup>nd</sup> LINAC-IMRT and electron capable machine

## **SURGERY:**

Highlight of Accomplishments:

1. Conduction of wellness lectures/lay fora and surgical missions
2. Participation to hospital activities
3. Fund raising activity through movie block screening
4. Conduction of Blood Letting activity
5. Conduction of Postgraduate course
6. Attendance to lectures/seminars/workshops/conferences

## **UROLOGY:**

### **Highlight of Accomplishments:**

1. Conduction of wellness lectures/lay fora and surgical missions
2. Participation to hospital activities
3. Attendance to conventions, seminars and conferences
4. Awards in research presentations
5. Attendance to lectures/seminars/workshops/conferences

### **Issues and concerns:**

1. C-arm of ESWL is not functioning (not covered by warranty anymore)
2. Procurement of new equipment

## **GENERAL RECOMMENDATIONS:**

### **1. MANPOWER**

- Hiring of additional staff due to increase in subspecialties and in the number of patients being catered by our institution

### **2. SUPPLIES & EQUIPMENT**

- Regular monitoring of supplies and update
- Tie-up with company
- Investigate procurement process
- Innovate alternative modes in the procurement process
- Regular preventive maintenance of existing equipment
- Upgrading and procurement of machines

### **3. STAFF DEVELOPMENT**

- Budget for various multidisciplinary/interdepartmental lectures/orientation/trainings/seminars/workshops
- Regular work load analysis of employees to maximize equal distribution of assigned tasks in order to ensure quality of service.
- More spacious working areas in order for the staff to work without restraint

### **4. INFRASTRUCTURE**

- Improvement/Renovation of certain areas to meet the demands of service and regulatory requirements

### **5. OTHERS**

Provision of the following:

- Centralized computer information system for a more organized, efficient, and hassle-free data management, communication, and record-keeping system
- Internet access
- CCTV cameras
- Adequate parking area

CENSUS:

***I. PATIENT CARE SERVICES***

A. Total Patients Served	-	621,189
In- patient/service days	-	155,781
Admitted	-	21,988
Discharged	-	22,030
Outpatient Consultation/ Treatment	-	347,974
Emergency Consultation/ Treatment	-	106,933
B. Total Operations	-	10,501
Elective Surgeries	-	5,527
Emergency Surgeries	-	4,971
Ancillary Services		
Radiological Procedures & Ultrasound	-	71,687
C.T. Scan	-	12,150
Laboratory Services		
Clinical Microscopy	-	27,546
Hematology	-	89,096
Clinical Chemistry	-	265,913
Blood Banking:		
ABO Typing Tube Method	-	25,680
RH Typing Tube Method	-	25,680
Total Crossmatched	-	16,254
Blood Transfused	-	10,751
Networking	-	316
ABO Typing Slide Method	-	262
RH Typing Slide Method	-	262
Drug Testing	-	1,497
Total number of donors		
ABO/RH Typing (Donors)	-	9,341
Hemoglobin and Hematocrit	-	9,341
Voluntary Donors	-	7,980
Replacement Donors	-	159
Mobile Blood Donations	-	1,473
Total Blood Collected	-	3,457

Immunology/Serology	-	5,806
Microbiology	-	21,909
General Pathology	-	13,273
Nuclear Medicine: Imaging Procedure		10,890
Other Special Services		
2D Echo	-	3,106
Brachytherapy	-	1,084 exposures
ECG/EEG	-	13,162 / 369
Physical Therapy	-	13,749
Occupational Therapy	-	2,864
Holter Monitor	-	163
Treadmill Stress Test	-	49
Pharmacy/DOH Botika Services		
Prescriptions Filled	-	265,504 / 511,059
Unfilled	-	0 / 337
Medical Social Services	-	77,749
Eligibility Studies		
(Casework; Patients with sponsored PHIC, MAF, and		
Referral to and from other agencies)		
Dental Section	-	3,791
Psychological Services		
Industrial	-	282
Clinical	-	72
Other Referral	-	31
Mental Clearance	-	393

## TRAINING AND REASEARCH OFFICE

Activities Conducted	Targets/ Beneficiaries	Remarks
Basic Research Methodology Lecture Series January 9, 10, 11, 13, 23 & 25, 2017, AVR 1	701 residents	To equip the residents on basic tools needed to complete their research requirements
Critical Appraisal and Meta-Analysis Lecture February 10, 2017, OPD Conference Room	11 consultants 5 fellows 59 residents	To equip the residents on basic tools needed to complete their research requirements
Strategic Planning and Workshop on ER, OPD & OR Concerns (Chief and Associate Chief Residents) March 7, 2017 Timberland Sports and Nature Club, San Mateo, Rizal	10 consultants 24 residents	To resolve most common problems encountered by each department in admitting patients specially at the triage area
Basic Research Ethics Training March 23 to 24, 2017, AVR 1	124 residents 6 consultants	Enhance capability of residents to conduct ethical researches
Medical Certification on Cause of Death (First Year Residents) March 31, 2017, AVR I 1:00 pm – 4:00 pm	37 Residents	Improve knowledge on medical certification on cause of death
Mortality & Morbidity Conference 1:00 – 3:00 p.m. OPD Conference Room (Every 4 <sup>th</sup> Tuesday of the month)	641 Resident Physicians Consultants	Learning activity to improve health outcomes through multidisciplinary approach to health care
Hospital Tumor Board Radiotherapy Conference Room (Every 3 <sup>rd</sup> Tuesday of the month)	491 Resident Physicians 50 Consultants	Learning activity to improve health outcomes through multidisciplinary approach to health care
Specialty Case/CPC Conference 1:00-3:00 p.m. OPD Conf. Room (Every 2 <sup>nd</sup> Tuesday of the Month)	650 Resident Physicians 35 Consultants	Learning activity to improve health outcomes through multidisciplinary approach to health care
Coordinated and facilitated Memorandum of Agreement (MOA) with Manila Health Department for the two-month Community Medicine of PGI's Batch 2017-2018	6 groups of PGI's to rotate every two months at MHD designated health centers	Renewal of MOA with MHD for CY 2017-2018
Postgraduate Interns' Hour Every 2 <sup>nd</sup> Wednesday of the month 11:00AM to 1:00PM 5 <sup>th</sup> floor Multipurpose Hall	480 PGI's (Jan-June) <u>619 PGI's (July to Nov.)</u> <b>1,099</b>	To prepare the PGI's for the physician's licensure examination
Leadership and Communication Skills Seminar for Consultants May 12, 2017 OPD Conference Room Guest Speaker: Prof. Isolde Eder-Valera	<b>41</b> consultants	Enhance and improve Leadership and communication skills of key officials of JRRMMC

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PGIs Graduation and White Coat Ceremony at Winford Hotel MJC Drive, Sta. Cruz, Manila June 27, 2017 July 1, 2016 to June 30, 2017 (Regular Batch) December 10, 2017 January 1, 2017 to December 31, 2017 (Midyear)	<b>167</b> PGI's (Regular)  <b>36</b> PGI's (Midyear)	Recognition and commendation of graduating Postgraduate Interns Batch 2016-2017 (Regular) Batch 2017 (Mid-year)
General Orientation and Mass CPR Training for Incoming Postgraduate Interns, Batch 2017-2018 (Regular) and VMU Clerks for July 2017 to May 2018, June 29, 2017; 8AM to 5PM, AVR 1, 5 <sup>th</sup> floor, JRRMMC	Total # of applicants = 880 210 PGIs accepted <u>38 PGIs withdrawn</u> <b>172</b> PGI's	Orientation of Incoming PGIs and clerks CPR Training for PGIs' and clerks
General orientation for Incoming Postgraduate Interns, Batch 2018 (Midyear) January 1, 2018 to December 31, 2018 December 22, 2017, 5 <sup>th</sup> Flr. Multi-purpose Hall	2018 Midyear Total # of applicants = <b>136</b> <b>52</b> PGI's accepted <b>41</b> attended	Orientation of Incoming Midyear PGI's of JRRMMC Vision, Mission Policies and Internship Program
Orientation for Midyear Entrants (Medical Officer III) July 21, 2017; 1:00 PM Library, 5 <sup>th</sup> Floor, JRRMMC	2 Internal Medicine 1 Radiology 8 Anesthesia <u>2 Pathology</u> <b>13</b> Residents	Orientation of Midyear M.O.'s on JRRMMC Vision, Mission Policies, Rules and Regulation
ICD 10 Orientation for 1 <sup>st</sup> year residents August 2, 2017; 1:00 to 4:00 PM AVR 1, 5 <sup>th</sup> Floor, JRRMMC	7 Internal Medicine 2 Pediatrics 8 Surgery 3 OB-Gyn 1 ENT-HNS 3 Orthopaedics 4 Neurology <u>1 Urology</u> <b>29</b> Residents	To orient the residents on the use of ICD 10 and the proper filling up of medical records and PHIC claim forms.
Legal Issues in the Practice of Medicine September 18-19, 2017 Dermatology Conference Room <b>14.5 CPD units</b>	14 Medical Specialists <u>36 Residents</u> <b>50</b> attendees	1. To enhance the awareness of physicians on the various legal issues involved in the practice of medicine 2. To understand the Patient-Physician Relationship (PPR) 3. To know the respective rights and responsibilities of doctors and patients

Orientation on HIV AIDS Protocols for Doctors December 1, 2017, 3 PM to 5 PM Library, JRRMMC	<b>50</b> attendees	
Good Clinical Practice Guidelines October 18-19, 2017 AVR 1, 5 <sup>th</sup> Floor JRRMMC	<b>48</b> Medical Specialist and Residents	To appraise resident physicians and consultants as researchers on the quality standard in conducting researches that involves human subjects in order for them to provide assurance to the human subjects that their rights and safety and well-being are protected.
Professionalism in Medicine October 27, 2017, 2:00 to 5:00 PM OPD Conference Room Resource Speaker: Ma. Cecilia D. Alinea, MD, MHPed, FPPS	<b>63</b> Medical Officer III	To enhance the awareness of the medical staff on the value of Professionalism in Medicine This is part of the Values Orientation and Enhancement Program
2017 Annual Intradepartmental Research Forum ( <b>Descriptive Research Oral presentation, Analytical and Poster Paper Categories</b> ) November 29, 2017 5 <sup>th</sup> Floor Multi-purpose Hall and AVR	<b>6</b> Descriptive Research, <b>5</b> Analytical Research and <b>10</b> Posters presented <b>33</b> attendees	Presentation of best research papers for 2017 and recognition of outstanding research papers completed, submitted and approved by IRB.
Preparation of Integrated Learning and Development Plan for 2018 December 8, 2017, 8AM to 5PM 5 <sup>th</sup> Floor , AVR	<b>42</b> Employees (Multi-sectoral)	
General Orientation for Incoming 1 <sup>st</sup> year Residents and Fellows December 19, 2017	<b>82</b> incoming 1 <sup>st</sup> year Resident Physicians attended	Enhance camaraderie among new entrants and orientation / JRRMMC culture anchoring
Leadership and Communication Skills Seminar & teambuilding (Paramedical) December 27, 2017 5 <sup>th</sup> Floor Multipurpose Hall Facilitators: Isolde Eder-Valera Jaime Roberto Castillo	<b>35</b> attendees (Paramedical)	Enhance and improve Leadership skills
Issuance of certificates/certification of Training	<b>104</b> Res. Physicians <b>406</b> PGIs <b>120</b> Pharmacy <b>46</b> Rad. Technology <b>150</b> Med. Technology <b>26</b> Beh. Medicine <b>50</b> Legal Issues in the practice of Medicine <b>36</b> Leadership & Communication Skills <b>8</b> <u>Stress Management</u> <b>946 certificates &amp; Certification</b>	

Review of Accreditation Certificates of 15 clinical departments	Updated subspecialty accreditation of all 15 clinical departments set by their respective societies	Ensure updated subspecialty accreditation certificates of all 15 clinical departments are available on file
Review and updating of all MOA's with affiliates in PT, OT, Med. Tech, Rad. Tech, Pharmacy and Behavioral Medicine	Med. Tech = <b>4</b> Rad. Tech = <b>12</b> Phy. Therapy = <b>17</b> Occ. Therapy = <b>3</b> Beh. Medicine = <b>3</b> Pharmacy = <b>2</b>	Renewal of MOA's for 2017-2018
Facilitated order of payment of affiliates	<b>784</b> affiliates	
Facilitated/processed the applications of new MO IIIs and MO IVs, and PGI's in all clinical departments  * PGIs Regular Batch (July 1, 2017 to June 30, 2018)  * PGIs Midyear Batch (Jan. 1, 2017 to Dec. 31, 2017)	Total # of applicants: MO IIIs = <b>398</b> MO IVs = <b>38</b> <b>PGIs (Regular Batch)</b> = 880 <b>210</b> PGIs accepted <b>34</b> PGIs withdrawn # of PGIs as of Dec 2017 = <b>172</b> <b>PGIs (2018 Midyear)</b> Total # of applicants = 136 <b>52</b> accepted	
Acquisition of the office equipment needed in the conduct of training programs of the Medical Training Office.	<b>300 pcs.</b> Heavy duty, stackable chairs <b>1 unit</b> LCD Projector <b>1 unit</b> Desktop Computer <b>1 unit</b> Laptop	For the use in the conduct of trainings, conferences and seminars of the medical division.
Monitored submission of Research requirements of residents and graduating residents/fellows	Proposed researches = <b>103</b> IRB Approved researches = <b>82</b> Researches accomplished = <b>12</b> On-going researches = <b>77</b>	Research proposals completed by residents/ fellows submitted to IRB.
Coordinated schedules of mandatory trainings (BLS, Disaster Awareness, Hand Hygiene, ISO Awareness, Values Orientation Workshop) to all divisions.	Over-all Training Service (Medical, Nursing, HOPSD and Finance Divisions)	In compliance with ISO accreditation requirements

## I. Training

### Residents and Fellows

Department	Residents	Fellows	Total
1. Anesthesiology	20	2	22
2. Dermatology	25	1	26
3. ENT-HNS	14	1	15
4. Internal Medicine	28	5	33
5. Neurology	13	2	15
6. Nuclear Medicine	2	0	2
7. Obstetrics & Gynecology	17	4 Gyne-Onco 2- REI	23
8. Ophthalmology	12	3	15
9. Orthopaedics	11	0	11
10. Pathology	8	0	8
11. Pediatrics	15	0	15
12. Radiology	10	2	12
13. Radiotherapy	8	0	8
14. Surgery	42	6	48
15. Urology	9	0	9
<b>Grand Total</b>	<b>234</b>	<b>28</b>	<b>262</b>

### Observership Trainees

#### Indonesian:

Name	Department	Year Level
1. Cindy Angkawijaya	OB-Gyne	III
2. Katrin Kurniawan	Dermatology	III
3. Ivana Tansil	Dermatology	III
4. Ritchie Santoso	Dermatology	III
5. Lily Mareta	IM	III
6. Agungutomo Yaputra	IM	III
7. Hendrik Salim	IM	III
8. Maulana Widi Andrian	Pediatrics	III

#### Nepalese:

Name	Department	Year Level
1. Ami Pradhan	Dermatology	III
2. Abhishek Singh	Dermatology	II
3. Jasmine Malla	Dermatology	II
1. Nawli Manandhar	IM	II
2. Santosh Pandey	IM	II

No. of Indonesian Trainees : **8**  
 No. of Nepalese Trainees : **5**  
**Total : 13**

## Affiliate Trainees

### Resident Physicians

Las Pinas General Hospital and Satellite Trauma Center	3
Pasay City General Hospital	7
RITM	3
Our Lady of Lourdes Hospital	2
UERRMMCI	2
Ospital ng Makati	5
Metropolitan Medical Center	3
Mary Johnston Hospital	2
PAPRAS Consortium	2
Dr. Jose Fabella Memorial Hospital	2
Ospital ng Maynila	1
Cagayan Valley Medical Center	1
<b>TOTAL</b>	<b>33</b>

### Post-Graduate Interns

Batch July 2016 – June 2017	167
Batch January - December 2017	36
Batch July 2017 – June 2018	172
<b>TOTAL</b>	<b>375</b>

### Medical Clerks

Name of Affiliated School	
1. Virgen Milagrosa University	68
2. Our Lady of Fatima University	1,706
3. University of Perpetual Help Biñan	196
4. Saint Louis University	161
<b>TOTAL</b>	<b>2,131</b>

### Medical Technology Interns

Name of Affiliated School	
1. University of Santo Tomas	120
2. Centro Escolar University	69
3. Manila Central University	28
4. FEU-Dr. Nicanor Reyes Medical Foundation	21
<b>TOTAL</b>	<b>238</b>

### Radiologic Technology Intern

Name of Affiliated School	
1. Medical Colleges of Northern Philippines	5
2. The Family Clinic College	3
3. Luna Goco College	3
4. Holy Infant College	12
5. Dr. Carlos S. Lanting College	20
6. Perpetual Help College – Manila	8
7. Philippine College of Health Sciences (PCHS)	3
8. University of Perpetual Help System Laguna	4
9. University of Perpetual Help System Dalta-LP	3
10. Capitol Medical Center Colleges, Inc.	9
11. Manila Adventist College	4
12. Southeast Asian College	4
<b>TOTAL</b>	<b>78</b>

### Physical/ Occupational Therapy Interns

(Affiliate Trainees/ 1 mo. Rotation in Rehabilitation Medicine)

Name of Affiliated School	
<b>Physical Therapy:</b>	
Daniel Mercado Memorial Medical Center	6
Lyceum of the Philippines - Batangas	20
Manila Adventist College	18
Medical Colleges of Northern Philippines	20
Manila Central University	30
Our Lady of Fatima University	29
Pines City Colleges	9
Perpetual Help College Manila	34
Saint Anne College of Lucena, Inc.	9
Saint Jude College	4
Southeast Asian College Institute	32
Unibersidad de Sta. Isabel	20
University of La Sallete	10
University of Perpetual Help System DALTA	31
University of Perpetual Help System GMA	13
University of Perpetual Help System Molino	12
UERMCC	28
<b>TOTAL</b>	<b>325</b>
<b>Occupational Therapy:</b>	
De La Salle Health Sciences Institute	26
Perpetual Help College Manila	18
University of Sto. Tomas	33
<b>TOTAL</b>	<b>77</b>

A. Practicum in Behavioral Medicine (minimum of 100 hours) = 23

B. Practicum in Pharmacy (200/360 hours) = 43

**Total of Affiliates/Trainees = 3,585**

## II. Accreditation Status

All 15 Clinical Departments and 6 subspecialty training programs have maintained their accreditation status from their respective specialty boards.

## III. Research

	<b>TOTAL</b>
No. of Researches proposed/approved by IRB	
Proposed researches = 103	<b>185</b>
IRB Approved researches = 82	
No. of researches accomplished = 12	<b>12</b>
No. of on-going researches = 77	<b>77</b>

## NURSING DIVISION:

<b>OBJECTIVE / GOAL / MILESTONE</b>	<b>ACCOMPLISHMENT</b>	<b>REMARKS</b>
<b>HUMAN PERSPECTIVE:</b>		
Appropriate staffing pattern as to available number of plantilla positions.	<ul style="list-style-type: none"> <li>All Vacant positions had been filled up except for Nurse III</li> <li>Conversion of 16 Midwife II positions to Nurse I was approved – to fill up in 2018</li> </ul>	Unfilled positions as of Dec. 31, 2017 Nurse III = 4 Nurse II = 3 Midwife II = 1 Nurse I = 17 Midwife I = 1 N.A. II = 10 N.A. I = 22
Appropriate Staff Learning Development Interventions (LDIs) to continuously improve work performance and develop clinical experts.	<ul style="list-style-type: none"> <li>All 2017 Planned Staff Development Programs were conducted by NETRU</li> <li>With very satisfactory rating in the evaluation</li> <li>All staff were given at least 1 LDI every semester</li> <li>Relevant outside seminars/conventions/trainings were attended by selected staff on official time.</li> </ul>	
Improved camaraderie and working relationship among Nursing Division Staff.	<ul style="list-style-type: none"> <li>General Assembly was conducted quarterly and with very satisfactory feedback.</li> <li>Fund raising project for the Teambuilding was done, unfortunately not enough – was cancelled and to implement in 2018.</li> </ul>	Fund for the teambuilding was kept under the Nursing Service Association account

<b>PATIENT SERVICES:</b>		
1. Client satisfaction	<ul style="list-style-type: none"> <li>• Nurse III in every unit acts as patient advocate nurse during daytime.</li> <li>• Client Satisfaction Survey rating improved</li> <li>• Received commendable remarks from EENT patients</li> </ul>	
Performance of OR scheduled elective cases	<ul style="list-style-type: none"> <li>• ORMAT Guidelines had been reviewed and revised.</li> <li>• Improved in the flow of OR cases, both elective and emergency. Although there is still some gaps/issues, but this has been addressed appropriately during regular ORMAT meeting.</li> <li>• Staffing pattern had been reviewed.</li> <li>• OR instruments still on bidding process and with appropriate support budget for the supplies.</li> </ul>	<ul style="list-style-type: none"> <li>• Failed Bidding</li> </ul>
Enhanced Compliance to infection prevention standard practices: Hand hygiene & Environmental Cleaning	<ul style="list-style-type: none"> <li>• Proper hand hygiene facilities installed in the Nurses' Station</li> <li>• Monitored compliance – with some findings and addressed gaps</li> <li>• The hospital maintained the acceptable infection rate.</li> </ul>	<ul style="list-style-type: none"> <li>• To improve facility.</li> </ul>
<b>PATIENT SERVICES:</b>		
Appropriate PPMP on supported budget for equipment Client satisfaction	<p>2017 PPMP submitted on time</p> <p>Other requested items (for the equipment) not acquired due to failed bid and no delivery of awarded items.</p>	
Appropriate patients' charges	<p>Review of Charges for Clinical Areas, ESC, OR, DR had been done. Output presented to the EXECOM</p> <p>Charges for OR had been approved, unfortunately it was suggested to revise with exclusion of manpower.</p>	<p>To schedule in 2018</p>

Completeness and timely submission of discharged patients' records	Still with some delay in accomplishment of final diagnosis. Already coordinated with Dra. Valdez, which will be addressed appropriately.	
<b>INFRASTRUCTURE PERSPECTIVE:</b>		
Appropriate PPMP on supported budget for equipment Client satisfaction	2017 PPMP submitted on time Other requested items (for the equipment) not acquired due to failed bid and no delivery of awarded items.	

## **HOSPITAL OPERATIONS AND PATIENT SUPPORT DIVISION**

### **HOPSD OFFICE**

Received/Recorded communications .....	19,864
Released Communications.....	19,474
Signed/Reviewed reports/communications/checks/vouchers, etc.....	16,713
Filed/Indexed/retrieved records.....	868/75x
Prepared/typed communications.....	276/3,625
Sorted/distributed mails.....	275
Approved GSIS Loans.....	749
BUR/OBR Prepared/Typed.....	4,635

### **CENTRAL COMMUNICATION UNIT**

This Office is in-charge of the preparation, receiving, recording, routing, releasing, and follows-up of communications for the hospital. It is also in-charge of screening and approving request for posting of posters and information materials, use of conference rooms. It handles ISO/CCU documents and maintains files/mails management.

#### **1. ACCOMPLISHMENTS:**

##### **1.1. CCS**

Received/Recorded communications .....	8,598
Released Communications/MOA.....	1,039
Filed/Encoded/Scanned/Retrieved Records.....	4,410/191
Prepared/typed communications.....	365
Attended patient complaints and queries/CBB/DOH.....	285/24
Draft reply on complaints.....	58
Sorted/distributed mails.....	7,481

Posted/retrieved posters/streamers.....	270
Conferences arranged.....	339
Distributed Survey Form.....	42,064
Collected/Released accomplished survey form.....	41,694
Travel Authority Endorsement/Facilitated.....	142
Processed renewal of License and Permit to Construct of Dialysis Clinic.....	1/1

## **1.2. PUBLIC ASSISTANCE AND COMPLAINT DESK (PACD):**

Patient inquiries attended OPD/Main Lobby.....	26,832/33,859
Patients complaints attended OPD/Main Lobby.....	6/16
Attended PHIC Inquiries OPD/Main Lobby.....	2,861/1240

## **1.3. TELEPHONE OPERATOR**

Received/placed incoming/outgoing calls.....	156,390/29,467
Placed paging calls.....	29,702
Switchboard breakdown and unusual incidents reported/recorded.....	348
Installed local lines.....	7
Installed direct lines.....	6

## **1.4. DOCUMENT CONTROL OFFICE (DCO)**

Incoming ISO Documents recorded/filed.....	906
Controlled/Released/Issued ISO Documents .....	5,292

## **2. ANALYSIS:**

The following are inadequate for the services being rendered and needed in the day to day operation of the area and to replace worn out office equipment or additional equipment to cope with the demands of service or as requirements for ISO Accreditation.

Although there seemingly is not much problems encountered, meaning, whatever problem came us were manageable. The staff had been cooperative and supportive and has carried out its functions effectively and with commitment to serve.

- 2.1. Office space
- 2.2. Sound System
- 2.3. Laptop (for Audio System)
- 2.4. Upgrading telephone system due to increasing load of local lines and with the additional newly constructed buildings (Medical Arts and Central Block Buildings)

## **3. RECOMMENDATIONS:**

- 3.1. Provision of a more adequate office space
- 3.2. Provision of sound systems
- 3.3. Laptop for the Audio System
- 3.4. Upgrading of telephone system because of increasing load of local lines
- 3.5. Rehabilitation of billboard

## **FACILITIES MANAGEMENT DEPARTMENT**

### **A. MECHANICAL UNIT**

#### **1. Motorpool Unit**

- Administrative Trips conducted including medical missions – 2,424
- Ambulance trips conducted – 1,754
- Performed preventive maintenance on service and ambulance vehicles, semi-annually.
- Monthly Fuel Consumption Monitoring – used by vehicles and generator set
  - Diesoline – 9,151.93 litres amounting to Php 277,769.70 with total kilometre reading of 58,845 km
  - Gasoline – 1,412.09 litres amounting to Php 55,704.01 with total kilometre reading of 6,216 km

#### **2. Printing Unit**

- Printed out different hospital forms and documents for wards, offices – 7,143 reams and 241 bottles of ink.

#### **3. Mechanical Utilities and Equipment:**

- Performed inspection of delivery on mechanical utilities/equipment, refrigerator, and air-conditioning units – 75x
- Performed evaluation, repair, fabrication, repainting and preventive maintenance of mechanical utilities/equipment – 401x
- Evaluation of serviceability and disposition of mechanical equipment – 225x
- Performed preventive maintenance on mechanical facilities:
  - Generator set – monthly
  - Water pump – semi-annually
- Performed evaluation, repair and preventive maintenance on Refrigerator – 6x
- Performed evaluation, installation, repair and preventive maintenance on air conditioning units: 1,318x
- Supervised outsourced evaluation, repair and preventive maintenance on mechanical equipment:
  - The Lift Company Philippines – 17x
  - Tricom Dynamics – 2x
  - Exclusive Traders Inc. – 3x
  - IFE Elevators – 7x
  - Jardine Schindler Elevator Corp. – 1x
  - Medical Gallery – 1x
  - Merijr Enterprises Incorporated – 3x
  - MAKO – 2x
  - Marco Inc – 3x
  - Philippine Duplicator – 11x

### **B. ELECTRICAL UNIT**

- Performed preventive maintenance on lightings and emergency lights – annually
- Repaired electrical fixtures and facilities including telephone and rewired/ repaired electrical power lines – 2,144x

- Evaluated of serviceability and disposition of emergency lights
- Monitored Electric Consumption:  
JRRMMC – 4,581,060 kWh amounting to Php 36,424,698.26  
GGSH – 200,160 kWh amounting to Php 2,038,059.94
- Completed in-house projects: 26
  1. Rewiring/rerouting of telephone local line at CAO – January 11, 2017
  2. Provision of power supply for air conditioning unit at FMW – January 13, 2017
  3. Restoration of power supply at General & Geriatric Health Services (GGHS) – January 16, 2017
  4. Restoration of power supply at General & Geriatric Health Services (GGHS) – February 1, 2017
  5. Installation of telephone wire for telephone extension at Finance office – March 2017
  6. Provision of power supply and LAN Cable for the BDO ATM Machine at DOH Botika – March 2017
  7. Installation of Power Supply of emergency lights at MMD– April 20, 2017 & June 2, 2017
  8. Installation of Power Supply of emergency lights at Cashier/Collecting – May 2017
  9. Installation of Power Supply of IDF Panel on the following area: Social Service (Main Building), Social Service (OPD Building), Collecting Office, SICU, MICU, Pathology Department, 2nd Floor CBB, DOH Botika, MAB – June 20, 2017
  10. Installation of Telephone line @ OPD Help Desk – June 20, 2017
  11. Installation of power supply of Processor Machine and Exhaust Fan @ Cobalt Radiotherapy Building – June 28, 2017
  12. Installation of Telephone line @ New Pulmonary Office (local 317) – June 30, 2017
  13. Installation of Power supply of Processor and Exhaust fan at Cobalt Radiotherapy (C.R.) – June 30, 2017
  14. Installation of Telephone line @ New Statistics Office (local 213) – July 4, 2017
  15. Installation of exhaust fan at Radiotherapy Chemotherapy Treatment & Medicine Preparation Room – July 7, 2017
  16. Installation of local line at ENT Center – July 13, 2017
  17. Installation of power supply of Refrigerated Centrifuge at Blood bank – August 18, 2017
  18. Installation of telephone line at Medical Arts Building – September 2017
  19. Installation of local line to Eye Center (local 264) – October 5, 2017
  20. Installation of local line at Alliance office (local 284)– October 9, 2017
  21. Installation of direct telephone line at COA office – October 23, 2017
  22. Installation of telephone at Neuro ward CBB (local 379) – October 26, 2017
  23. Evaluate/check, for the supply of aircon at EENT ward – November 9, 2017
  24. Provision of power supply, provide power supply of ACU at DOH Botika – November 22, 2017
  25. Transfer of tel loc. 243, transfer local telephone line from Main Building to CBB (Pharmacy)– November 27, 2017
  26. Installation of telephone line, install direct line at MMD – November 27, 2017
- On-going electrical works:
  1. Installation of telephone line at CBB 5F

### **C. BIOMED UNIT:**

- Performed in-house repair and calibration of biomedical equipment – 684x
- Performed evaluation and repair of biomedical equipment – 559x
- Performed inspection of delivery on biomedical equipment – 242x
- Evaluation of serviceability and disposition of biomedical equipment including disposable materials – 541x
- Supervised outsourced evaluation, repair, calibration and preventive maintenance of various medical equipment.
  - Alcon Laboratories Inc. – 1x
  - AECI – 1x
  - Altech Vialab Inc – 2x
  - Assurance Controls Technologies Co, Inc – 1x
  - Blue Sky Trading Co., Inc – 3x
  - Drake Marketing & Equipment Corp – 15x
  - Fernando Medical Enterprises Inc- 41x
  - Filrad Corporation – 3x
  - Fujifilm Philippines – 7x
  - Global Medical Solutions – 1x
  - Himex – 1x
  - Impexcoc – 4x
  - ITS Science Phils – 1x
  - Jordal Medical System – 5x
  - Maystar – 3x
  - Medilight Incorporated – 5x
  - Medilines – 7x
  - Medical Gallery Trading Co. – 5x
  - Medmaster Inc – 4x
  - Microbiological Lab Inc – 3x
  - MRL Cybertec Corp – 1x
  - MTC – 1x
  - NPK Medical Trading, Inc – 18x
  - Omnibus Biomedical system – 2x
  - RBGM Medical Express – 7x
  - Respicare Enterprises – 18x
  - RG Meditron – 13x
  - Savior Medevices Inc – 15x
  - Scitec International – 11x
  - Shimadzu Philippines – 5x
  - Top Ophthalmic Products & Services – 9x
  - Variance Trading Corporation – 14x
  - Waller International – 1x
  - AMI Equipment & services

### **D. PHYSICAL PLANT UNIT**

#### **1. Plumbing**

- Performed preventive maintenance on Plumbing – Annually
- Performed plumbing works (declogging and repair) – 1,783x
- Performed plumbing works (declogging and repair) at GGHS – 24x
- Monitored water consumption:

JRRMMC – 251,037 cu.m amounting to Php 28,872,348.42  
GGHS – 5,698 cu.m amounting to 635,372.25

## **2. Carpentry and Masonry**

- Performed carpentry works (repair of cabinets, etc.) concreting/tiling works, repairing – 2,078x
- Performed inspection/preventive maintenance of fire extinguishers – quarterly

## **3. In-House Projects**

- Completion of various in-house projects:
- Completion of various in-house Projects: 32x
  1. Repainting of Main Lobby Hallway to X-ray Radiology Department – completed on January 20, 2017
  2. Repair/Repainting at JRRMMC-Employees Association Office – January 23, 2017
  3. Repair/Repainting works at X-ray Radiology Department – January 25, 2017
  4. Boring at ledge & put PVC pipe for down sprout at Main Lab – May 29, 2017
  5. Repair toilet bowl at OPD CR Female Room – May 30, 2017
  6. Replacement of Ceiling Board at Dept. of Rehabilitation Medicine – June 27, 2017
  7. Enclosure of Grossing Area and repair/repainting of adjacent areas including transfer of FL/ Exhaust/ Re-tiling of top and bottom of Counter Sink/ Refurbishing of stainless sinks/ Repair of plumbing fixtures at Dept. of Pathology & Laboratories– June 30, 2017
  8. Repair/Renovation of Ultrasound Room
  9. Repair/Renovation of Public CR MMW
  10. Repainting of telephone operator
  11. Provision of sin & repair of slower room @ OB ward II
  12. Repair/Renovation of Chapel
  13. Upgrading of driveway and infront of main entrance
  14. Provision of counter sink @ OPD-PCU
  15. Provision of divider @ OPD-Ophtha Canteen
  16. Provision of divider @ OPD-Ophtha Canteen
  17. Renovation/Provision of enclosure @ grossing area @ Dept. of Patho & Laboratory
  18. Tiling works @ waiting area OPD
  19. Repair/Renovation of Room 3 Doctor's Dorm
  20. Renovation of downspout & water proofing of concrete gutter @ Ob ward
  21. Repainting of ceiling & wall & provision of distilled water supply pipe @ temporary CSSD
  22. Repair of flooring between MSW & Ortho ward
  23. Replacement/Repair of flooring (tiling works) at PICU
  24. Repainting/Repair works at ESC hallway including adjacent rooms
  25. Repainting of hallway at Ground floor hallway including exterior of Welfare
  26. Repair/Rehabilitation of Chapel
  27. Enclosure for provision of accordion door at Pulmonology Unit
  28. Rerouting/Provision of additional supply pipe for CSSD
  29. Rerouting of downspout & repair of leaks between Ortho ward and OB-Gyne ward
  30. Repair/Rehabilitation of linen/waste chute of Main OR
  31. Provision and repair of recyclable materials/transfer house
  32. Provision of enclosure with double panel door @ ESC (temporary Minor OR)

- On-going in-house Projects:
  1. Repair/Renovation of 2<sup>nd</sup> floor and 3<sup>rd</sup> floor at Geriatric and General Health Services (GGHS)
  2. Repainting/Repair works at Pediatric Department
  3. Enclosure/frames for provision of accordion door at Behavioral Medicine Dept. OPD
  4. Repair/Rehabilitation of office table of Legal Office
  5. Repair/Rehabilitation of table of Neurology Ward

#### **4. Infrastructures**

- Preparation of plans/layouts, cost estimate, scope of works, term of reference and PR/PPMP for various infrastructure project.
- Attended different bidding procedures
- Technical Working Group (TWG) of various infrastructure projects
- Evaluation, Inspection and Supervision of Completed various Infrastructure Projects:
  1. Conversion/Renovation of Existing office to Legal & Statistics office - Completed on January 21, 2017
  2. Conversion of Stock Room to Pulmonary Laboratory & renovation of hallway - Completed on April 19, 2017
  3. Supply, Delivery and installation for the electrical works of the renovation of x-ray room - Completed on May 22, 2017
  4. Design and build of powerhouse Phase I - Completed on May 29, 2017
  5. Development of MRI Room - Completed on June 16, 2017
  6. Provision of CBB window grills and technician ledge - Completed on July 15, 2017
  7. Conversion of OPD Comfort Room to Wound Care Unit - Completed on July 26, 2017
  8. Design and build of proposed Powerhouse Phase II - 100% - waiting for the testing results
  9. Re-piping of LPG Pipeline & Provision of two (2) 600kg bullet tank - 100% Completed
  10. Development of Dialysis Clinic - Completed on November 22, 2017
- Supervision of various on-going Infrastructure Projects:
  1. Construction of Two-Storey Warehouse
  2. Repair/Renovation of JRRMMC 2nd Floor and 3rd Floor Wards and Other Areas
  3. Rehabilitation of Elevator Shaft, Machine room and Entrances
  4. Development of ESC, CSR and other areas including drainage and grounds
  5. Provision of OPD Lift
  6. Repair/Renovation of Main OR and adjacent areas
- Others:
  - Membership to the different committees
  - Submitted DENR Self- Monitoring Report – Quarterly
  - Monitor water potability – monthly/quarterly

### **Problems Encountered:**

- Insufficient manpower in the Biomedical and Mechanical
- Availability of materials for the repair and repainting of various equipment and projects
- Voluminous Service Request
- No proper scheduling of in-house projects due to non-coordination of end-user and without approved letter.
- Defective one (1) unit copy printer at FMD-Printing Unit.

### **Recommendations:**

- Additional Manpower to augment the workload specifically biomedical and mechanical.
- Material planning and monitoring.
- Proper scheduling of projects based on priority with approved letter.
- Process repair for the copy printer.

## **HOUSEKEEPING SECTION**

### **Accomplishments:**

#### 1. Internal cleanliness and sanitation maintained:

1.1. Clinical Areas.....	4,923/6,000
1.2. Comfort Rooms.....	2,711/3,312
1.3. Offices.....	3,514/4,416
1.4. Dormitories.....	730/730
1.5. General Cleanings.....	475/1,250

#### 2. Garbage collected:

2.1. General Wastes.....	339,604 kgs.
2.1.1. Black.....	169,203 kgs.
2.1.2. Green.....	170,401 kgs.
2.2. Infectious Wastes.....	215,085 kgs.

3. Assisted in the transport of patients to and from the different clinical areas – more than 108,025 patients were transported
4. More than 151,000 full and empty oxygen tanks used by the patients were properly transported to and from.
5. More or less 2,000 ornamental plants were taken care of.
6. Monitored and coordinated with contractual workers in their assignments:
  - 6.1. Ultimate Janitorial Services remained as the contractual service for the year with sixty (60) janitors reporting per day.
  - 6.2. Maintenance of cleanliness of hallways, stairs, public CR's, comfort rooms of all wards, including OPD Complex, window glasses, Dermatology, Radiotherapy, gutters and jalousies.
  - 6.3. Collection and disposal of garbage including cleaning of garbage areas and garbage house.
  - 6.4. Picked up and transported oxygen tanks to and from wards.

7. Accommodated the following employees:
  - 7.1.1. Male Dormitory - 94 occupants
  - 7.1.2. Female Dormitory - 150 occupants

#### **Problems:**

1. Despite information/dissemination made regarding Waste Segregation Program (Hospital Waste Management), some employees and patients still does not observed and followed the proper use of garbage color coding.
2. A number of patients, visitors, watchers in the wards hampered the cleanliness and sanitation in the hospital.
3. No proper place for housekeeping tools/utility room, thus resulting to losses and scattered tools.
4. Currently no outsourced assigned for general cleaning, we only pulling out janitors from other area to accommodate the needs.
5. No janitor duty during night shift the reason why some CR in other areas cannot be cleaned.
6. Due to insufficient outsourced janitorial staff, could not accommodate on-time all the request of wards and MMD for the needs of empty tank before they can purchase another request.
7. No passageway for the garbage collection for immediate collection.
8. Not all areas have Oxygen Tank carrier and others are defective.
9. Lack of equipment/tools like grass cutter and shovel
10. Lack of seminars/trainings

#### **Recommendations:**

1. To prevent the disposal on non-infectious waste in the yellow trash bin be placed in the nurse station to strictly monitor the proper disposal.
2. To replace the trash bin much bigger to maximize the use of large plastic bags.
3. To provide storage or specific area for up-keeping purposes for the tools and supplies issued to the duty helpers in every wards.
4. Provision of additional outsourced staff with night shift duties to ensure and maintain the cleanliness and sanitation.
5. To transfer the garbage house for easy access in the collection of garbage.
6. Recommending areas concerned to include the oxygen carrier in their PPMP.
7. Provision of tools like grass cutter and shovels.
8. Provision of seminars/lectures, activities to upgrade Housekeeping Staff in relation with their nature of work.

### **LINEN AND LAUNDRY SECTION**

#### **Highlights of Accomplishment:**

1. Raw materials purchased:

Total Purchased - 222 yards Thai Silk Mint Green  
 Total Amount Purchased - P 16,410.00

125 yards made into 40 pcs CBB Curtains



## **HEALTH INFORMATION MANAGEMENT DEPARTMENT (HIMD-MRS)**

### **Highlights of Accomplishment:**

- Prepared/issued MC/ML, SSS/GSIS and other insurance claims for in-patient and ER/OPD patients -8,201
- Certificate of Confinement released to patients/relatives while still admitted - 942
- Birth Certificate registered – 3,005
- Late registration of Birth Certificates processed - 11
- Death Certificate prepared/released – 2,290
- ER and OPD Charts maintained/filed for easy retrieval – 103,068
- Patient charts processed (This served as one of the vital source of data collated and needed by the Statistics Unit for the preparation of reports)– 21,798
- Help in improving healthcare delivery by giving assistance to medical doctors for research to be used in Accreditation, mortality report, case presentation, etc. – 7,207
- Provided ICD-10 to Charts which is needed in processing of PHIC claims (OPD, in-patients, Oncology, Cobalt and ER patients) – 8,655
- Court summons attended – 326
- Public queries assisted and answered – 5,536
- Provided orientation to new entrants (Resident Doctors) - 72
- Acquisition of equipment:
  - Document Imaging Scanner
  - Clerical tables
  - Clerical chairs
- Attended the following Trainings/Seminars:
  - Seminar/Workshop on ICD-10 – 3 staff
  - Managing Records with the Law in Mind
  - Training on Medical Certification of the Cause of Death (MCCOD)

### **Challenges:**

1. Untimely submission of birth and death certificates and ER Blotters.
2. Submission of incomplete in-patient records.
3. Insufficient Manpower resources
4. Insufficient filing shelves and storage room, due to continuous accumulation of inpatient charts, the Main Office is now overloaded with patient's records.

### **Plans/Proposals:**

1. Rehabilitation of the mezzanine of the main Medical Records Department/Old Gym (5<sup>th</sup> Floor)
2. ICD-10 / Health Information Management Trainings- MRS Staff.
3. Additional staff to accommodate increasing demands of workload and the newly acquired imaging scanner (to groom/scan records).
4. Provision for a new MRS and Filing Area, Patients' charts start to pile up on the floor due to insufficient storage area.
5. Continuous transfer of inactive files (2007-2010) to the old gym, 5<sup>th</sup> floor.

## **HIMD - CENTRAL ADMITTING DEPARTMENT**

### **Accomplishments:**

#### **a. Frontline Services**

1. Patients Admitted .....	21,988
2. Patient Discharged.....	22,030
3. Patients Registered (OPD/ER/In patient).....	263,439
4. Cadavers Released.....	2,625
5. Ambulance Conduction.....	2,055

#### **b. Reports and Compliance**

1. Communications for actions
2. Accomplishment and Target (DPCR and IPCR)

### **Problems Encountered:**

- Insufficient number of staff
- Inadequate office equipment

### **Recommendations/Action Taken:**

- Additional staff to address the growing number of patients 24/7
- Provision of additional Printer for back-up.

## **HIMD-STATISTICS UNIT**

### **Highlights of Accomplishments:**

1. Reports collated from different departments:
  - ESC – 3,285 monthly reports
  - OPD – 12 monthly reports
  - Wards – 13870 monthly reports;
  - Main and Minor OR – 24 monthly census
  - Customer Satisfaction Survey Forms – 41,519
2. Reports prepared and submitted:
  - Mandatory Monthly Hospital Report (PHIC) – 12 reports
  - Budget Execution Documents 2 (BED 2)
  - Budget Accountability Report (BAR 1) – 4 Reports
  - Monthly Mortality Report – 12 reports
  - Monthly Customers Satisfaction Survey – 12 reports
3. Verified Census of In-patients, Out-patients, and ER patients:
  - In-patient service days – 347,974
  - Admissions – 21,988
  - Discharge and Deaths- 22,030
  - Out Patient Department – 148,784

- Emergency Service Complex – 106,933
- Bed Occupancy Rate – 94.84%
- Hospital Infection Rate – 0.53%

4. Others:

- Issues summary of monthly census to different wards.
- Issues Customer Satisfaction Survey to different departments.
- Provide data to resident for their researches.
- Assist ward nurses in the computerized ward census report.

**Issues and Concerns:**

- To generate reports responsive with the requirement of Gender and Development.
- Inconsistent age disaggregation of various reports submitted by different department (e.g. OPD Census, OR Census, Inpatient Census)
- There is a need for some areas to submit/modify reports forwarded to Statistics Office.

**Recommendations/Action Plan:**

1. Coordinate with concerned areas to come up with harmonized templates responsive to different stakeholders.
2. Target date of implementation : First Quarter of 2018

**HUMAN RESOURCE MANAGEMENT AND DEVELOPMENT DEPARTMENT**

A. PERSONNEL TRANSACTION UNIT (Accretions and Separations)

Applicants/application processed.....	1,398
Regret letters prepared/mailed.....	44
Reference inquiries prepared/mailed.....	223
Advertisement/Publication of Vacancies.....	33
Applicants referred for Psychometric/P.E/ Pre-employment/Practical Exam.....	1,288
Selection Board meeting arranged/person deliberated.....	30 meetings/ 570 applicants
Applicants given papers and requirements for appointment.....	259
Filled (as of Dec. 31, 2017).....	1,605
Unfilled (as of Dec. 31, 2017).....	460
Appointments prepared.....	920
Plantilla Positions.....	641
Others (Contract of Service) .....	196
Non-Salaried/Foreign Observer.....	59
Visiting/Honorary/Professional Lecturer.....	24
Induction/Assumption papers prepared.....	641
Routing Slip for promotion and renewal typed/prepared.....	172
Supporting papers for first/promotional payment.....	813
Reports prepared/issued.....	40

Liaison works performed (CSC, DOH, PRC, DBM, etc.)...IN...	214
OUT....	1,777
ARA-Summary of changes (GSIS).....	721
Notice of expiration of temporary appointments: 1 <sup>st</sup> notice.....	197
2 <sup>nd</sup> notice.....	25
3 <sup>rd</sup> notice.....	18
Separation papers prepared/processed .....	33
<b>B. EMPLOYEE BENEFITS AND DISCIPLINE</b>	
Orientation of newly appointed employees conducted/session.....	103
Leave applications processed.....	3,506
Medical /Para-medical.....	850
Nursing/Nursing Attendant.....	918
HOPSD.....	1,512
Finance.....	226
Supporting papers for last payment.....	158
Communications/Memos/Notices/Change of Name/ Special Order/Formal Charge/reports prepared/issued.....	283
Performance Appraisal recorded/compiled.....	1,176
Sworn Statement of Assets and Liabilities.....	1,570
Salary adjustment due to compulsory retirement.....	12
Certified-true-copy of supporting documents.....	3,004
GSIS/Philhealth application for membership of newly appointed.....	219
Hospital Order prepared.....	936
Service Records/Certificate of Employment prepared.....	1,005
DTR's generated and processed .....	14,684
Permit to leave, failure to time in/out encoded.....	14,021
Finger scan enrollment done.....	105
Monthly attendance reviewed/recorded .....	1,796
Transaction and Service ID cards done.....	916
<b>C. PERSONNEL RECORDS/STATISTICS</b>	
Statistical reports of personnel complement prepared/typed.....	17
Data for report system encode.....	20
Incoming papers received/recorded.....	25,540
Outgoing papers recorded/released.....	5,457
Communications, Memos, Reports disseminated.....	5,988
Reports of unapplied leaves prepared.....	200
Reports of appointment issued (RAI).....	550
Reports on newly and promoted employees for all discipline to DOH & CSC.....	361
Formal Charge/Special Order/drafted/finalized.....	5
<b>D. PAYROLLING</b>	
Payroll checked.....	554 sets/4,664 pages
Payroll prepared.....	554 sets/4,664 pages
Medical /Para-medical/l.....	71 sets/384 pp.
MS PT/FT, DOH Deployed, Contractual, Malacanang..	73 sets/688 pp.
Para-Medical.....	67 sets/631 pp.
Nursing/Nursing Attendant.....	99 sets/1,495 pp.
HOPSD/Finance.....	101/1,281 pp.
Various (HC/VC/PL/Contractual/BAC).....	71 sets / 93 pp.

Vouchers prepared (salaries/benefits).....	1,287
Cash advances prepared/computed.....	504
Medicare honorarium (Med. Spec.computed/recomputed).....	16
Distribution cards updated/adjusted.....	14,450

#### E. TRAINING

Trainings conducted.....	16
Orientation (Contract of Service/OJT).....	20/12
Certification (Staff/OJT).....	328/11

### **MATERIALS MANAGEMENT DEPARTMENT AND INSPECTION AND ACCEPTANCE UNIT**

#### **Accomplishments:**

Total number of goods delivered (quantity per line item).....	5,186,451
Total number of accurate goods received in conformity with P.O./ Contract.....	4,968,045
Total number of goods cancelled due to non-availability of stocks/ lapsed of delivery period.....	188,774
Total number of goods rejected due to non-conformity with PO/Contract..	29,632
Total number of Purchase Request.....	10,776
Purchase order/deliveries received.....	12,799
Supplies & Materials .....	2,726
Drugs & Medicines .....	1,283
Equipment and Semi-expendable supplies.....	2,534
Reports submitted.....	312
Semi-Annual Physical Inventory Supplies and Materials.....	2
Inventory and Inspection Report of Unserviceable Property...1	
Reports of Rejected Deliveries Prepared .....	28
Inspection of Waste Materials.....	310
Inspected Goods.....	13,116
Drugs & Medicines .....	1480
Laboratory Supplies.....	1684
Medical Supplies .....	2010
Equipment.....	88
Office, Housekeeping, Engineering, Linen, Security.....	831
Foodstuffs.....	7023
Petty Cash (Engineering).....	1127
Petty Cash (Medical, Office, Foodstuffs, etc).....	2517
Donation.....	59
Pre-repair of equipment.....	107
Post-repair of equipment.....	40
Inspection report processed for voucher .....	2298
Property Cards Prepared/Updated.....	648
Communications prepared.....	278

#### **Problems encountered:**

- Non-availability of supplies for issuance to end-users
- Purchase Requests takes a long time to process

- Purchase Request of failed bids for three months for the recurring items (as indicated in the APP) requested does not suffice since it takes months of canvass.
- No available place for condemned equipment/properties of hospital.

#### **Recommendations:**

- Failed biddings of supplies and materials should be immediately rebid for one-year or be negotiated to a supplier/s of good standing.
- Before the request for quotation is given to Supplier, canvasser/s should see to it that the company has the necessary required documents to avoid waste of time and effort especially if the PO will just be cancelled.
- Attendance to seminar of staff to enhance capabilities.

### **NUTRITION AND DIETETICS MANAGEMENT DEPARTMENT**

The following are the services rendered:

#### **A. PROVISION FOR PATIENTS MEALS**

**NUMBER OF PATIENTS MEALS SERVED - 468,184**

**Regular - 264,228**

Pay	-	22,286
PHIC (Medicare)	-	50,551
Charity	-	191,394

**Therapeutic - 192,004**

Pay	-	15,924
PHIC (Medicare)	-	35,673
Charity	-	140,407

**Blenderized Feeding - 11,952**

#### **AVERAGE COST OF PATIENTS MEALS SERVED**

Pay	-	P 132.532
Therapeutics	-	92.59
Charity	-	78.029

**TOTAL EXPENSES OF MEALS SERVED - P 14,047,828.35**

#### **JRRMMC**

Regular meals for Patients	-	P 12,031,960.59
Blenderized Feeding Formula	-	1,575,167.49

#### **GGHS**

Regular meals for Patients	-	P 123,944.11
Blenderized Feeding Formula	-	16,179.32

Request from Different Departments - 300,576.84

**NUTRITION COUNSELLING OF PATIENTS - 14,300**

In-Patients - 1,986  
 Out-Patients - 362  
 Enteral Feeding - 11,952

**B. HEALTH REGULATION AND LICENSURE**

1. Nutrition and Dietetics Staff and Personnel certificate from Manila Health Department were applied and approved (44 personnel)
2. Sanitary permit for 2017 was renewed and approved on February 2017.
3. Professional Regulation Licenses of the Twelve (12) Nutritionist-Dietitians are updated.
4. Educational and Training – Enrolled in Masters Degree:
  - Masters in Public Administration – 2 RND
  - Masters in Nutrition and Dietetics – 1 RND
  - Masters in Public Health – 2 RND

**C. PARTICIPATION IN THE WELLNESS PROGRAMS and TRAININGS/SEMINARS**

TRAINING/SEMINARS/ CONFERENCE	DATES	PARTICIPANTS	OBJECTIVES
Updates in Nutrition and Dietetics		6 Nut.- Dietitian	Knowledge enhancement
Food Safety and Sanitation		1 Nut.- Dietitian	Knowledge Enhancement
Waitering nad Plating		1 Adm. Aide	Knowledge and skills enhancement
Culinary Training		2 Cook	Knowledge and skills enhancement
Leadership		1 ND 1 Cook	Knowledge and skills enhancement

WELLNESS PROGRAMS	DATES	PARTICIPANTS	OBJECTIVES
Nutritional Assessment among JRRMMC Employees	July 3, 10, 14, 2017	HOSPD, Nursing, Medical, Finance Para-Medical	
Hataw Dance Exercise-Zumba Dance	July 3, 14, 20, 28, 2017	JRRMMC Staff/ Employees	
Lecture on Obesity	July 5, 2017	OPD Patients	

Lecture on Nutrition Management of Diabetes	July 6, 2017 July 10, 2017	Ortho Ward Patients OPD Medicine	
Lecture on Cardiovascular Disease Nut. Management	July 14, 2017	OPD Medicine and Neuro	
Lecture on High-Protein and Calcium-rich foods	July 20, 2017	Orthopedic Patients	
Lecture on Children's Nutrition	July 17, 2017	Pediatric Ward Patients	
Lecture on Complementary Feeding	July 24, 2017	OPD Pedia's Parents	
Lecture on Renal Nutrition	July 25, 2017	OPD Medicine Patients	

- Nutritional Assessment for Employees – 596
  - BMI Classification based on WHO:
    - Normal - 285
    - Pre-Obese - 214
    - Obese I - 58
    - Obese II - 19
    - Obese III - 4
    - Underweight - 16
- Monthly Meeting every 3<sup>rd</sup> Friday of the month – 12X
- Awards and Incentives were given to the deserving NDMD Staff in the different categories:
  - Model Employee
    - Michael de Luna
  - Cook of the Year
    - Juanito Agravante
  - Adm. Aide of the Year
    - Noel Abaring
  - Most Cooperative
    - Pacita Pacia
    - Francisco Gorospe
  - Most Dependable
    - Michael Mangahas
    - Leonardo Caraig
  - Most Punctual
    - Allan Diokno

**Problems encountered:**

1. Limited food supply at the beginning of the year due to failure of bidding.
2. Insufficient supply of liquid soap for dishwashing purposes.
3. Difficulty in contacting dealers.

**Recommendations:**

1. To schedule bidding for foodstuffs 2 months (October) before year end to give ample time for some failure to be resolved.

2. Person concerned should be aware of re-ordering point
3. Provision of direct line.

## **PROCUREMENT MANAGEMENT DEPARTMENT**

### **Accomplishments:**

Total number of Purchase Request processed .....	10,546
Total number of Purchase Order prepared .....	2,771
Number of purchases made due to emergency situations.....	663
Total number of Disbursement Vouchers prepared.....	2,414

### **Problems encountered:**

1. Preparation of Purchase Requests (PRs) by different end-users, received by the department, which are below stock level.
2. Late start of Procurement Timeline due to late submission of PPMPs.
3. PO is high in volume due to some items have been requested more than four times in a year & some PO contained only one item. It also involve cancelled PO that underwent re-cavass.
4. Disbursement Vouchers is high in volume due to some items have been requested more than four times in a year & some PO contained only one item.

### **Recommendations:**

1. Imposition on the submission of Purchase Requests which will give ample time for the processing of its areas' requests
2. Strictly observe the three months consumption so that the item/s in the PPMP should only be requested four times in a year.

## **PMD-BAC SECRETARIAT**

### **Accomplishments:**

Public Bidding conducted .....	62
Approved Procurement Plan prepared.....	570
BAC Resolutions.....	2,711
Request for Quotations prepared.....	2,036
Submitted Quarterly Procurement Status Report.....	4
Submitted Procurement Monitoring Report.....	2

### **Problems encountered:**

- Voluminous Purchase Request received
- Failure of bidding due incorrect specifications and low ABC

### **Recommendations:**

- Strict observation of PPMP submitted

## **SECURITY UNIT**

The Security Force accomplished the following for 2017:

1. Properties, assets and resources were properly guarded and protected from theft, arson, pilferage, trespass, destruction or damage and other unlawful acts.
2. Maintain peace and order within the hospital premises.
3. Employees, patients, clientele, visitors, officials and guests were protected from assault, harassment, intimidation and other unlawful/criminal acts.
4. Implementation of policies, guidelines, and program in consonance with control of security/safety within JRRMMC premises.
5. Submitted on time Incident Reports - 79
6. Apprehensions:
  - 6.1. Theft – 4
  - 6.2. Swindler – 2
  - 6.3. Loitering – 3
7. Reported Violators of Hospital Rules and Regulations:
  - 7.1. Not wearing Employees' ID -3,030
  - 7.2. Over-staying of vehicles – 98
8. Trainings and Seminars Attended:
  - 8.1. Cardiopulmonary Resuscitation – January 19, 2017
  - 8.2. Gender Sensitivity Training – May 24, 2017
  - 8.3. Values Orientation Seminar – October 11, 2017
  - 8.4. ISO 9001-2015 Awareness Seminar – November 20, 2017
  - 8.5. Advance Training on Marksmanship – June 2 & October 4, 2017
9. Acquired Equipment:
  - 9.1. 1 CCTV monitor
  - 9.2. 1 DVR 16 Channel
  - 9.3. 16 CCTV cameras
  - 9.4. 1 UPS – uninterrupted power supply
10. Newly hired Security Personnel – 3 Staff

## **RECOMMENDATIONS**

### **1. INFRASTRUCTURE/FACILITIES**

- Renovation of CCTV ROOM
- Construction of two (2) SENTRY BOX (GUARD OUTPOST) main gate and employees back parking

- STRUCTURAL BARRIERS – (back of Dietary, female dormitory, Radio Therapy and Rizal Ave. fence) A top fence is recommended to the above-mentioned area , must have at least 4 feet high of concrete, cyclone or barbwire to prevent intruders
- PERIMETER AND PARKING LIGHTS –installation of additional perimeter and grounds light to increase the effectiveness of guards by increasing their visual range during the hour of darkness.
- PAGING SYSTEM – must be installed to the following areas:  
Parking area  
Back Offices (disbursing, housekeeping, budget engineering and morgue, CBB)Radiotherapy, MAB and OPD
- To provide additional DIRECTIONAL SIGNAGE'S at main building and parking area, reflectorized traffic signage's at parking area including parking rules and regulations.
- Parking bollards for the reservation of parking slot and restricted areas.
- Painting of parking slots to maximize space and for easy maneuvering of vehicle.
- Daily Print out of admitted patients name to be use by the guard for verification and screening purposes.

## **FINANCE DIVISION**

### **INTRODUCTION**

In line with the quality policy set by our institution, we in the Finance Division focused on the Major Factors that affects our performance for the year 2017. Here are some highlights that we consider that our division achieved for the year.

### **PATIENT CARE PERSPECTIVE**

#### **PHIC Utilization**

<b>UTILIZATION</b>				
<b>MONTH</b>	<b>PATIENT</b>	<b>NON-PHIC</b>	<b>PHIC</b>	<b>PHIC UTILIZATION</b>
January	1,718	209	1,509	88%
February	1,558	169	1,389	89%
March	1,647	155	1,492	91%
April	1,533	181	1,352	88%

May	1,613	221	1,392	86%
June	1,660	218	1,442	87%
July	1,828	304	1,524	83%
August	1,962	278	1,684	86%
September	2,047	222	1,825	89%
October	2,281	305	1,976	87%
November	1,981	261	1,720	87%
December	1,991	261	1,730	87%
<b>TOTAL</b>	<b>21,819</b>	<b>2,784</b>	<b>19,035</b>	<b>87.24%</b>

### Analysis:

With the marketing strategy and effort done by the different departments from the Medical, Nursing, HOPSD and Finance, this Medical Center PHIC utilization rate of 87.24%. Out of 21,819 discharged patients from January to December 2017, only 2,784 (12.76%) are Non-PHIC and 19,035 (87.24%) were PHIC patients.

### Billed Charges for In-Patients

BILLING				
MONTH	PHIC (Pay & Service) (Case Rate)	NON-PHIC FULL PAY	NON-PHIC SERVICE	TOTAL
January	26,193,251.46	661,139.58	1,787,888.48	28,642,279.52
February	27,484,869.00	435,010.14	1,385,304.41	29,305,183.55
March	29,788,857.05	466,572.97	1,273,325.28	31,528,755.30
April	25,832,506.00	1,121,320.24	2,120,030.76	29,073,857.00
May	26,805,790.00	741,258.29	2,715,446.45	30,262,494.74
June	26,067,406.00	670,379.66	2,236,091.53	28,973,877.19
July	26,571,250.00	364,295.29	4,015,221.50	30,950,766.79
August	27,837,791.18	805,612.27	2,885,921.80	31,529,325.25
September	29,738,320.00	306,338.95	4,032,603.33	34,077,262.28
October	31,682,103.40	554,044.30	3,044,288.80	35,280,436.50
November	27,218,048.00	300,410.10	3,528,408.21	31,046,866.31
December	29,744,660.00	903,118.65	3,369,587.21	34,017,365.86
<b>TOTAL</b>	<b>334,964,852.09</b>	<b>7,329,500.44</b>	<b>32,394,117.76</b>	<b>374,688,470.29</b>





OCTOBER	1,016	20,037,563.85	17,696,240.00	2,341,323.85	806	2,362,150.00	286	1,736,585.99
NOVEMBER	940	19,655,982.83	15,550,380.00	4,105,602.83	650	1,646,250.00	249	2,229,373.79
DECEMBER	948	20,353,040.83	17,580,800.00	2,772,240.83	634	1,811,000.00	237	2,121,518.43
<b>TOTAL</b>	<b>10,604</b>	<b>221,321,482.03</b>	<b>193,203,606.13</b>	<b>28,117,875.89</b>	<b>6,776</b>	<b>18,337,050.00</b>	<b>2,524</b>	<b>18,760,356.39</b>

### Analysis:

We considered patients with actual Charges more than the PHIC benefit package and 2,784 non PHIC patients' discounts, Medical Social Service classification and accommodation as quantified free service. For 19,035 PHIC patients, 10,604 patients or 55.71% were NBB and with other membership like SED, SEM, GM, GD, etc.

Of the total 21,819 discharged patients, there were still 11.57% or 2,524 Non-PHIC service patients because some were cancelled PHIC due to less than 24 hours confinement days, diagnosis is not compensable, with previous confinement of the same case, etc. and others with PHIC but refused to file and preferred to pay rather than comply with the requirements/proceed to their employers.

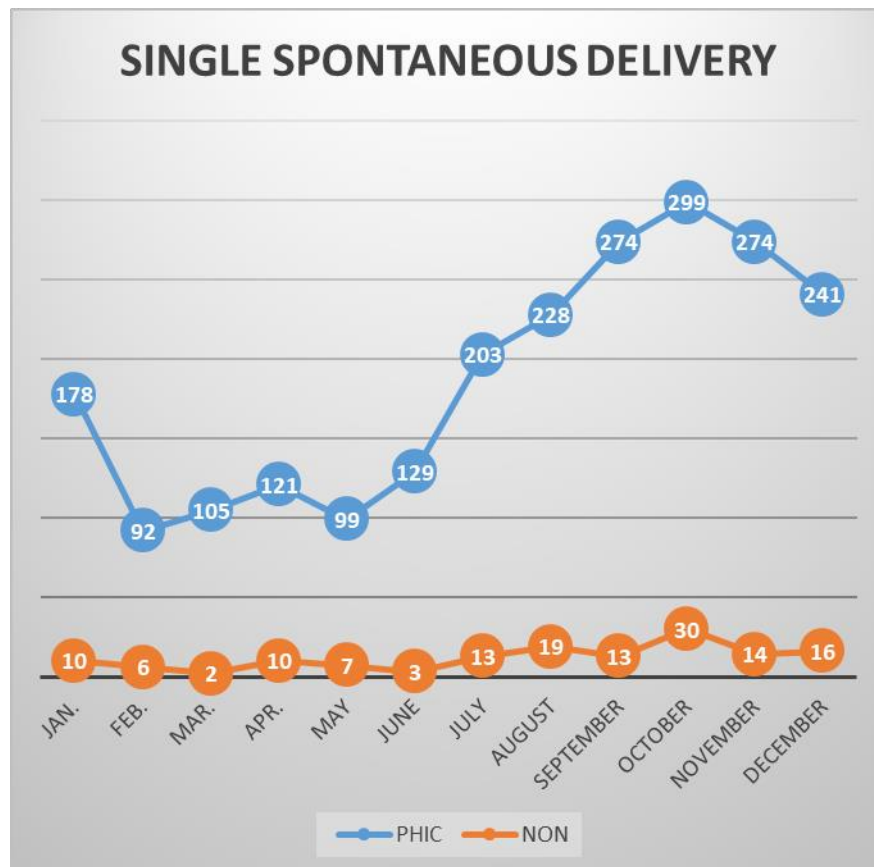
Whether Pay or Service patients, PHIC or Non-PHIC patients, the assistance given by Medical Assistance Fund Program and PCSO-ASAP helped a lot of patients the burden of paying their bills including Professional Fees. Progress Billing every other day and Notice of Transfer made them to work-out how to pay their bills thru assistance program of the government.

### Ten Leading Cases of Admission

TOP	CASES	PHIC	NON PHIC	TOTAL	UTILIZATION
1	SINGLE SPONTANEOUS DELIVERY	2,243	143	2,386	94%
2	CEREBRAL INFARCTION	681	107	788	86%
3	INTRACRANIAL HEMORRHAGE	619	145	764	81%
4	DISEASE OF APPENDIX	643	77	720	89%
5	MALIGNANT NEOPLASM OF CERVIX UTERI	484	121	605	80%
6	PNEUMONIA	472	92	564	84%
7	OTHER COMPLICATIONS FO PREGNANCY AND DELIVERY	334	52	386	87%
8	INTRACRANIAL INJURY	308	72	380	81%
9	OTHER IN SITU AND BENIGN NEOPLASMS AND NEOPLASMS OF UNCERTAIN AND UNKNOWN BEHAVIOR	322	31	353	91%
10	SPONTANEOUS ABORTION	272	48	320	85%
	<b>TOTAL</b>	<b>6,378</b>	<b>888</b>	<b>7,266</b>	<b>88%</b>

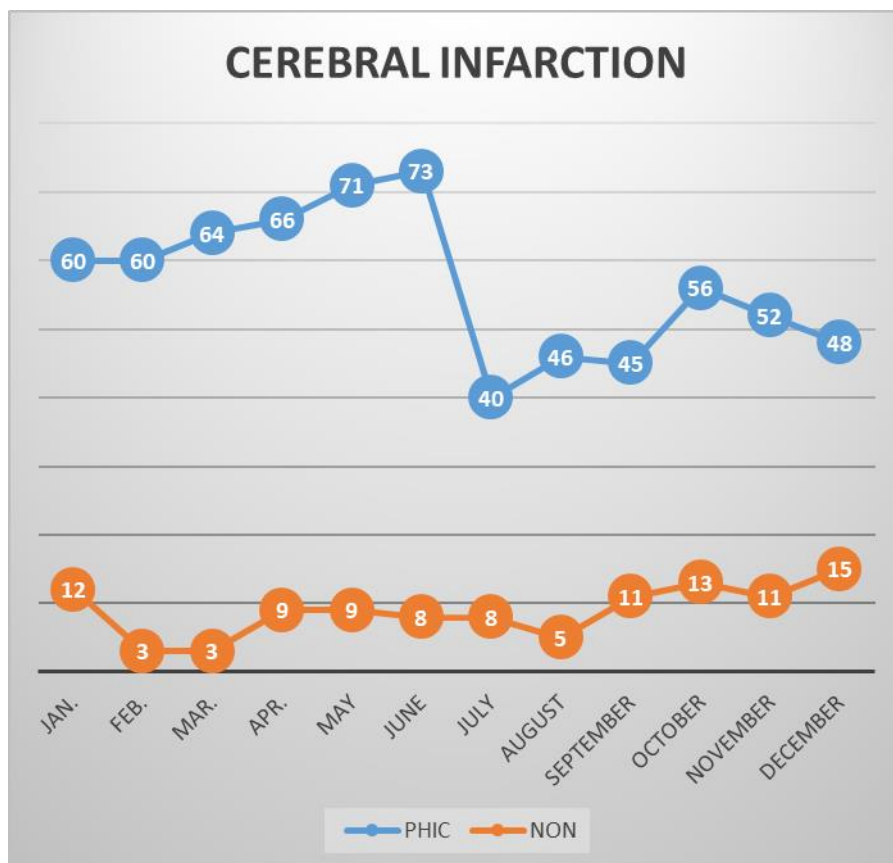
## I. NSD

MONTH	PHIC	NON-PHIC	TOTAL	UTILIZATION
JAN.	178	10	188	95%
FEB.	92	6	98	94%
MAR.	105	2	107	98%
APR.	121	10	131	92%
MAY	99	7	106	93%
JUNE	129	3	132	98%
JULY	203	13	216	94%
AUG.	228	19	247	92%
SEPT.	274	13	287	95%
OCT.	299	30	329	91%
NOV.	274	14	288	95%
DEC.	241	16	257	94%
<b>TOTAL</b>	<b>2,243</b>	<b>143</b>	<b>2,386</b>	<b>94%</b>



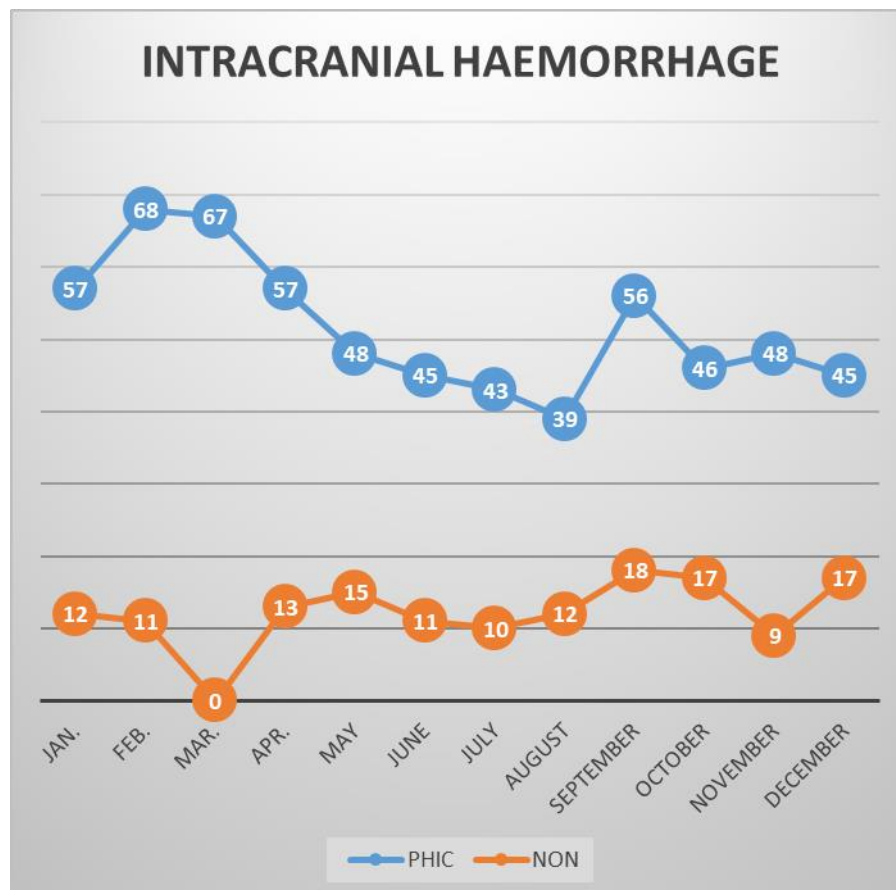
## II. Cerebral Infarction

MONTH	PHIC	NON-PHIC	TOTAL	UTILIZATION
JAN.	60	12	72	83%
FEB.	60	3	63	95%
MAR.	64	3	67	96%
APR.	66	9	75	88%
MAY	71	9	80	89%
JUNE	73	8	81	90%
JULY	40	8	48	83%
AUG.	46	5	51	90%
SEPT.	45	11	56	80%
OCT.	56	13	69	81%
NOV.	52	11	63	83%
DEC.	48	15	63	76%
<b>TOTAL</b>	<b>681</b>	<b>107</b>	<b>788</b>	<b>86%</b>



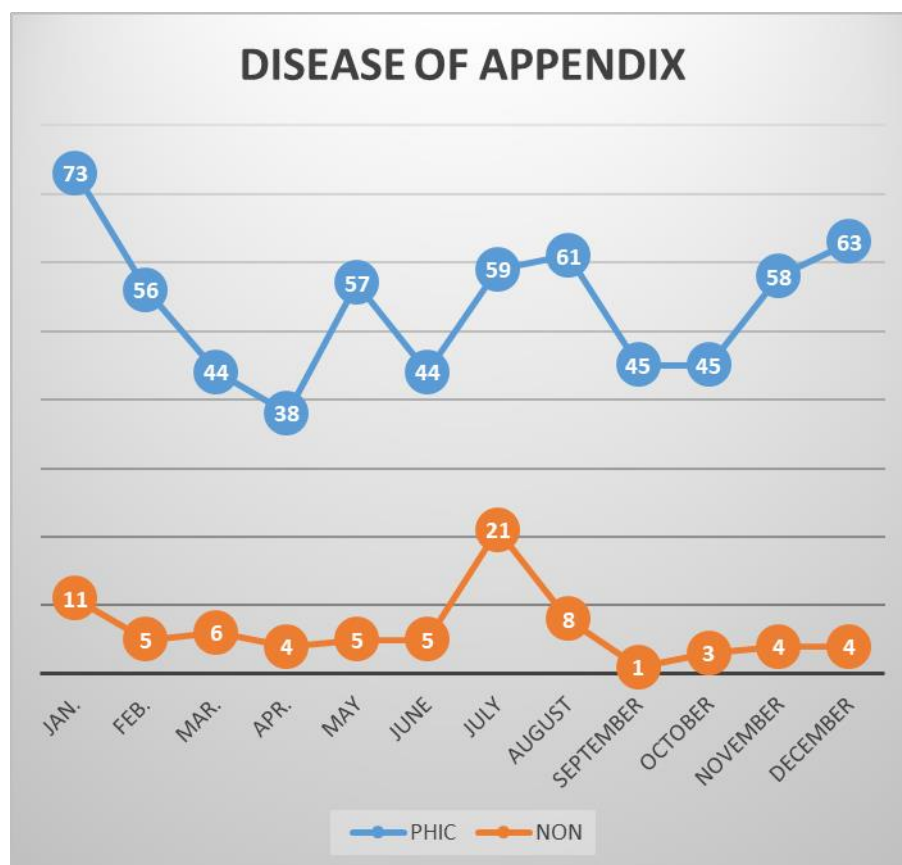
### III. Intracranial Haemorrhage

MONTH	PHIC	NON-PHIC	TOTAL	UTILIZATION
JAN.	57	12	69	83%
FEB.	68	11	79	86%
MAR.	67	0	67	100%
APR.	57	13	70	81%
MAY	48	15	63	76%
JUNE	45	11	56	80%
JULY	43	10	53	81%
AUG.	39	12	51	76%
SEPT.	56	18	74	76%
OCT.	46	17	63	73%
NOV.	48	9	57	84%
DEC.	45	17	62	73%
<b>TOTAL</b>	<b>619</b>	<b>145</b>	<b>764</b>	<b>81%</b>



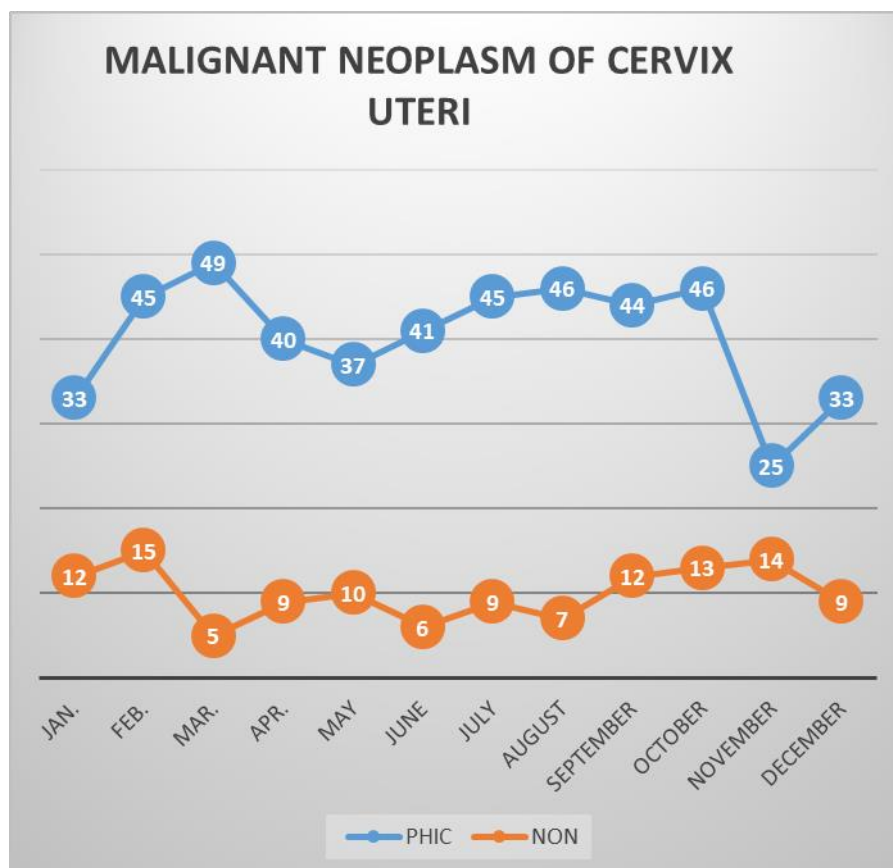
#### IV. Diseases of Appendix

MONTH	PHIC	NON-PHIC	TOTAL	UTILIZATION
JAN.	73	11	84	87%
FEB.	56	5	61	92%
MAR.	44	6	50	88%
APR.	38	4	42	90%
MAY	57	5	62	92%
JUNE	44	5	49	90%
JULY	59	21	80	74%
AUG.	61	8	69	88%
SEPT.	45	1	46	98%
OCT.	45	3	48	94%
NOV.	58	4	62	94%
DEC.	63	4	67	94%
<b>TOTAL</b>	<b>643</b>	<b>77</b>	<b>720</b>	<b>89%</b>



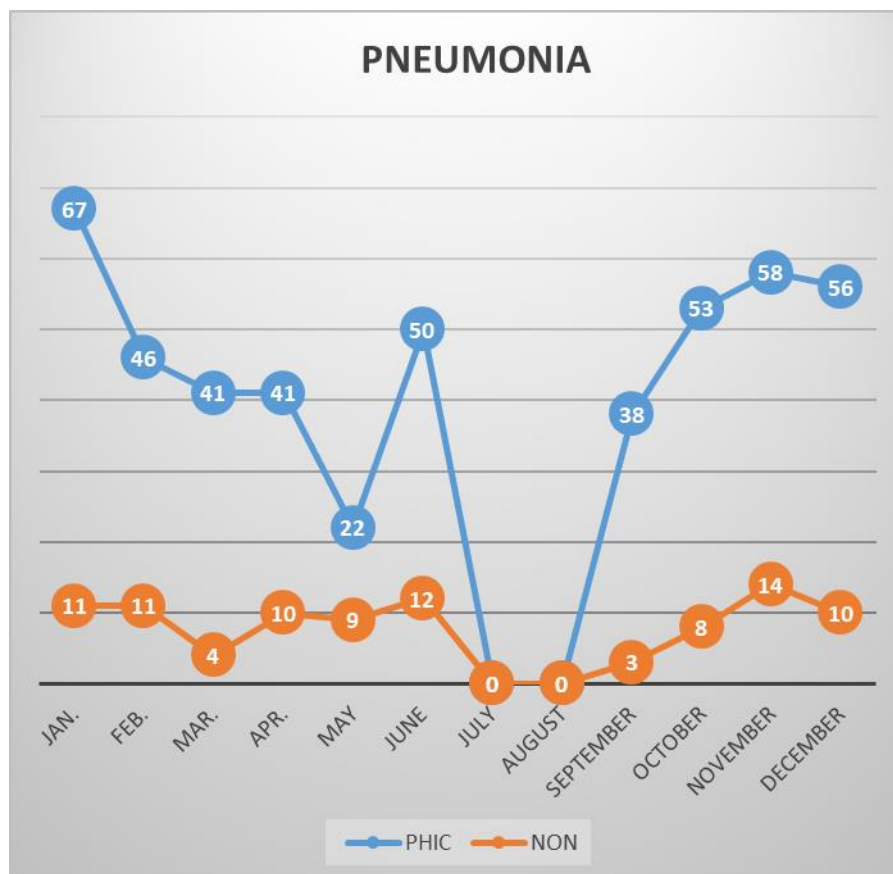
## V. Malignant Neoplasm of Cervix Uteri

MONTH	PHIC	NON-PHIC	TOTAL	UTILIZATION
JAN.	33	12	45	73%
FEB.	45	15	60	75%
MAR.	49	5	54	91%
APR.	40	9	49	82%
MAY	37	10	47	79%
JUNE	41	6	47	87%
JULY	45	9	54	83%
AUG.	46	7	53	87%
SEPT.	44	12	56	79%
OCT.	46	13	59	78%
NOV.	25	14	39	64%
DEC.	33	9	42	79%
<b>TOTAL</b>	<b>484</b>	<b>121</b>	<b>605</b>	<b>80%</b>



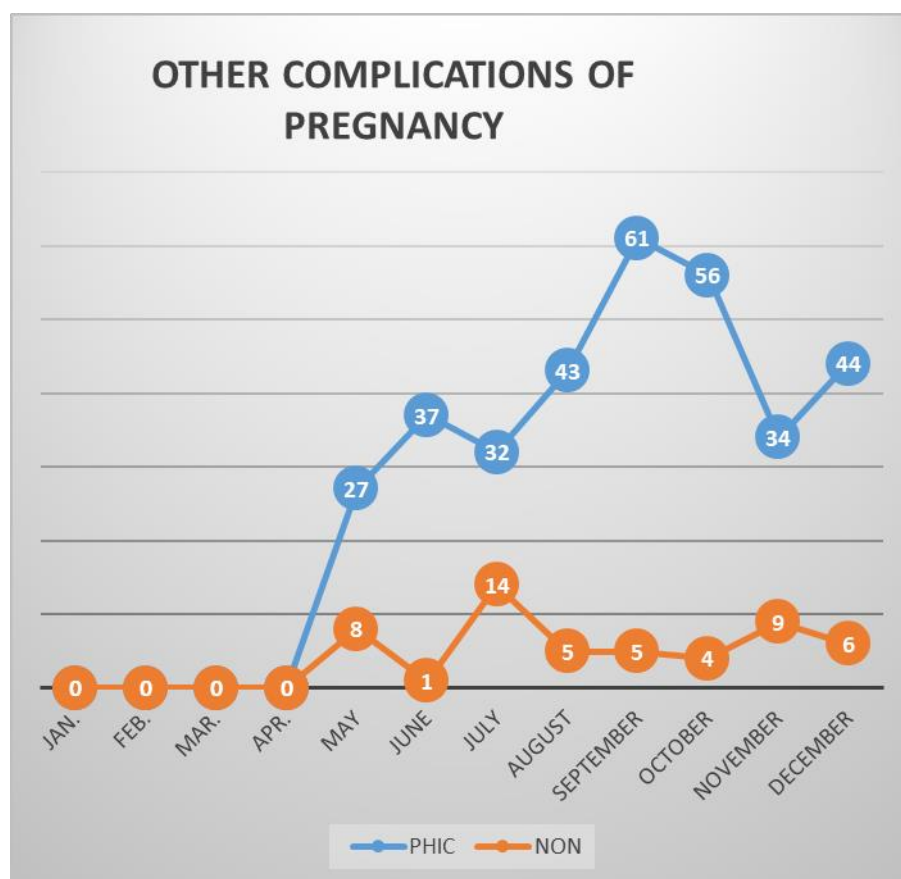
## VI. Pneumonia

MONTH	PHIC	NON-PHIC	TOTAL	UTILIZATION
JAN.	67	11	78	86%
FEB.	46	11	57	81%
MAR.	41	4	45	91%
APR.	41	10	51	80%
MAY	22	9	31	71%
JUNE	50	12	62	81%
JULY	0	0	0	0%
AUG.	0	0	0	0%
SEPT.	38	3	41	93%
OCT.	53	8	61	87%
NOV.	58	14	72	81%
DEC.	56	10	66	85%
<b>TOTAL</b>	<b>472</b>	<b>92</b>	<b>564</b>	<b>84%</b>



## VII. Other Complications of Pregnancy and Delivery

MONTH	PHIC	NON-PHIC	TOTAL	UTILIZATION
JAN.	0	0	0	0%
FEB.	0	0	0	0%
MAR.	0	0	0	0%
APR.	0	0	0	0%
MAY	27	8	35	77%
JUNE	37	1	38	97%
JULY	32	14	46	70%
AUG.	43	5	48	90%
SEP.	61	5	66	92%
OCT.	56	4	60	93%
NOV.	34	9	43	79%
DEC.	44	6	50	88%
<b>TOTAL</b>	<b>334</b>	<b>52</b>	<b>386</b>	<b>87%</b>



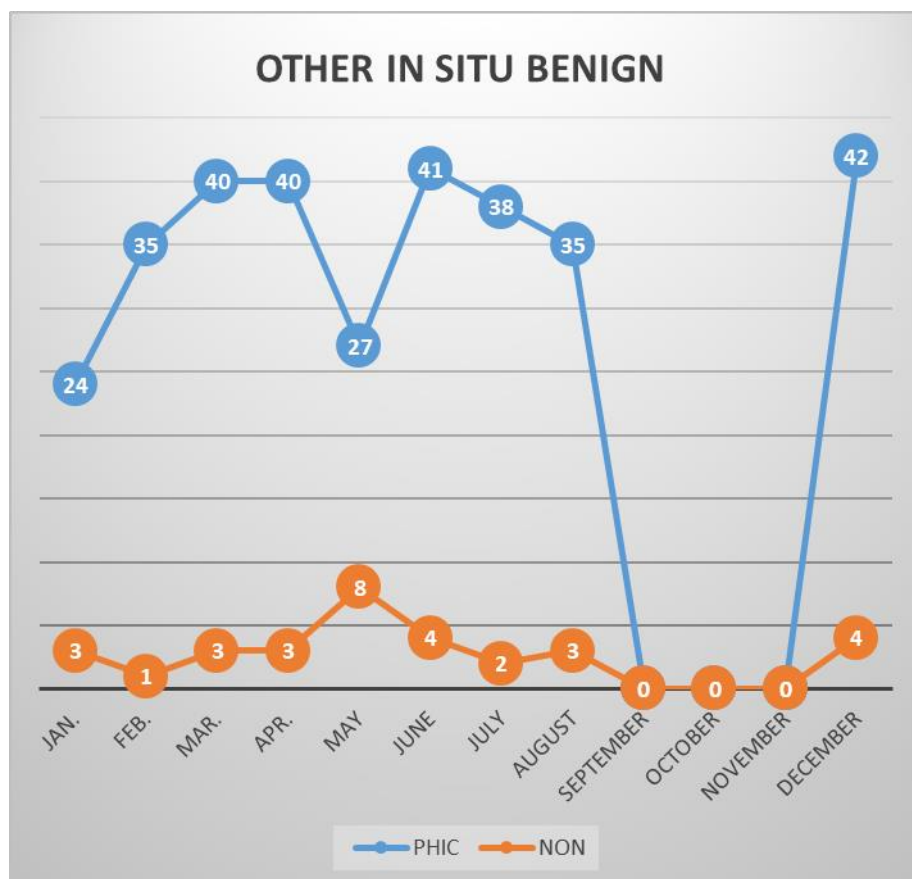
## VIII. Intracranial Injury

MONTH	PHIC	NON-PHIC	TOTAL	UTILIZATION
JAN.	51	11	62	82%
FEB.	0	0	0	0%
MAR.	0	0	0	0%
APR.	35	7	42	83%
MAY	34	3	37	92%
JUNE	31	9	40	78%
JULY	25	12	37	68%
AUG.	0	0	0	0%
SEPT.	37	6	43	86%
OCT.	29	7	36	81%
NOV.	37	10	47	79%
DEC.	29	7	36	81%
<b>TOTAL</b>	<b>308</b>	<b>72</b>	<b>380</b>	<b>81%</b>



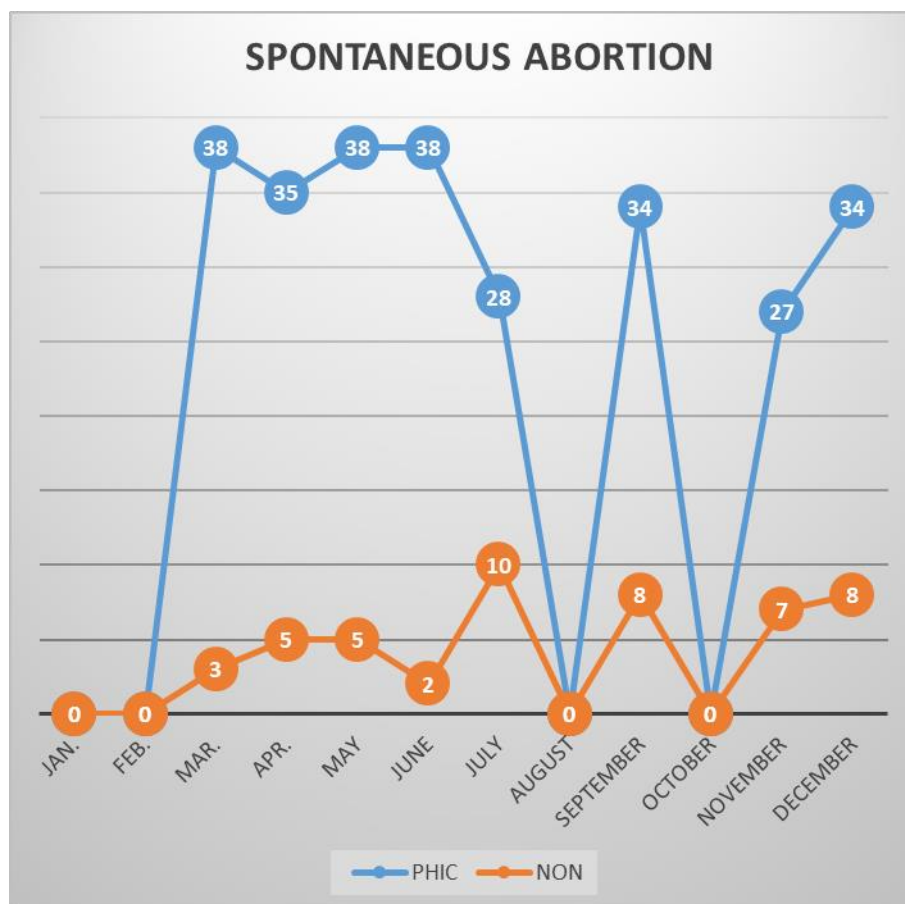
## IX. Other In Situ and Benign Neoplasm

MONTH	PHIC	NON-PHIC	TOTAL	UTILIZATION
JAN.	24	3	27	89%
FEB.	35	1	36	97%
MAR.	40	3	43	93%
APR.	40	3	43	93%
MAY	27	8	35	77%
JUNE	41	4	45	91%
JULY	38	2	40	95%
AUG.	35	3	38	92%
SEPT.	0	0	0	0%
OCT.	0	0	0	0%
NOV.	0	0	0	0%
DEC.	42	4	46	91%
<b>TOTAL</b>	<b>322</b>	<b>31</b>	<b>353</b>	<b>91%</b>



## X. Spontaneous Abortion

MONTH	PHIC	NON-PHIC	TOTAL	UTILIZATION
JAN.	0	0	0	0%
FEB.	0	0	0	0%
MAR.	38	3	41	93%
APR.	35	5	40	88%
MAY	38	5	43	88%
JUNE	38	2	40	95%
JULY	28	10	38	74%
AUG.	0	0	0	0%
SEP.	34	8	42	81%
OCT.	0	0	0	0%
NOV.	27	7	34	79%
DEC.	34	8	42	81%
<b>TOTAL</b>	<b>272</b>	<b>48</b>	<b>320</b>	<b>85%</b>









JUNE	90%	10%	86%	14%
JULY	89%	11%	86%	14%
AUGUST	91%	9%	88%	12%
SEPTEMBER	89%	11%	87%	13%
OCTOBER	91%	9%	89%	11%
NOVEMBER	90%	10%	88%	12%
DECEMBER	90%	10%	87%	13%

### Analysis:

JRRMMC was able to collect PhP 464,020,894.00 from PHIC, a more or less 95.01% of the total amount transmitted by BPC which is PhP 488,350,907.13. Although there were months with lesser collection but still we exceeded last year's collection which is PhP 408,934,991.60 by 6.32%. Some of the months with lesser collection was due to system adjustments. Starting January, 2018 PHIC will commence with their new mode of payment through Auto Credit, a new transition made by PHIC.

### Medical Assistance Program

Period	No. of Patients	Amount of Utilization	Average Release
JANUARY	3,216	10,346,729.76	3,217.27
FEBRUARY	2,219	10,359,613.57	4,668.60
MARCH	2,459	11,862,056.38	4,823.94
APRIL	3,354	11,921,993.98	3,554.56
MAY	3,065	13,525,294.37	4,412.82
JUNE	1,887	9,014,031.34	4,776.91
JULY	2,259	8,228,572.36	3,642.57
AUGUST	2,624	9,260,189.97	3,529.04
SEPTEMBER	1,777	6,319,250.82	3,556.13
OCTOBER	1,571	5,316,271.36	3,384.00
NOVEMBER	1,092	3,705,461.28	3,393.28
DECEMBER	1,664	4,155,839.83	2,497.50
<b>TOTAL</b>	<b>27,187</b>	<b>104,015,305.02</b>	<b>3,825.92</b>



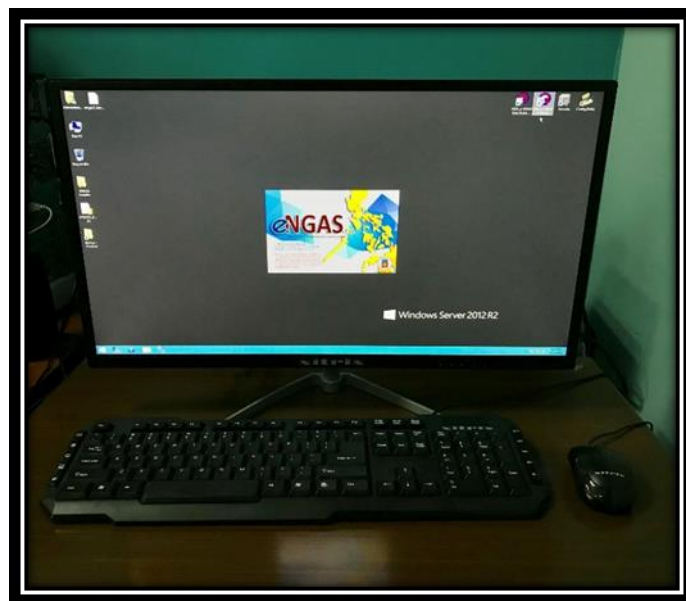


## INNOVATIONS AND BEST PRACTICES

### ISO 9001:2008 1<sup>st</sup> Surveillance



### Upgraded Accounting System from eNGAS version 1.2.1 to 2.0 GAM Compliant







## HUMAN RESOURCE PERSPECTIVE

### Manpower

Positions	Total No. of Positions	Total No. of Filled-up Positions	Total No. of Unfilled Positions
Financial & Management Officer II	1	1	0
Supervising Administrative Officer	2	2	0
Accountant IV	1	1	0
Accountant III	1	0	1
Administrative Officer V	2	2	0
Administrative Officer IV	4	3	1
Administrative Officer III	1	1	0
Administrative Officer II	8	7	1
Administrative Officer II (GGHS)	1	0	1
Administrative Officer I	13	10	3
Administrative Officer I (GGHS)	1	0	1
Administrative Assistant III	20	16	4
Administrative Assistant II	17	2	15
Administrative Assistant II (GGHS)	2	0	2
Administrative Assistant II (DOH Botika)	6	0	6
Administrative Assistant I	1	0	1
Administrative Aide VI (1 CTI)	7	6	1
Administrative Aide IV	18	15	3
Administrative Aide III	7	1	6
Administrative Aide I	16	16	0
ECE Technician III	1	1	0
Security Guard III	1	1	0
Security Guard I	1	1	0
<b>TOTAL</b>	<b>132</b>	<b>86</b>	<b>46</b>

### Trainings and Seminars

Training Program	Participants	Dates Conducted	Expenses
Orientation on Tax Treatment	80 contractual	January 26, 2017	540.00
Strategic Planning and Catch Up Plan	29 staff/employees	March 2-3, 2017	105,400.00
Computer Literacy/Skills	12 staff/employees	March 14-24, 2017	60.00
5's Principles (in-house)	71 staff/employees	March 22,23,28 & Nov. 24, 2017	-
Customer Extra Mile Approach	24 staff/employees	April 20, 2017	240.00

AGAP Annual Convention	3 staff/employees	May 24-27, 2017	56,000.00
ISO Awareness 9001:2008	3 staff/employees	May 31, 2017	1,950.00
General Assembly/Team Building and Orientation	71 staff/employees	June 23, 2017	17,040.00
Cash Management and Control System	5 staff/employees	July 12-14, 2017	30,000.00
Laws and Rules in Government Expenditures	7 staff/employees	July 26-28, 2017	42,000.00
Orientation on the Implementation of Point of Service	13 staff/employees	July 31, 2017	-
Learning and Development Course of CSC	1 staff/employees	October 12, 2017	9,000.00
Orientation of newly appointed employees	15 staff/ employees	October 30, 2017	-
ISO Awareness Seminar 9001:2015	78 staff/employees	November 20 & 27, 2017	50,700.00
Values Orientation Workshop	56 staff/employees	December 5-6, 2017	11,200.00
Improved Analytical and Critical Thinking	32 staff/employees	December 20, 2017	11,200.00
Basic Life Support Seminar	15 staff/employees	December 17, 2017	-
Training on HR by CSC	2 staff/employees	May & Nov. 2017	12,000.00
<b>TOTAL BUDGET FOR THE SEMINAR</b>			<b>347,330.00</b>

### FACILITIES AND EQUIPMENT

EQUIPMENT	BPC	TC	FPOC	TOTAL NO. OF UNITS	ESTIMATED COST	TOTAL AMOUNT	PR No.	STATUS
Amplifier		1		1	2,000.00	2,000.00	2017-12-10515	Included in the cancelled PR, hold in the BAC-Sec
Computer, desktop, with complete accessories	3	5	3	11	50,000.00	550,000.00	2017-10-7379	Under post qualification
Microphone, sturdy		1		1	1,400.00	1,400.00	2017-10-8461	Procured
Microphone stand small		1		1	1,000.00	1,000.00	2017-08-7380	Supplier is out of stock
Multicopier	1			1	80,000.00	80,000.00	2017-10-7379	Under post qualification
Printer, dot matrix, 9-pin	3	5		8	8,799.00	70,392.00	2017-10-8461	Delivered at PMD
Printer, dot matrix, 24-pin		1	1	2	39,465.00	78,930.00	2017-10-7379	Under post qualification
Printer, laserjet	2			2	7,500.00	15,000.00	2017-10-8461	Delivered at PMD

Printer, ink tank with scanner		1		1	8,695.00	8,695.00	2017-10-8461	Procured
Money detector, heavy duty		6		6	950.00	5,700.00	2017-10-8512	For delivery of supplier
Speaker, 500 watts, 2 box		1		1	5,000.00	5,000.00	2017-12-10515	Included in the cancelled PR, hold in the BAC-Sec
Television, LED backlight, 40" with wall mount bracket	2			2	70,000.00	140,000.00	2017-10-9040	For award
Typewriter, electronic, heavy duty		1		1	32,000.00	32,000.00	2017-10-7379	Delivered at PMD
<b>SUB-TOTAL</b>						<b>990,117.00</b>		

<b>FURNITURE AND FIXTURES</b>	<b>BPC</b>	<b>TC</b>	<b>FPOC</b>	<b>TOTAL NO. OF UNITS</b>	<b>ESTIMATED COST</b>	<b>TOTAL AMOUNT</b>	<b>PR No.</b>	<b>STATUS</b>
Cabinet, filing, steel, 3 doors			1	1	9,000.00	9,000.00	2017-06-5643	Procured
Cabinet, filing, steel, 4-drawer horizontal, actual dimensions: 1320 (H) x 900 (W) x 450mm (D), color: gray, high quality cold-rolled steel plate, with key lock (2 keys per lock), anti-tilt mechanism, full extension 3-section ball bearing rails, with file hangers, knock-down structure, epoxy powder coating, material thickness: 0.6mm			3	3	13,995.00	41,985.00	2017-06-5643	Delivered at PMD
Chair, clerical (with back rest and arms)			5	5	2,500.00	12,500.00	2017-06-5643	Procured
Chair, executive high back, mesh, leather black, pneumatic gas lift lever for instant height and tilt adjustment, 360 degrees, swivel	4			4	6,800.00	27,200.00	2017-06-8358	For fax to the supplier

rotation, chrome legs								
Chair, guest	2			2	1,500.00	3,000.00	2017-09-5643	Delivered at PMD
Chair, office, high		4		4	3,600.00	14,400.00	2017-09-5643	Procured
<b><i>SUB-TOTAL</i></b>						<b><i>108,085.00</i></b>		
<b>GRAND TOTAL</b>						<b>1,098,202.00</b>		

## ISSUES AND CONCERNS

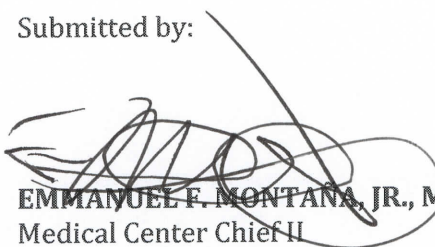
### Business Processing Cluster:

BILLING TIME	<ul style="list-style-type: none"> <li>Forward charts with complete diagnosis, ICD code, Professional Fee as early as 9:00 am to give ample time for patients' relatives to seek financial resources</li> </ul>
PROFESSIONAL FEE	<ul style="list-style-type: none"> <li>Despite of the memo issued, Consultants failed to issue PF that causes delay to patients discharge, additional room accommodation, delays issuance of Death Cert., and reason for complaints to include Billing Department</li> <li>Patient's transfer from Pay to Charity delayed or cannot be pursued for non-payment of Professional Fee</li> <li>Takes time for Resident in-Charge to fill-up the PF slip.</li> <li>No PF posted until 5:30pm</li> <li>Incomplete posting of PF</li> </ul>
ISSUANCE OF STATEMENT OF ACCOUNT	<ul style="list-style-type: none"> <li>Not tagged as MGH in Bizbox</li> <li>No MGH order in pt. chart</li> <li>Incomplete data, No RVS and ICD code, Non-compensable diagnosis</li> <li>Encoding from one system to another delays processing of bills and causes error in encoding</li> </ul>
BIZBOX HOSPITAL INFORMATION SYSTEM	<ul style="list-style-type: none"> <li>Frequent malfunction that causes delay in the processing of bill</li> <li>Slow response of the system</li> </ul>
PROGRESS BILLING	<ul style="list-style-type: none"> <li>No relative around during issuance</li> <li>No payment despite of notices</li> <li>Patients benefits consumed (PHIC/Sr. Citizen, Guarantee Letter, Govt. Employee, etc.) with hosp. bill more than P20,000.00</li> <li>Cannot transfer without payment done/PN not allowed</li> <li>Intervention of Consultants in settling PF</li> <li>Patient/relatives rely on the grant of PCSO/Med. Asst., esp. w/ political connection</li> <li>Transfer takes weeks</li> <li>Refusal of the patient/relative to receive Notice of Transfer</li> </ul>

### **Financial Planning and Operations Cluster:**

- Late submission of Inventory Reports of Welfare Pharmacy and DOH Botika.
- In case that the PMD will keep a copy of DV, copy of DVs and the attachments should still be on file.
- Some items in the Summary of Inventory and Inspections Report of Unserviceable Property are not supported with Property Acknowledgement Receipt/ Inventory Custodian Slip.
- Late reporting/ submission of Report of Purchased Equipment/ Semi-Expendables.
- Late submission of reports: RSMI, Deliveries and Donations. Must be weekly.
- Items in RSMI must indicate if they are procured from PCF or donated.
- Items in some of the RIS don't have stock codes (supplies)/ ICS codes (semi-expendables)
- Late submission of Inventory Reports from different Departments.
- Suggest separation of report of PCF/ Emergency and Mercury in Pharmacy Reports.
- Late submission of payrolls. (CIP: Nursing Attendant)
- Late submission of Monthly Consumption Report (CIP: GGHS)
- Procedure done in Laboratory and Radiology is not encoded in the Bizbox System.
- Affiliate schools of other departments were not billed accordingly. Direct payment were made thru the Cashier which resulted to Negative Balance.

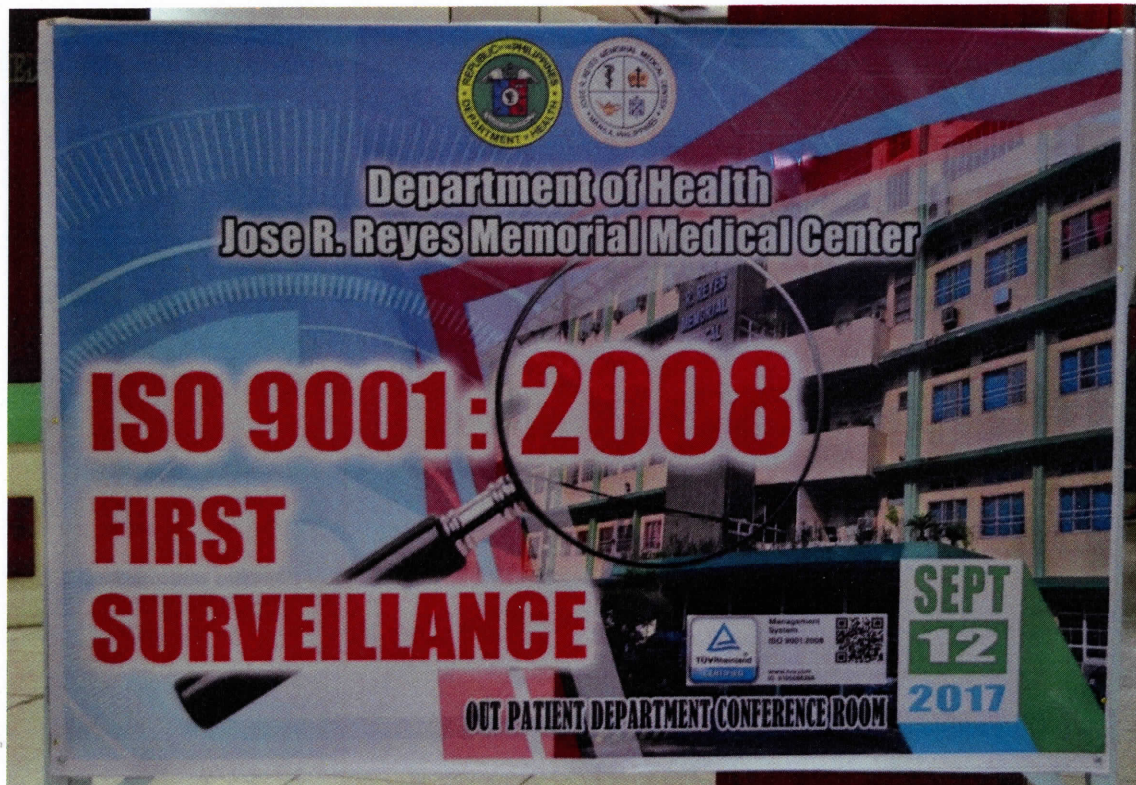
Submitted by:



**EMMANUEL F. MONTANA, JR., M.D.**  
Medical Center Chief II

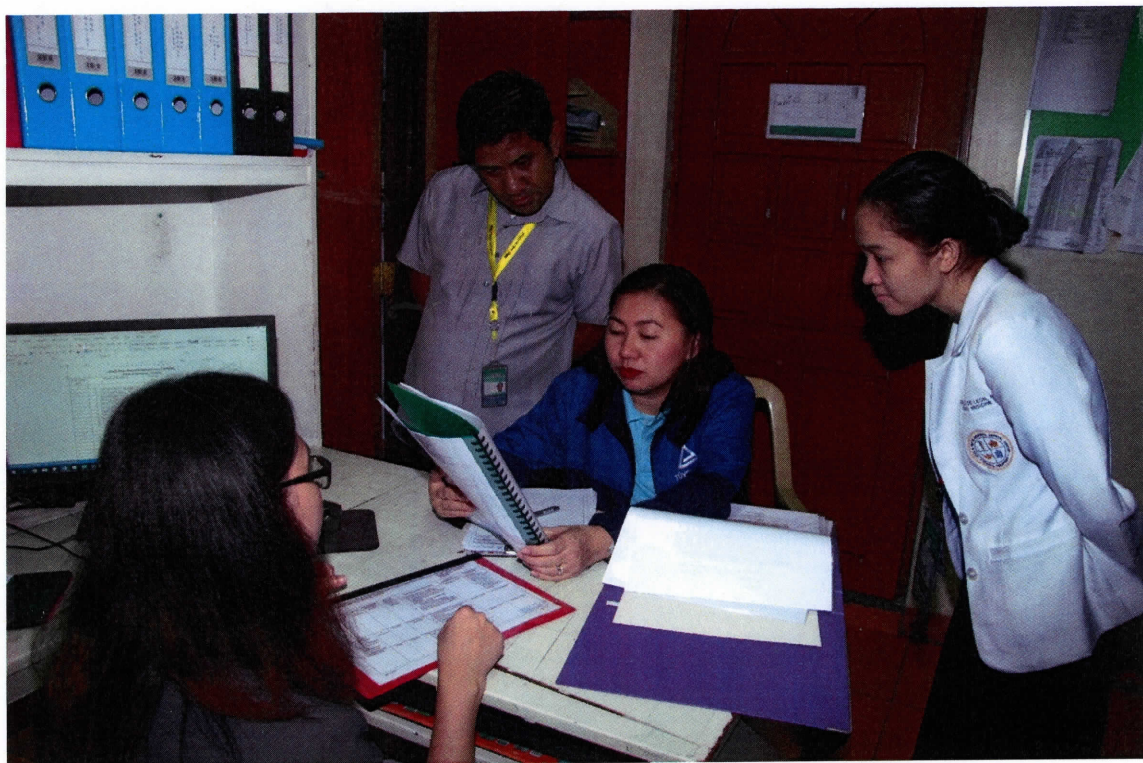
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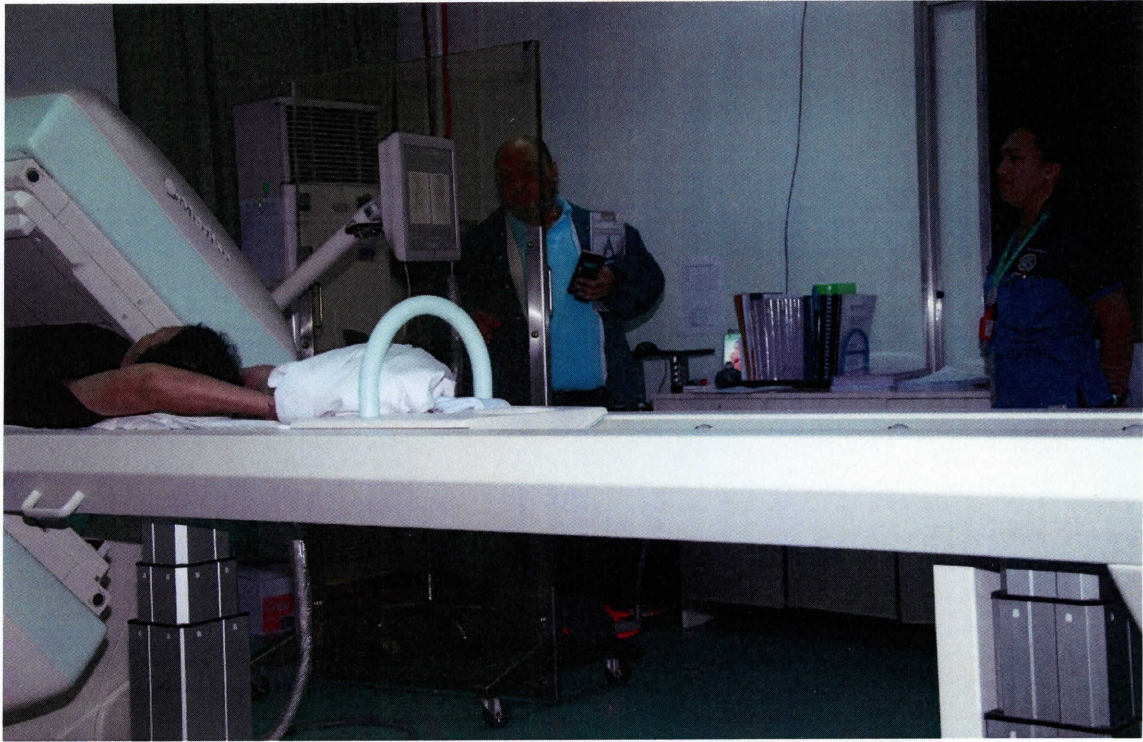
**ISO 9001:2015 FIRST SURVEILLANCE VISIT (SEPTEMBER 12, 2017)**



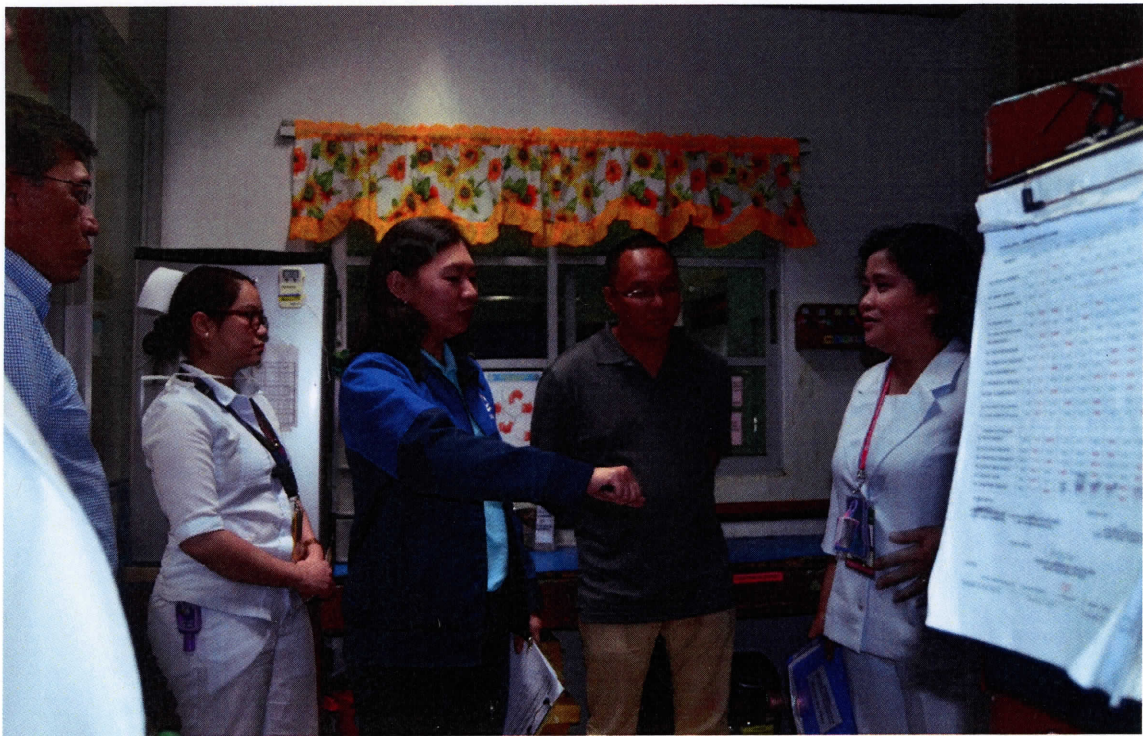




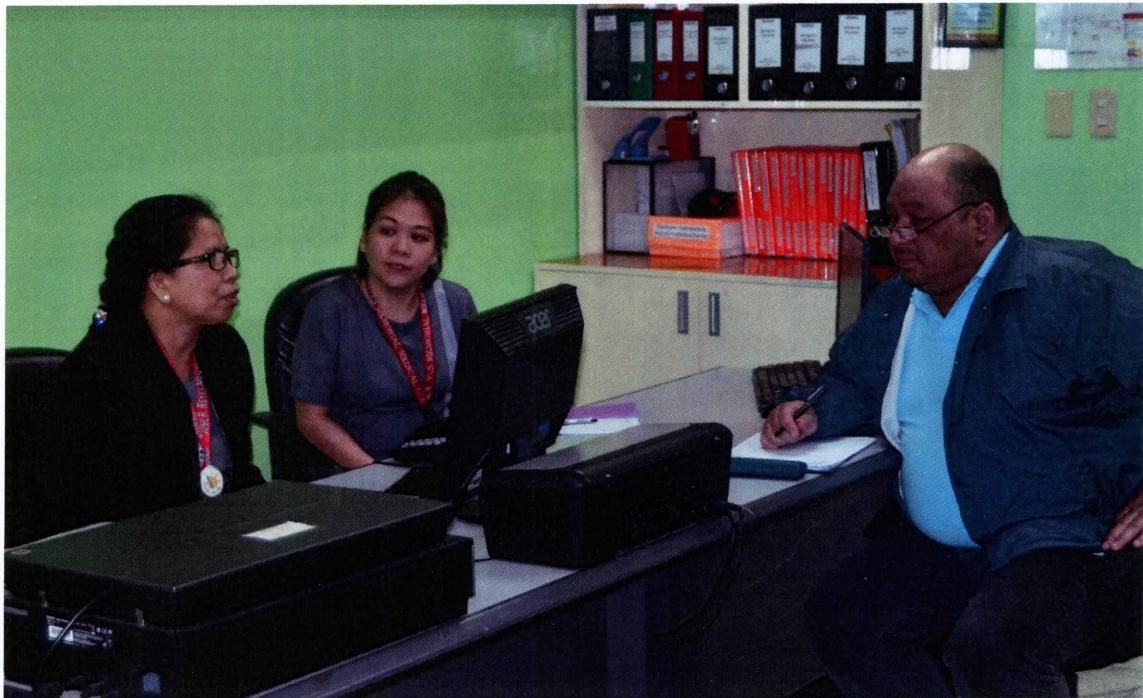


















**CONGRATULATIONS!**  
**ONCE AGAIN!**

 **JOSE R. REYES MEMORIAL MEDICAL CENTER**

for successfully hurdling the  
**1st SURVEILLANCE VISIT**  
(ISO 9001:2008)

 Management System  
ISO 9001:2008  
www.tuv.com  
ID 9105086268

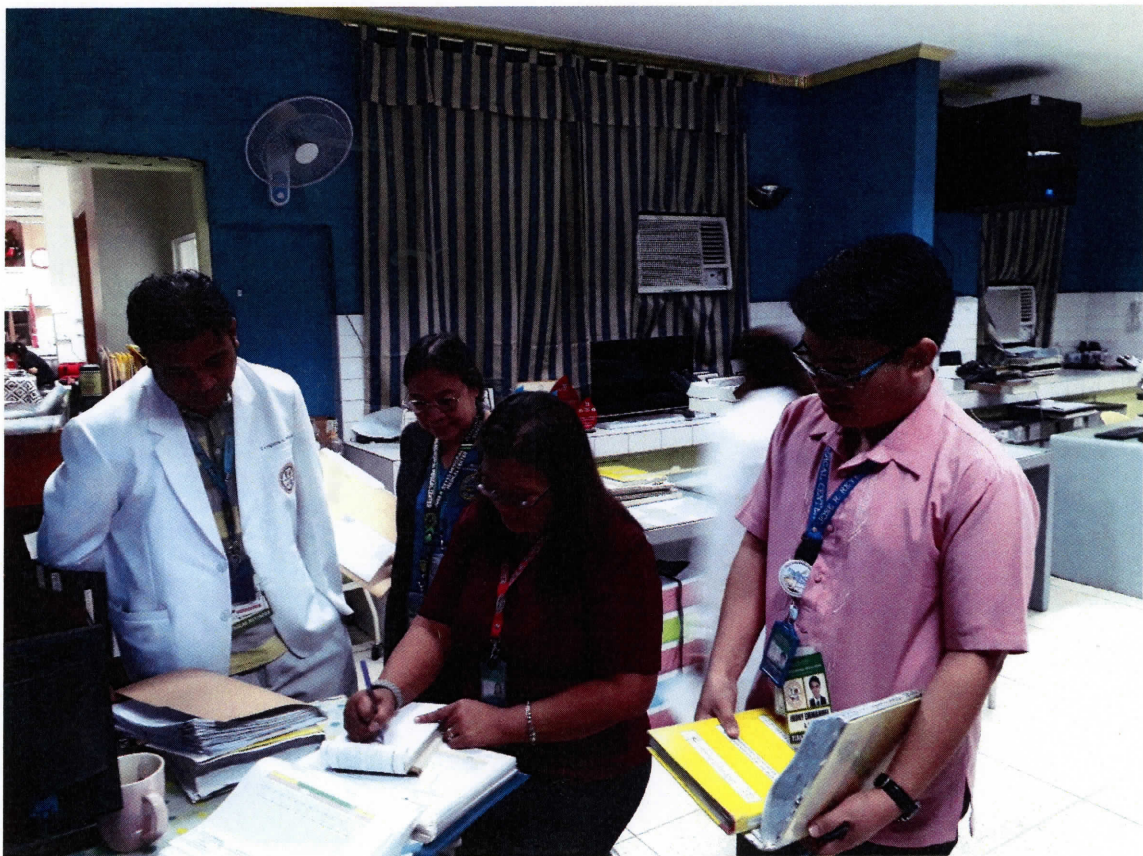




## INTERNAL QUALITY AUDIT (NOVEMBER 6-10, 2017)

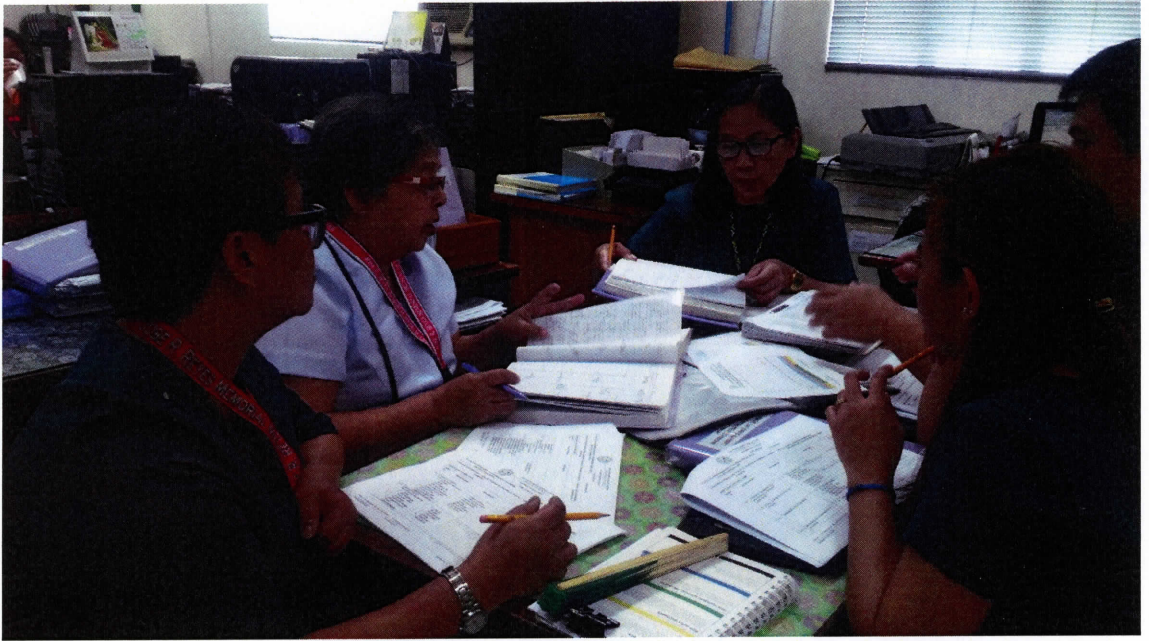
### Opening Meeting (November 6, 2017)











**ISO 9001:2015 AWARENESS SEMINAR (NOVEMBER 20 & 27, 2018)**









## COMPLETED INFRASTRUCTURE PROJECTS

Project: **Conversion/Renovation of Existing office to Legal & Statistics**

Date Completed: January 21, 2017



## COMPLETED INFRASTRUCTURE PROJECTS

Project: **Conversion of Stock room to Pulmonary Laboratory and Renovation of hallway**

Date Completed: April 19, 2017



## COMPLETED INFRASTRUCTURE PROJECTS

Project: **Design and build of Powerhouse phase I**

Date Completed: May 29, 2017



## COMPLETED INFRASTRUCTURE PROJECTS

Project: **Development of MRI Room**

Date Completed: June 16, 2017



## COMPLETED INFRASTRUCTURE PROJECTS

Project: **Provision of CBB window grills and technician ledge**

Date Completed: July 15, 2017



## COMPLETED INFRASTRUCTURE PROJECTS

Project: **Conversion of OPD Comfort Room to Wound Care Unit**

Date Completed: July 26, 2017



## COMPLETED INFRASTRUCTURE PROJECTS

Project: **Design and build of proposed Powerhouse Phase II**

Date Completed: December 29, 2017



## COMPLETED INFRASTRUCTURE PROJECTS

Project: **Development of Dialysis Clinic**

Date Completed: November 10, 2017



## COMPLETED INFRASTRUCTURE PROJECTS

Project: **Re-piping of LPG Pipeline & Provision of two (2) 600kg bullet tank**



## ON-GOING INFRASTRUCTURE PROJECTS

Project: Construction of Two-Storey Warehouse



## ON-GOING INFRASTRUCTURE PROJECTS

Project: **Provision of OPD Lift**



## ON-GOING INFRASTRUCTURE PROJECTS

Project: **Repair/Renovation of JRRMMC 2<sup>nd</sup> Floor and 3<sup>rd</sup> Floor Wards and Other Areas**



## ON-GOING INFRASTRUCTURE PROJECTS

Project: **Rehabilitation of Elevator Shaft, Machine room and Entrances**



## ON-GOING INFRASTRUCTURE PROJECTS

Project: **Development of ESC, CSR and other areas including drainage and grounds**



## ON-GOING INFRASTRUCTURE PROJECTS

Project: **Repair/Renovation of Main OR and adjacent areas**

