

Leveling up Southern Philippines Medical Center

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The Southern Philippines Medical Center (SPMC) is the tertiary hospital in Davao City that is fast becoming a world-class, service-oriented medical center, leading in the provision of health care and training in Mindanao.

For a century now, SPMC underwent several processes of reinvention in order to meet the changing needs of the public we serve. Between the years 1917 and 1920, Davao Hospital started operations

in a temporary wooden pavilion originally built by the Bureau of Public Works for its sick laborers. The temporary hospital had basic equipment and a small laboratory. The government of the Philippine Islands allocated budget for the salaries of one resident physician, one superintendent and property clerk, three nurses, four ward attendants, one cook, one assistant cook, and five laborers—a total of 16 personnel—to keep the hospital running.

Over the succeeding decades, Davao Hospital underwent several name changes, with corresponding increases in bed capacity from 50 in 1921 to 1200 in 2009. The hospital also slowly provided specialized health care services to cater to the growing needs of the populace. Starting in the 1950s, the hospital's services were divided into specialty areas, and the establishment of residency training programs in different medical disciplines soon followed. The services also became more specialized and sophisticated with the establishment of a burn unit, a heart center, a dialysis center, and a kidney transplant unit. We are an “accomplished” old institution. It is very tempting to go gentle into that good night and rest on our laurels. However, resting on previous achievements is definitely not an option. Prior success does not always guarantee continued results.

With 1200-bed capacity, SPMC is now the largest Department of Health tertiary hospital in the country. It now boasts a wide array of health care services, state-of-the-art medical and surgical facilities and equipment, and a broad range of health professional training programs. While SPMC has undeniably grown, the community we serve is also constantly changing, and its health care needs are steadily increasing. Health care is a vast and intricate field that is as dynamic as society itself. To continue to be responsive to the changing health care landscape, we need to fight against the inactivity brought about by our present

achievements, know the pulse of our clients, constantly reconfigure our future state, and passionately implement planned actions to address the health system problems.

Maternal mortality rate in the whole country was at 114 per 100,000 population in 2015.¹ Equally important is the fact that, among young women aged 15 to 19 in Region XI, the prevalence of pregnancy is an alarming 18%, the highest in the country in 2017.² The ratio of rural health care workers to the population is 1:33,000.³ While the ideal doctor:population ratio is 1:1,000 based on the WHO's estimates, the country only has a meager 3.9 doctors per 10,000 population in 2016.⁴ Moreover, the 2018 ARMM data was even more worrisome at 1:55,000.⁵ It is common for a new Doctors to the Barrios physician to feel inadequate while handling a complicated delivery, in a far-flung barangay, because there is neither a specialist nor a nearby facility present. Worst of all is the fact that 6 out of 10 deaths in the country remain medically unattended.⁶

Natural disasters and acts of terrorism are among the newest challenges we face today. In 2012, typhoon Pablo ravaged Davao Oriental and Compostela Valley, and left a death toll of over 1100, with 800 more declared missing.⁷ On September 2, 2016, a bomb exploded in the Roxas Night Market in Davao, killing 15 and wounding at least 70 others.⁸

What should we, as the only government tertiary health care facility in Davao, do if this is the context within which we operate?

We carefully listen. We heed the call of the times because we want to set appropriate responses in motion. These tremendous health system challenges lead us to level up and adapt a strategic change agenda that will make SPMC the leading regional multi-specialty hospital for Mindanao. To get there, we created specialty institutes—such as the Institute for Women and Newborn Health—to help curb maternal and neonatal mortality and reduce teenage pregnancies. We recognized the need to strengthen service delivery networks to assist patients and their families navigate

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LEVELING UP SPMC

AVERAGE DAILY CENSUS

1769 ADMITTED PATIENTS
1831 OUTPATIENTS
437 EMERGENCY ROOM PATIENTS

1917



DAVAO HOSPITAL

16 PERSONNEL

1921



DAVAO PUBLIC HOSPITAL

50-BED CAPACITY

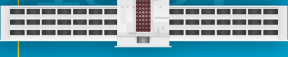
1950



DAVAO GENERAL HOSPITAL

SUSTAINED DAMAGES DURING THE BOMBINGS OF WORLD WAR II

1957



DAVAO REGIONAL MEDICAL AND TRAINING CENTER

350-BED CAPACITY

1982



DAVAO MEDICAL CENTER

400-BED CAPACITY

2009

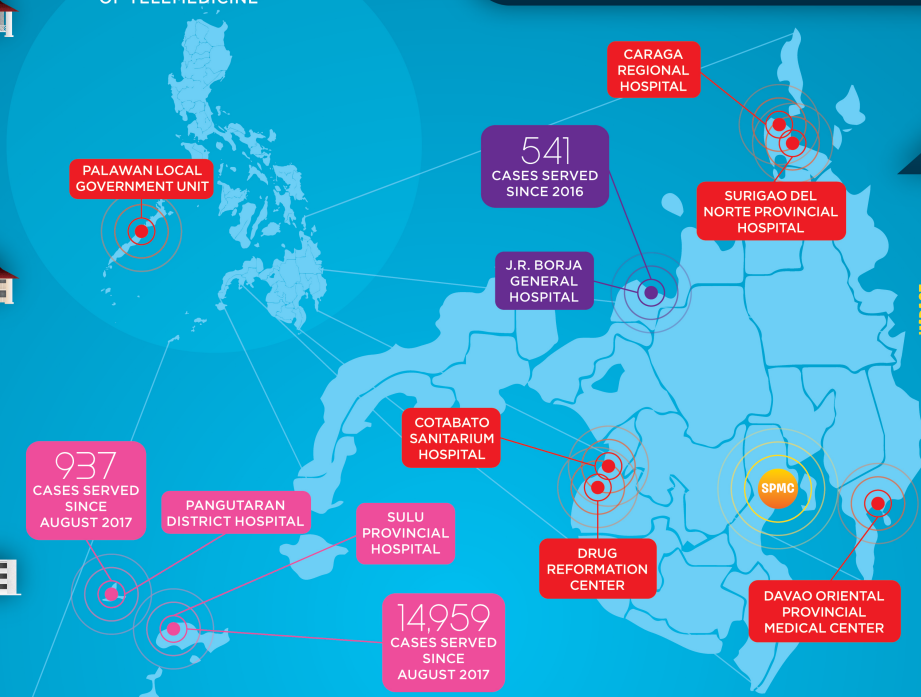


SOUTHERN PHILIPPINES MEDICAL CENTER

1,200-BED CAPACITY

TELEMEDICINE

- TELERADIOLOGY
- TELEPSYCHIATRY
- FUTURE COLLABORATORS OF TELEMEDICINE



INSTITUTE FOR WOMEN AND NEWBORN HEALTH

MATERNAL DEATHS PER 10,000 ADMISSIONS



DISASTER PREPAREDNESS

- City ordinance in partnership with Central 911 regarding pre-hospital care
- Proof of concept for medical evacuation



Multi-Sectoral Governance Council



Responsive health systems

Better health outcomes

Strengthen community linkages to empower the different tiers of the service delivery network

Undertake institutional and multi-disciplinary research for a more responsive health service delivery

Ensure availability of certified specialists for the identified institutes

Establish specialty institutes that produce patient outcomes that meet or surpass international benchmarks

Position Southern Philippines Medical Center as the apex regional multi-specialty hospital for Mindanao

IMPACT

CORE PROCESS

STRATEGIC POSITION

SUPPORT PROCESS



STRATEGY MAP 2022

Manage financial resources efficiently to support operations and fund expansions

Prioritize filling up of critical positions to meet the ideal staff-to-patient ratio

Practice a culture of exceptional safety and customer care

Build and equip specialty institutes with advanced health care technology

Pioneer a public hospital-based medical BPO in the country

through the network and processes of health care facilities. Here in Davao City, we partnered with the Davao City Central 911, which brings and refers patients with acute health problems to the SPMC Emergency Department. Lastly, to extend our services to geographically isolated and disadvantaged areas where there are no specialists, we have started to implement telemedicine solutions in the fields of Radiology and Psychiatry.

Since we listened, we are now able to reimagine a better health care landscape for Mindanao, where every family will have access to specialty institutes that provide holistic care to lessen morbidity and mortality, where health care workers assigned to far—flung areas can get specialist support at the tip of their fingers through e-health solutions, and where emergency and disaster response would be quick and concerted to mitigate risks.

The dream will not be realized if we do not make things happen. We formed a core team composed of representatives from the different units in the hospital to create the initial strategy map and help cascade the map in their respective units. We also created the Office of Strategy Management, which leads activities linked to our strategic objectives. We cascaded the strategic objectives and plans to the implementing units that, in turn, created their unit deliverables. Since we need external lenses to both assist us and monitor our progress, we convened the SPMC Multi-sectoral Governance Council, which is aptly nicknamed the SPMC Agilas. We are proud to mention some promising initial gains in our major deliverables such as the building of the institutes, the filling up of our human resources for health, and the increase in our number of certified nurses. Furthermore, the collaboration with Surigao Del Norte Provincial Hospital for emergency response and the partnership with Davao Oriental Provincial Medical Center for augmenting physicians in the field of Surgery, Anesthesia, and Critical Care have provided a standard for functional service delivery networks.

The establishment of the Institute for Women and Newborn Health last March 9, 2018 led to an increase in number of admissions by at least 500 pregnant patients within the last 6 months. The institute also now offers better facilities for postpartum women and their newborns. In 2016, we started using our own e-health platform for telepsychiatry, and we have since served 541 cumulative clients from Northern Mindanao. For only over a year now, with our teleradiology platform, we have provided radiological assessments involving more than 15,000 images sent by Sulu Provincial Hospital in Jolo, Pangutaran District Hospital in Sulu, and Amai Pakpak Medical Center in Marawi. To support our service delivery network, Davao City 911 recently partnered with our own Emergency Medicine Department in conducting trainings to improve prehospital care such as cardiac life support workshops, point-of-care and critical ultrasonography, and prehospital trauma life support. Our Emergency Medicine Department has also been tapped by health administrators in Surigao del Norte Province who are planning to establish their own emergency medicine facility in Northeastern Mindanao. Moving forward, we have created our scorecard monitoring team, which is responsible in keeping track of the progress of our strategy implementation.

Our Multi-sectoral Governance Council has also identified some collaborative projects and allocated budget for activities that will help us attain our strategic objectives: (1) a regular maternal and neonatal mortality review with root cause analysis with the DOH and our Institute of Women and Newborn Health; (2) a DOST-funded action research on our telepsychiatry services; (3) continuous partnership with the House of Hope for renovation of the halfway home for children with cancer; (4) collaboration with the City Health Office to improve the lives of people with mobility problems and strengthen emergency and disaster response through 911; (5) public-private

partnership with the National Economic and Development Authority and the Department of Budget and Management for proposed parking and dormitory buildings; and (6) alignment of our ISO quality objectives and performance review commitments with our strategic objectives.

Learning from the successes and failures in our 100 years of history and from the experiences of the people we serve, continuing to be transformative in our approach to the present health care challenges and guided by our strategy map, we move steadily forward in pursuit of becoming a world-class, service-oriented medical center leading in the provision of health care and training in Mindanao.

Guided by our vision, we imagine that by 2022, SPMC will be able to provide holistic, top-of-the-line health care, utilizing state-of-the-art medical technology for the general public, including those needing specialized orthopedic, trauma, transplant, heart, women, children, elderly, eye, and cancer services. Alongside these changes, we will be adding new subspecialty programs that will train the health human resources for these new specialized services. We shall go beyond our present borders and extend the reach of these services even more through an expanded telemedicine program. In time, we aspire to become the pioneer telemedicine business process outsourcing based in a government hospital, contributing to new solutions in expanding the scope of medical services to the underserved provinces and municipalities. We commit to do our share in meeting the country's target of decreasing maternal mortality by 50% in 2022. With the completion of all specialty institutes in 2022, we aim further to reduce overall mortality in Mindanao. We visualize ourselves partnering with networks of stakeholders, attaining universal health care as the overarching target, and being a model of an emergency medicine network, not only in Mindanao but in the entire Southeast Asia.

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