

# IMPACT AREAS

IMPACT	INDICATOR	BASELINE	2022
<b>Better Health Outcomes</b>	Increase in occupancy rate for tertiary cases	<b>13.33%</b>  *Jan-Dec 2017  Primary – 87% Tertiary – 13%	<b>100%</b>
	Increase in early detection of cancer cases	<b>4 cases</b>  *Breast and Cervical Cancer cases  (Jan-Dec 2017)	<b>100%</b>  <b>of actual cases</b>

# IMPACT AREAS

IMPACT	INDICATOR	BASELINE	2022
<b>Responsive Health System</b>	Increase customer satisfaction	Overall rating: 99.32%  VS rating 81.25%	85% VS rating
<b>Financial Risk Protection</b>	Increase in number of NBB in-patients	19,866	50%
	Decrease in no. of in-patients with out of pocket expenses	3,947	50%

# STRATEGIC POSITION

FROM	TO
<b>Tertiary (Level 2) Teaching &amp; Training for 3 accredited departments</b>	<b>2022:</b> Tertiary (Level 3) Teaching & Training for at least 6 accredited departments <b>2028:</b> Tertiary (Level 3) Teaching & Training with fellowship programs
<b>Multi-Specialty Services</b>	<b>2022:</b> Multi-Specialty Medical Center for gastro, cardio, onco, nephro, neuro, imaging <b>2028:</b> Multi-Specialty Medical Center for more sub-specialty cases
<b>Referral Center for general cases from government health facilities in Bataan</b>	<b>2022:</b> Referral Center for tertiary cases in Central Luzon <b>2028:</b> End-Referral for Cancer and adolescent care

<p>Provide quality services responsive to the health needs of the community</p>	<p><b>% of referrals to the different specialty centers with positive treatment outcome</b>  <b>% of at least one (1) follow-up after initial consultation or discharge</b>  <b>% of CPs compliant to evidenced-based CPGs</b>  <b>% of compliance to the clinical pathways</b></p>				
<p>2017 BL</p>	<p>DELIVERABLES</p>				
	<p>2018</p>	<p>2019</p>	<p>2020</p>	<p>2021</p>	<p>2022</p>
<p>Start to establish:  Physical Medicine &amp; Rehab Unit, Ambulatory Surgical Clinic, Dialysis Clinic, Tertiary Laboratory, Blood Bank, 2<sup>nd</sup> Level X-Ray</p>		<p>Ambulatory Eye-Surgical Center  Cardio Center  Expanded Dialysis Center  Endoscopy Center  Treatment for Chronic Hepa B</p>	<p>Cancer and Palliative Care Center</p>	<p>Imaging Center</p>	
<p>N/A</p>	<p>Clinical Pathways for top 10 tertiary cases</p>				

Organizational Culture	PERFORMANCE COMMITMENTS				
<p style="text-align: center;"><b>Institutionalize a culture of patient safety and holistic care</b></p>	<p style="text-align: center;"><b>Decrease in sentinel events</b></p> <p style="text-align: center;"><b>Increase in customer satisfaction in all frontline units</b></p>				
2017 BL	DELIVERABLES				
	2018	2019	2020	2021	2022
<p style="text-align: center;"><b>Corrective action for reported sentinel events</b></p>	<p style="text-align: center;"><b>Training and crafting of patient safety and holistic care protocols in all frontline units</b></p>	<p style="text-align: center;"><b>M&amp;E of protocols by frontline units</b></p>			

Training	PERFORMANCE COMMITMENTS				
Train multi-specialty medical professionals	Percentage of residents passing the residency written exam No. of board-certified graduates of the residency programs Percentage of residents in training promoted from M03 to M04				
2017 BL	DELIVERABLES				
	2018	2019	2020	2021	2022
3 Residency Training Programs for 3 Accredited Departments	Residency training program for Surgery, Pathology	Accreditation of Department of Internal Medicine and Surgery	Accreditation of Department of Emergency Medicine  Residency training program for Pathology	Residency training program for Radiology	Accreditation of Department of Surgery, Radiology, Pathology

Research	PERFORMANCE COMMITMENTS				
<p align="center"><b>Produce institutional research aligned with community needs and improvement of service delivery of the hospital</b></p>	<p align="center"><b>Hospital/public health policies derived from completed institutional research</b></p> <p align="center"><b>Institutional research published in a journal and/or presented in a forum</b></p>				
2017 BL	DELIVERABLES				
<p align="center"><b>Orientation on Research Proposal Writing</b></p>	2018	2019	2020	2021	2022
	<p align="center">Level 2 PHREB Accreditation</p> <p align="center">Completed Research for Teenage Pregnancy</p> <p align="center">Completed research on Hospital QMS</p>	<p align="center">Completed Research on Prevalent Eye Diseases</p> <p align="center">Completed Research on the delays in the Operating Room Procedures</p>	<p align="center">Completed Research on Cancer</p> <p align="center">Completed Research on Sub-dermal implant insertion</p> <p align="center">Completed Research on Palliative Care</p>	<p align="center">Completed Research on G6PD</p>	<p align="center">Level 3 PHREB Accreditation</p> <p align="center">Completed Research on Kangaroo Mother Care (care for small babies)</p>

<b>Linkages</b>	<b>PERFORMANCE COMMITMENTS</b>				
<p><b>Institutionalize linkages with stakeholders for a functional SDN and active community involvement</b></p>	<p><b>Percentage Decrease in primary cases referred to BGH</b></p> <p><b>Percentage increase in tertiary cases referred to BGH</b></p>				
<b>2017 BL</b>	<b>DELIVERABLES</b>				
	<b>2018</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>
<p><b>No functional SDN</b></p>	<p><b>BGH-PGB MOA establishing SDN protocol in the province of Bataan</b></p>	<p><b>At least 10 MSGC-led preventive and promotive health advocacy activities for identified health conditions of communities in Bataan annually</b></p> <p><b>MSGC-led activity to support residency training program per year</b></p>			



Human Resource	PERFORMANCE COMMITMENTS				
Achieve the ideal patient to health worker ratio			Percentage filled up plantilla positions  Employee Satisfaction Rating		
2017 BL	DELIVERABLES				
	2018	2019	2020	2021	2022
Incomplete staff complement	Deployable Specialty Team for Ambulatory Eye-Surgical, Cardio, Nephrology, and Endoscopy Centers, Psychiatric Ward Team	Deployable Specialty Team for Cancer and Palliative Care Center	Deployable Specialty Team for the Imaging Center		
65% plantilla positions filled up of the 1,186 personnel for 400 bed capacity	At least 75% plantilla positions filled up of the 1,186 personnel for 400 bed capacity	At least 85% plantilla positions filled up of the 1,186 personnel for 400 bed capacity	At least 90% plantilla positions filled up of the 1,445 personnel for 400 bed capacity	IRR for a 500 bed capacity personnel requirement	Start filling up 1,413 personnel requirement

# Infrastructure

# PERFORMANCE COMMITMENTS

Complement the expansion of health services with functional infrastructure and equipment

**Timely turnover and acceptance of infrastructure projects**

**Timely turnover and acceptance of necessary equipment**

2017 BL

## DELIVERABLES

2018

2019

2020

2021

2022

OPD Complex (Phase 1)

- Land acquisition -December
- Oxygen Plant
- Solid Waste Management (SWM)

- 100% OPD Complex Phase 2 completed by September
- 10% completion of 5-storey Medical ward and ICU by December 2019

Dental Chair  
Panoramic X-Ray Machine  
Argon Eye Laser

- Completion of ER Complex
- 3-storey Cancer Center -December
- Conversion of current ER Complex into Imaging Center
- 5-storey Medical Ward and ICU (Phase 2) -December

- MRI
- LINAC Machine
- Mechanical Ventilator
- Patient's Monitor

- 3-storey Bldg. for OR -December

- Hybrid OR equipment

**IT****PERFORMANCE COMMITMENTS****Use technology to improve efficiency of processes and access to information systems****Real-time access to health/hospital related information****2017 BL****DELIVERABLES****2018****2019****2020****2021****2022****External Provider of HOMIS  
(Comlogik)****HR  
(100%)****OPD Records  
(100%)****Laboratory Information  
System****BGH SDN  
Software where  
Balanga City as  
pilot site****Expansion of BGH  
SDN software in  
all municipalities****In-Patient  
Records  
(100%)****RIS  
(100%)****Document Management  
System****Design EMR for  
patients and  
doctors**

Fund Management		PERFORMANCE COMMITMENTS				
Ensure high absorptive capacity for the long-term sustainability of the hospital						
2017 BL		TARGETS				
		2018	2019	2020	2021	2022
% Increase in Collections (PHIC Reimbursements & out of pockets)		400 M	10% increase (500 M)	10% (440 M)	10% (484 M)	10% (540 M)
% Increase in Quantified Free Service (QFS) 74 M		100 M	125 M	150 M	175 M	200 M
% Budget Utilization Rate 90%	GAA 99.69%	99.80%	99.80%	99.80%	99.80%	99.80%
	Internal 83.30%	90%	90%	92%	92%	95%
% Disbursement Utilization Rate aligned with cash based appropriation 65%	GAA 80.09%	89%	100%	100%	100%	100%
	Internal 56.00%	63%	63%	65%	65%	68%