


## General Context and Concepts: Kalusugan Pangkalahatan (KP) and the Millennium Development Goals (MDGs) and its status

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### OBJECTIVE

By the end of the session, the participants will be able to:

1. Discuss KP, the three health goals, its three strategic thrusts, 6 instruments, legal mandate and the roles of the LCEs to localize KP.
2. Describe the background of the MDGs (e.g. origin; purpose)
3. Analyze the status of the MDGs; and
4. Identify the challenges and opportunities in CAR to localize KP and attain the MDGs.

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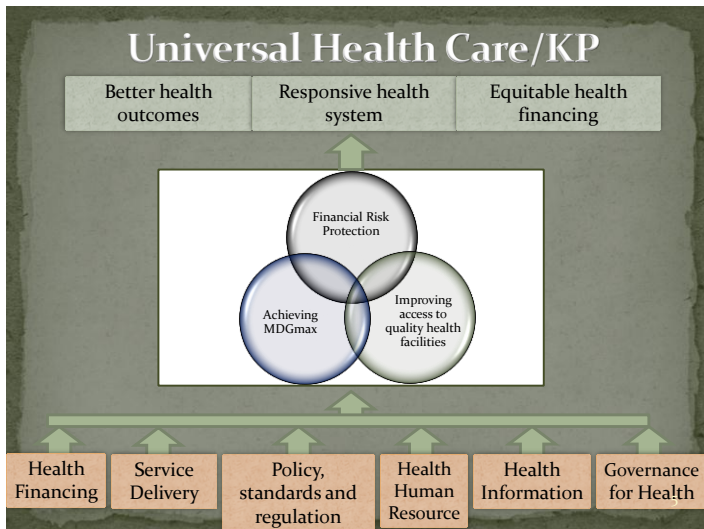


## Kalusugan Pangkalahatan (KP)

*Universal Health Care  
for All Filipinos/KP*  
(Administrative Order No. 2010-  
0036 )

**Deliberate attention to the  
needs of millions of poor  
Filipino families which  
comprise the majority of  
our population**

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### Universal Health Care/KP

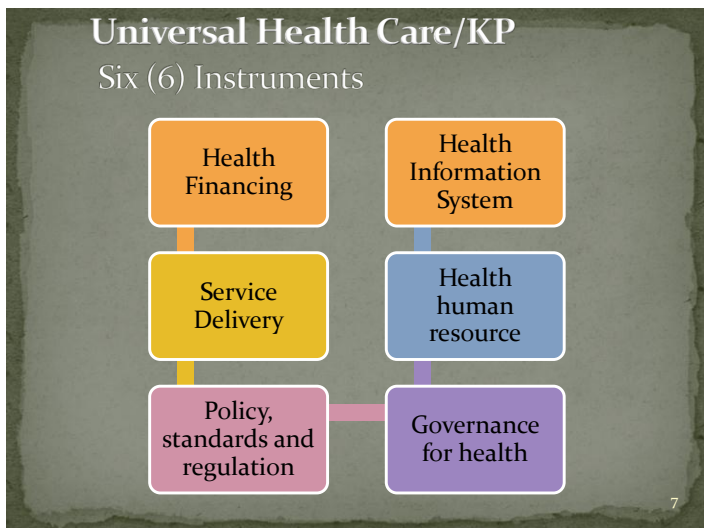
#### Three Strategic Thrusts

Improve financial risk protection through improvements in NHIP benefit delivery

Achieve health-related Millennium Development Goal -Max (MDGmax) targets

Improve access to quality health care facilities

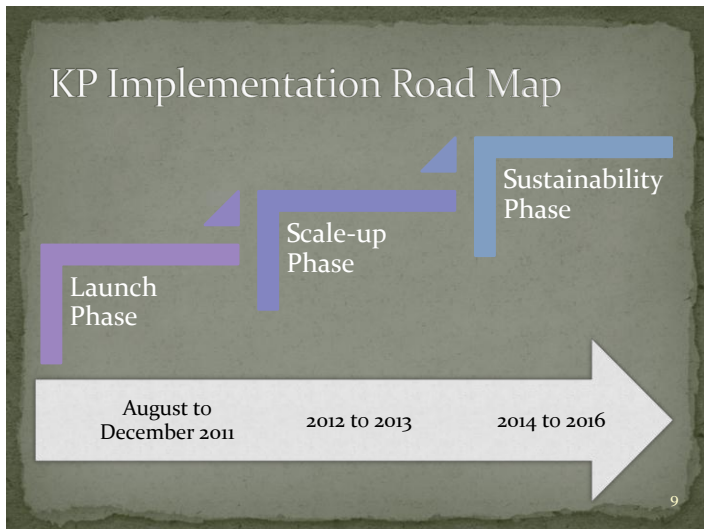
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### KP Legal Mandate

- DOH Department Order 2010-0036  
The Aquino Health Agenda: Achieving Universal Health Care for All Filipinos
- DOH Department Order 2011-0188  
Kalusugan Pangkalahatan Execution Plan and Implementation Arrangements
- Philippine Constitution

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### Kalusugan Pangkalahatan

#### Analysis of the Problem

- Neither Gov't subsidy nor the NHIP have adequately protected the poor from financial risk
- The poor has limited access to quality outpatient (RHUs) or inpatient (hospital) facilities
- PH may not meet MDG commitments by 2015, specially those related to maternal and child health

#### KP as an Operational Solution

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graph TD
    A[Access to Quality IP and OP Care] --> B((Poorest Families))
    C[NHIP Benefit Delivery] --> B
    D[Public Health Services] --> B
    
```

- Convergence of three strategic thrusts to serve poor families

## “Lokal na Pamahalaan Tungo sa Kalusugan Pangkalahatan”

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### Filipino Income Quintiles

	Monthly income	Families per quintile
Q1	3,460	5,218,267
Q2	6,073	4,094,164
Q3	9,309	3,912,443
Q4	15,064	3,707,494
Q5	38,065	3,485,067

Source: National Health and Demographic Survey, 8.12



## Partisipasyon ng Lokal na Pamahalaan tungo sa Kalusugan Pangkalahatan (KP)

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### A. Financial Risk Protection

#### KP Strategies

#### LGU's Role



Improving the National and Regional PhilHealth benefit delivery ratios

1. Expanding enrollment of the poor in the NHIP

- Enroll Q2 poor Families in PhilHealth;
- Enforce mandatory enrolment of informal and Individually paying sectors e.g. requirement for business permits and licenses

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### A. Financial Risk Protection



#### KP Strategies

2. Promoting quality outpatient & in-patient services through reformed capitation and no balance billing arrangement for sponsored members
3. Increasing the support value of health insurance for the poor

#### LGU's Role

- Upgrade RHUs/Health Centers and Hospitals to meet quality standards and PhilHealth accreditation
- Mobilize community health teams (CHT) to inform the families
- Advocate and mobilize community and lobby groups

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### B. Health Facilities Enhancement

#### KP Strategies

1. Improving facility development and preparedness for the most common causes of mortality and morbidity including trauma

#### LGU's Role

- Develop a Province-wide Facility Rationalization / Investment Plan for Health (PIPH/MIPH)



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## B. Health Facilities Enhancement



### KP Strategies

2. Providing grant mechanisms to support the immediate repair and rehabilitation of selected priority facilities
3. Utilizing Public-Private Partnership approach

### LGU's Role

- Support Health Human Resources as counterpart
- Apply Public- Private Partnership as another financing scheme for facility development

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## B. Health Facilities Enhancement



### KP Strategies

4. Achieving autonomy and income retention schemes for government hospitals and health facilities

### LGU's Role

- Good Governance and local policies supporting fiscal autonomy
- Compliance to licensure and accreditation requirements
- Public service excellence for health

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## B. Health Facilities Enhancement



### KP Strategies

5. Clustering of service delivery networks to address the fragmentation of services from community to end referral tertiary hospitals

### LGU's Role

- Strengthen the Inter-local cooperation for health (ILHZ) and referral system

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## B. Health Facilities Enhancement



### KP Strategies

- Proposed PPP projects for DOH:
- IT system for DOH & PHIC
  - Philippine Orthopedic Center as Center for Bone Diseases and Trauma
  - Air and sea ambulance project
  - RITM for commercial production of vaccines
  - San Lazaro Hospital as Center for Infectious Diseases

### LGU's Role

- Better Linkages for Health :
- Strengthen local health system performance
  - Establish cross sectoral networking and alliances
  - Inter-local and Inter-sectoral cooperation for health (ILHZ)

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# UN Millennium Development Goals



**Progress by Goal**  
Current status in accordance with national Government reporting:

Icon	Goal	Status
	Eradicate extreme poverty and hunger	Off track
	Achieve universal primary education	Off track
	Promote gender equality and empower women	Off track
	Reduce child mortality	Achieved
	Improve maternal health	Off track
	Combat HIV/AIDS, malaria and other diseases	Off track
	Ensure environmental sustainability	Off track
	Develop a global partnership for development	Off track

**ICON LEGEND**

- Achieved
- Very likely to be achieved, on track
- Possible to achieve if some changes are made
- Off track
- Insufficient information

MDG Monitor: Quick Facts



# Summary



GOAL	TARGET	INDICATOR	ACCOMPLISHMENT
Goal 1: Eradicate Extreme Poverty and Hunger	Halve, between 1990 and 2015, the proportion of people who suffer from hunger	Prevalence of underweight children under 5 years of age	
Goal 4: Reduce Child Mortality	Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate	Under-five mortality rate	
		Infant Mortality Rate	
		Proportion of 1 year-old children immunized against measles	
Goal 5: Improve Maternal Health	Reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio	Proportion of fully immunized children under 1 year old	
		Maternal mortality ratio	
		Proportion of births attended by skilled health personnel	

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# Summary



GOAL	TARGET	INDICATOR	ACCOMPLISHMENT
Goal 6: Combat HIV/AIDS, Malaria and other Diseases	Have halted by 2015 and begun to reverse the spread of HIV/AIDS	Condom use rate of the contraceptive prevalence rate	
		Prevalence associated with malaria	
	Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases	Death rate associated with malaria	
		Death rate associated with tuberculosis	
		Proportion of tuberculosis cases cured under directly observed treatment short course (DOTS)	

**Legend:**

- High: pace of progress is greater than 0.9
- Medium: Pace of progress between 0.5 and 0.9
- Low: Pace of progress is less than 0.5

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# Summary



GOAL	TARGET	INDICATOR	ACCOMPLISHMENT
Goal 7: Ensure Environmental Sustainability	Integrate the principles of sustainable development into country policies & programmes to reverse the loss of environmental resources	Proportion of households with access to safe water	
		Proportion of households with sanitary toilet facility	

**Legend:**

- High: pace of progress is greater than 0.9
- Medium: Pace of progress between 0.5 and 0.9
- Low: Pace of progress is less than 0.5

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## C. Achieving MDGs



### KP Strategies

1. Deploying Community Health Teams;
2. Utilizing the life cycle approach in providing needed services

### LGU's Role

- ENSURE THAT POOREST FAMILIES ARE REACHED BY HEALTH SERVICES!
- Funding support for CHTs
- Continuing training & updates for local health personnel and CHTs

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## C. Achieving MDG



### KP Strategies

3. Promoting healthy lifestyle to prevent non-communicable diseases;
4. Ensuring adequate surveillance and preparedness for emerging diseases; and

### LGU's Role

- Encourage Hataw activities, sports fest in communities & offices
- Establish PESU and MESU
- Formulate Disaster Preparedness Plan with funding support

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## C. Achieving MDG



### KP Strategies

5. Harnessing the support of inter-agency and inter-sectoral approaches to health

### LGU's Role

- Strong partnership with DepEd, DILG, DSWD, academe, for health service delivery

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## Ways Forward

- Sustained economic growth
- Better population management
- Greater focus on underserved areas
- Safety nets
- Improved targeting
- Improved governance and transparency
- Peace and security
- Greater advocacy and localization
- Sector- specific programs

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## Monitoring the MDGs

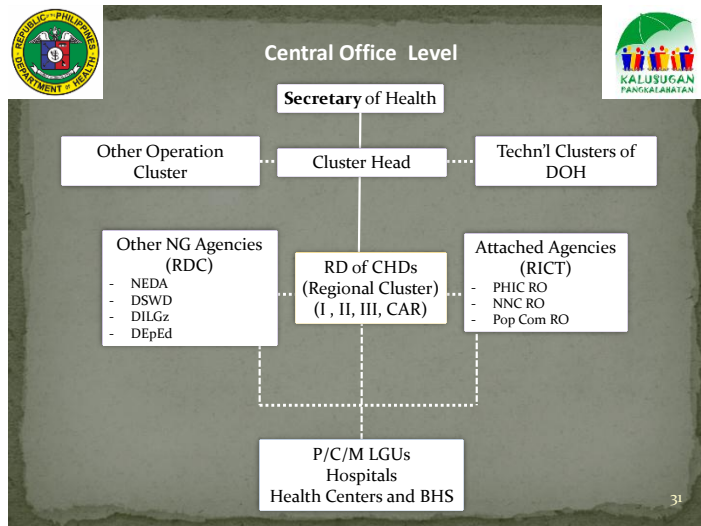
- NEDA MC-IHDC under NEDA SDC is the lead in monitoring progress towards the achievement of the MDGs
- NSCB maintains the Philippine MDG indicators website, using data from national censuses and surveys and administrative reports
- LGUs track their progress using CBMS data

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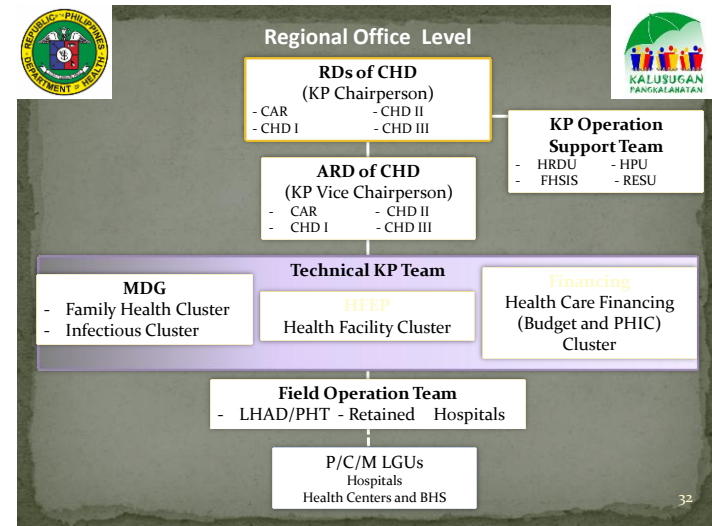
## Pagpapatupad ng Kalusugang Pangkalahatan

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## Food for thought...



- Local Health Systems strengthening, by way of Inter local health zones will facilitate the achievement of KP/MDGs.

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**Thank you!**

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**GOD Bless!**



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