







## Lessons from the Field: Recasting Primary Health Care (PHC) – A PHC framework and roadmap design to strengthen local health systems to achieve Universal Health Care (UHC) in Northern Samar, Philippines

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#### Introduction

The Philippine healthcare system is very complex due to segmentation of public and private health providers, the devolution of public health facilities, multiple payment mechanisms, separation of public health from individual health care, and multiple vertical programs. Additionally, the geographical challenges with more than 7000 islands and natural hazards contribute to the complexity. The role of PHC is not fully utilized. Frequent by-passing of primary care and district hospitals led to overcrowding of provincial and DOH hospitals. Referrals from primary to tertiary care do not follow evidence-based guidelines, and standard operation procedures (SOP) (Tornquist and Lucas, 2017).

#### **Overall objective**

In line with the Primary
Health Care guarantees,
the project purpose
was to develop a
strategic PHC
framework and related
road map for scaling up
a people centred and
integrated primary care
service.

# Desk reviews / Lit. Review Key informant interviews Multi-consultative workshops with Dept. of Health: Dept. of Health

**62%** 

**65%** 

**76%** 

43%

80%

Methodology

#### • Multi-consultative workshops with Dept. of Health; Dept. of Health Regional Office; National Insurance Company (PhilHealth); Governor; Health providers; Provincial Health Office;

Multi-expert team tasking

Community involvement

Private sector

Provincial Dept. Of Health;

0 00 00 00 00 00 00 00 00 00 00 00 00 0	MMR: 121/100.000 live birth					
		21	23	14	22	15
ION O	2012	2013	2014	2015	2016	2017
	YEAR					

#### **GOVERNANCE:**

PHC governance

established;

Network of primary care providers

established &

function

PHC

**Measles:** 

OPV3:

Hep B:

**BCG**:

 Establish and maintain PHC governance within the provincial core group

**Pentavalent Vacc:** 

#### MAPPING:

2. Mapping all health providers (public & private) to be engaged in the Service Delivery Network (SDN) pilot sites of PaLaO and GaMaLa ILHZ regarding their capacities/gaps (staffing, equipment....)

#### TRAINING / COACHING:

- 1. Establish a technical working group at Inter-local health zone (ILHZ) level
- 2. Gyn/OB from Northern Samar Provincial Hospital to continue coaching and training
- 3. Continue training on SCM
- 4. Engage RHU Bobon as a coaching and resource centre for quality services of health care

#### MEL:

- 5. Prioritize e-profiling roll out in the pilot sites
- 6. Establish PHC M&E framework
- 7. Develop/roll out Feedback mechanism
- 8. Maintain what has been developed and established

Monitoring, Evaluation
& Learning (MEL):
Support system for
implementation,
regulation and learning
is functioning

Framework
Communities, and

health providers

understand

primary care

provider as

navigator

afforda diffe provide

health services accessible and affordable at different provider/levels assured

Quality

#### **HEALTH SERVICE PACKAGE:**

- Fix the health service package at different levels of care to address MMR,
   Malnutrition and Immunization
- 2. Consider Centre of Excellence in pilot sites
- 3. Disaster prepardeness emergency plan

#### FINANCE:

- 4. Consider referral coverage for maternal emergencies from PhilHealth facility fee
- 5. PhilHealth coverage & entitlements;
- 6. Ensure zero out-of-pocket payments

### COMMUNICATION ON PRIMARY CARE PROVIDER AS

NAVIGATOR within the SDN:1. Utilization of developed comm tools and referral forms

#### DISEASE PREVENTION:

1. Improve access to adequate water supplies and sanitation facilities

**Community Health** 

ensured through

disease prevention

- 2. First 1000 days Strategy for nutrition
- 3. Roll out pregnancy tracking system and checklist

#### SUPPLIES:

- 7. Ensure facilities have necessary equippment (Ultrasound for NSPH, RHUs etc), and fill gaps where necessary
- 8. Assess and address the vaccine supply chain

#### **Lessons learned:**

- ✓ Political will (DOH, PHO, PhilHealth) and readiness by health service providers is a major driver
- ✓ Listening to all stakeholders incl. communities, policy makers, health providers, suppliers, national health insurance company among others created a highly valuable driving platform to develop the PHC framework
- ✓ Selection of mature Inter-Local Health Zones (ILHZ) as pilot sites for integrated Service Delivery Network (SDN)

#### **Recommendations:**

- ✓ Ownership through meaningful engagement of all relevant stakeholders
- ✓ Phased approach: address low hanging fruits first for specific health outcomes (i.e. malnutrition, maternal health, immunization coverage)
- ✓ Engage national health insurance company
- ✓ Marketing communication strategy within DOH, local health service providers and communities