Item No.: 08

Date: APR 2 5 2023

 Republic of the Philippines PROVINCE OF LEYTE Palo, Leyte



PROVINCIAL LEGAL OFFICE

2ND Indorsement March 31, 2023 A.11.28

Respectfully returned to the Sangguniang Panlalawigan of Leyte, through the SP Secretary, the attached Ordinance No. 08, S. 2022 of the SB of Matalom, Leyte, recommending for the declaration of its validity pursuant to its power under Section 56 (c) of R.A 7160, the same being, to the opinion of the Provincial Legal Office (PLO),an exercise of the LGU"s "Corporate Powers", authorized under Section 22 of the Code. And the "Full enjoyment of Local Autonomy" authorized under Section 22 (d) thereof, quoted for reference:

"Section 22 (d). Local Government Units shall enjoy full autonomy in the exercise of their proprietary functions and in the management of their economic enterprises, subject to the limitations provided in this code and other applicable laws.

Provided, That the declaration as "Local Economic Enterprise" of the Matalom Community Hospital, will not adversely affect the mandate under Section 17 (2), (iii) "To provide Health Services, which include programs and projects on primary health care, etc..." Provided, Finally, that pursuant to Section 186 of the Code, "Fees or Charges shall not be unjust, excessive, oppressive, confiscatory, or contrary to declared national policy.

ATTY. JOSE RAYMUND A. ACOL

Asst. Provincial Legal Officer

Republic of the Philippines PROVINCE OF LEYTE -0-



OFFICE OF THE SANGGUNIANG PANLALAWIGAN

1st INDORSEMENT 29 March 2023

Respectfully indorsed to the **PROVINCIAL LEGAL OFFICE** the herein **MUNICIPAL ORDINANCE NO. 08 S 2023** of the **MUNICIPALITY OF MATALOM**, **LEYTE**; declaring the MATALOM COMMUNITY HOSPITAL as LOCAL ECONOMIC ENTERPRISE, for review and recommendations.

FLORINDA JILL S. UYVICO Secretary to the Sanggunian

SP Records 32923



Republic of the Philippines Province of Leyte MUNICIPALITY OF MATALOM &

OFFICE OF THE SANGGUNIANG BAYAN SECRETARY

SANGGUNIANG PANLALAWIGAN

PROVINCE OF

10 January 2023

THE SANGGUNIANG PANLALAWIGAN Legislative Building, Capitol Site Tacloban City

Thru: FLORINDA JILL S. UYVICO

Sangguniang Panlalawigan Secretary

Legislative Building, Capitol Site, Tacloban City

Gentlemen/Ladies:

We are respectfully forwarding to the Sangguniang Panlalawigan for review, 16 copies of Municipal Ordinance No. 8, s. 2022 of the Municipality of Matalom, Leyte, An Ordinance Declaring the Matalom Community Hospital as Local Economic Enterprise of the Municipality of Matalom, Leyte.

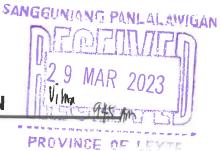
Kindly acknowledge receipt hereof.

Very truly yours,

IRISH C. GUIGUE Secretary to the Sanggunian



Republic of the Philippines Province of Leyte MUNICIPALITY OF MATALOM



OFFICE OF THE SANGGUNIANG BAYAN

MUNICIPAL ORDINANCE NO. 08 Series of 2022

AN ORDINANCE DECLARING THE MATALOM COMMUNITY HOSPITAL AS LOCAL ECONOMIC ENTERPRISE OF THE MUNICIPALITY OF MATALOM, LEYTE.

WHEREAS, Section 443 (B) (2) of RA 7160 otherwise known as the Local Government Code of 1991 empowers the Sangguniang Bayan to create such other offices as may be necessary to carry out the purposes of the Municipal Government;

WHEREAS, Section 22(a), Section 313 and Section 325(a) of R.A. 7160 state the provisions relative to the establishment of Economic Enterprise & Public Utilities in every LGU;

WHEREAS, local government units through the Sangguniang Bayan may create local economic enterprises (LEEs) for the purpose of improving production and delivery of services and are expected to generate the bulk of their income;

WHEREAS, the declaration of the Matalom Community Hospital as Local Economic Enterprise will provide more efficient and effective delivery of basic health services for the general welfare of the different stakeholders of the municipality;

BE IT ENACTED by the Sangguniang Bayan of Matalom, Leyte in regular session assembled that:

SECTION 1. TITLE – This Ordinance shall be known as "AN ORDINANCE DECLARING THE MATALOM COMMUNITY HOSPITAL AS LOCAL ECONOMIC ENTERPRISE OF THE MUNICIPALITY OF MATALOM, LEYTE."

SECTION 2. STATEMENT OF POLICY – Pursuant to the powers and authority granted to the local government units by virtue of R.A. 7160, the Municipality of Matalom shall endeavor to be self-reliant and shall establish viable economic enterprises in order to augment its resources, generate employment opportunities, and uplift the socio-economic well-being of the people of Matalom.

SECTION 3. ESTABLISHMENT OF LOCAL ECONOMIC ENTERPRISES – The Matalom Community Hospital shall operate as viable economic enterprise. The profits or income derived from its operation shall be deposited in a special account to be utilized in its maintenance & operation, repayment of the loan, payment of personnel services, acquisition of additional equipment, and other related expenses for sustainability.

A copy of the feasibility study and 5-year business plan of the local economic enterprise is hereto attached and marked as Annex "A" and made integral part hereof.

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Republic of the Philippines Province of Leyte MUNICIPALITY OF MATALOM

OFFICE OF THE SANGGUNIANG BAYAN

SECTION 4. BUDGET - The Matalom Community Hospital shall prepare a budget separate from the general fund, subject to the usual budgetary processes.

SECTION 5. FUNDS - The funding requirement of the established local economic enterprise shall be sourced from their operating income. In the event that the income of the economic enterprise is insufficient to fund its expenditures, the deficiency shall be sourced from the General Fund of the LGU as subsidy.

The Capital Outlay of the local economic enterprise shall be treated as investment and as part of the development fund of the LGU and may be charged to the twenty percent (20%) Economic Development Fund.

SECTION 6. RATES AND FEES. Rates and fees shall be based on the duly enacted Tax Ordinance of the Municipality and other relative ordinances that may be enacted.

SECTION 7. SEPARABILITY CLAUSE. Should any provision of this Ordinance be declared unconstitutional or illegal by any court of competent jurisdiction, those parts or provisions hereof which are not affected thereby shall be in full force.

SECTION 8. REPEALING CLAUSE. Any ordinance, resolution, order, issuance or pertinent law contradicting this ordinance is hereby repealed.

SECTION 9. EFFECTIVITY CLAUSE - This ordinance shall take effect immediately upon approval.

UNANIMOUSLY APPROVED: December 21, 2022

I HEREBY CERTIFY THAT THIS IS A TRUE AND ACCURATE COPY OF THE ORDINANCE DULY ENACTED BY THE SANGGUNIAN ON DECEMBER 21, 2022.

> IRISA C/GU/GUE Secretary to the Sanggunian

HON. RIKRIKJAY S. PAJULIO Municipal Vice-Mayor/Presiding Officer



Republic of the Philippines Province of Leyte MUNICIPALITY OF MATALOM &

OFFICE OF THE SANGGUNIANG BAYAN

APPROVED:

ON. EMICS PAIULIO, D.M.D.

Tate of Approval:

106/25

HON JOSELEO W. DANCES

HON. SABINO G. GERONA SB Member

HON. RONALD P. GILO SB Member HON. LEONARD P. TAN II SB Member

HON AURELIANO P. LAPASANDA SB Member

> HON. FAUSTO P GARIN JR. President, LnB

HON. JOSE CHRISTOPHER P. DAÑO President, PPSK



Republic of the Philippines Province of Leyte MUNICIPALITY OF MATALOM

OFFICE OF THE SANGGUNIANG BAYAN SECRETARY

CERTIFICATION

THIS IS TO CERTIFY that Municipal Ordinance No. 08, s. 2022 entitled AN ORDINANCE DECLARING THE MATALOM COMMUNITY HOSPITAL AS LOCAL ECONOMIC ENTERPRISE OF THE MUNICIPALITY OF MATALOM, LEYTE, has been posted in three (3) conspicuous places in the municipality since January 10, 2023 and shall remain posted for three (3) consecutive weeks.

This certification is issued in compliance with the pertinent provisions of the Local Government Code of 1991.

ISSUED this 10^{th} day of January, 2023 at Matalom, Leyte, Philippines.

IRISH COUIGUE
Secretary to the Sanggunian



MATALOM
COMMUNITY
HOSPITAL
(MCH)

BUSINESS PLAN & FEASIBILITY STUDY

2022



Republic of the Philippines
Province of Leyte
MUNICIPALITY OF MATALOM



MUNICIPAL PLANNING AND DEVELOPMENT OFFICE

2nd Floor, Balay Lungsod, Bgy. San Pedro, 6526 Matalom, Leyte *Tel. No.: (053) 839-9451*

e-mail: mpdcmatalom@gmail.com

29 November 2022

HON. ERIC S. PAJULIO, DMD Municipal Mayor LGU-MATALOM Matalom, Leyte

Sir:

Respectfully submitting to your good office the **BUSINESS PLAN** AND **FEASIBILITY STUDY** of **MATALOM COMMUNITY HOSPITAL (MCH)** – 5 copies each.

Please acknowledge receipt hereof.

Thank you.

Truly yours,

ENGR. GREGORIO S. PADA

Municipal Planning and Development Coordinator



LGU-MATALOM LOCAL ECONOMIC ENTERPRISE/PUBLIC UTILITIES (LEE/PU)

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MATALOM COMMUNITY HOSPITAL (MCH)

5-YEAR BUSINESS PLAN

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- VI. MARKETING AND SALES
- VII. FUNDING AND INVESTMENT
- VIII. FINANCIAL SALES AND INCOME FORECASTING

I. EXECUTIVE SUMMARY

Description of the Business: MCH will be operated in full compliance with all DOH requirements for an Infirmary hospital with additional service enhancements intended to address specific unmet needs of the immediate catchment area of the Hospital. The Project will be situated within a 0.7708-hectare property owned by the Local Government of Matalom in Barangay Caridad Norte, the current location of the Rural Health Office. MCH will operate with an authorized bed capacity of 30 beds.

Ownership: MCH will be wholly owned by the LGU Matalom.

Project Uses and Sources: The Project will cost P15 million to construct and furnish. The allocation for medical equipment is based on DOH Infirmary estimates with an additional provision for equipment costs for the aforementioned service enhancements. Equity funding for the Project will be provided by LGU Matalom and MCH's revenues.

Products and Services: Consistent with DOH guidelines for Infirmary hospitals, MCH will provide Primary clinical care (in medicine, pediatrics, obstetrics and gynecology, and minor surgery and anesthesia), along with emergency and outpatient services. MCH will also provide nursing services, clinical laboratory, radiology, and pharmacy services. It will provide for necessary administrative services to support the operations including all personnel, accounting, medical records, housekeeping, ambulance, security, dietary and social services. In addition, specialized services based on the catchment population disease profile will be offered including ambulatory services.

Target Market: The Hospital will cater to the general population of Matalom, Leyte, devoting the better part of its capacity towards serving the indigent sector of the population. Given its location, however, MCH considers as its main catchment area the nearby municipaly of Bato. MCH will serve as the core referral facility for all infirmary health facilities in the Municipality; this will help to decongest the overcrowded Nearby Hospitals.

Health Sector Profile: Health services in the Province are provided by 16 government and 14 private hospitals, 43 rural health units, and 339 barangay health stations. Utilization rates at Level One and Level Two government hospitals fall well below the PHO's target utilization rates, which is in sharp contrast with the overcrowded Hilongos District Hospital. Among other factors, the imbalance is attributed to the absence of adequate Infirmary facilities in the Province. LGU

for maternal deaths. Further gains in the overall indices can be achieved if Municipal health facilities are upgraded with better equipment and personnel, particularly for emergency care for both children and mothers. With non-communicable lifestyle-related diseases accounting for a significant portion of the Municipal's diseases the establishment of an integrated program for the prevention and control of non-communicable lifestyle diseases is required.

Competitive Advantage and Strategy: MCH will be the only hospital facility within Matalom and Bato jurisdiction; as such, it has the potential to operate with a lower cost structure than its competitors. MCH's location and service configuration make it an ideal referral facility for Infirmary cases which helps to ensure cost-effective occupancy levels for the Project. Being LGU-owned, MCH has access to development funds which improve the Project's prospects for generating a positive return on the capital invested in the Project.

The competitive environment presents many challenges. As a government-owned hospital, MCH is required to adhere to public procurement processes which can often be costly and inefficient. MCH will face competition from new entrants (e.g., specialist clinics).

Derived mostly from the indigent sector who rely solely on Philhealth coverage to pay for their hospital bills, the Project's revenues will essentially be capped by the case rates promulgated by Philhealth, putting pressure on its cost management capabilities. Disease profiles may change over time and render specialized equipment obsolete, as well as require new capital investments to ensure hospital services are relevant to the market. Additional capital may also be required if the Philhealth reimbursement process is improperly handled. Lastly, MCH's long term viability rests on sustained implementation of universal health care, and the ability of LGU Matalom to underwrite Philhealth premium payments on behalf of its indigent sector.

To position itself against these challenges, MCH must manage its capital requirements well. It will need to minimize front-end investments by maximizing the DOH grant component of its Project funding, and avail of the lending facilities provided by development financial institutions. MCH will need to devote adequate resources towards effectively managing the Philhealth reimbursement process to minimize working capital being tied up in idle receivables. Outsourcing arrangements for the pharmacy, laboratory and diagnostics, and other ancillary operations of the Hospital should be explored.

MCH must contain its cost structure by achieving scale quickly by taking advantage of its natural market position as a referral facility and working with LGU Matalom to proactively address changes in the market's disease profile through adjustments to its service capabilities. It should pursue cooperative arrangements with the

private sector to acquire the latter's expertise and help it achieve operating efficiencies. MCH must adhere to a disciplined capital cost budget process to ensure that funds from operations are continually allocated towards maintaining the Hospital's operating standards.

To enhance its viability, MCH will need to upstream excess cash flow to LGU Matalom for the express purpose of helping sustain the latter's Philhealth premium payments.

Financials: The Project will generate average yearly revenues of P8.6million net of subsidies during its first Five years of operation. Net cash flows will average P1.3 million after personnel costs, other operating costs and capital costs. The Project requires an equity commitment of P5.5 million (from General Fund) which is recoverable within fifth year of the Project operation

II. INTRODUCTION

This Business Plan has been prepared to assess the financial feasibility of the proposed establishment of the Matalom Community Hospital. To be owned by the Municipal Government of Matalom, MCH is currently operating and planned to become self-sufficient in 2027. The Project is estimated to cost P15 million because of existing facilities and infrastructures, and will be operated as a 30-bed infirmary hospital with service enhancements catering specifically to the characteristics of the main catchment area. LGU has the option to outsource the management of MCH through a Public-Private Partnership (PPP), and in so doing, acquire the level of expertise it needs to achieve performance standards beyond levels it has been able to provide in the past. PPP is also being undertaken as part of LGU's efforts to strengthen the governance structure of the health sector of the Matalom and to improve the health conditions of its citizens particularly in the areas of maternal and child health, control of communicable diseases, and basic health care. This study assumes that LGU will implement universal healthcare on a Municipal-wide basis; as such, it will assume the cost of medical treatments of its indigent population by underwriting their premium payments to the Philippine Health Insurance Corporation (Philhealth). To enhance the viability of the Project, LGUs will work closely with Philhealth to optimize Philhealth availment rates within the Province, and to streamline the reimbursement process for Philhealth-covered transactions. This Business Plan has been written as an assessment of the financial feasibility of the Project from the perspective of the LGU as an ownerinvestor providing capital to the Project, net of any grants that may be obtained from the National Government (NG) through the Department of Health (DOH).

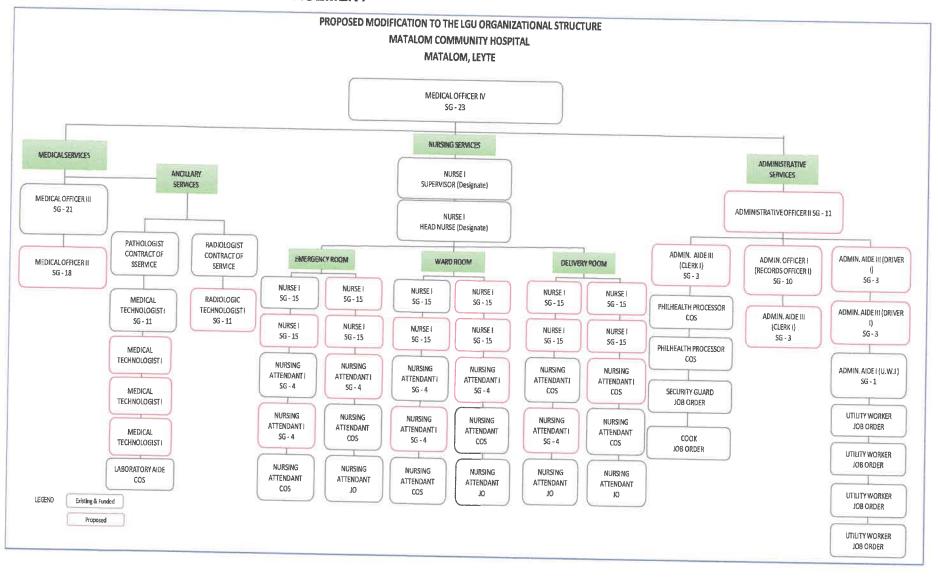
III. MARKET ANALYSIS

Providing the basic Health needs of the people does not guarantee the success of a Community Hospital. Why? It is because a lot of factors exist that contributes either to the downfall or success of such project. Understanding one's target market enables the entrepreneur to provide the Quality Health services that satisfies the need of its consumers. Community Hospitals are expected to cater the basic Health needs of people from different ages and from all walks of life therefore services must be of good quality and reasonable price. If we are to patronize our own Community Hospital we can expect good quality services with affordable prices. The existence of competitors encourages business operators to do their best in order to keep their customers. Matalom is more than capable of providing what is needed by its people therefore the best thing to do is offer the best health services with 24/7 health professionals availability and make it affordable to prevent people from going somewhere else.

A Community should be accessible, clean and have a 24/7 Doctors to attract more patients. The LGU with its aim to have accessible and cheap community Hospital that improve the health of its constituents wish to rebuild and improve the facilities of our existing Hospital, complete laboratory equipment manned with competent health professionals, additional hospitals rooms and beds as well as improved birthing facilities.

The spin-off benefits of a community Hospital, from increasing access to quality and cheap Health services, enhanced health facility. But, perhaps most important is the way Community Hospitals serve as leading infirmary in the area for its people with different ailments and health problems. The success of Community hospital can be measured if it has a healthy and vibrant constituents.

IV. ORGANIZATION AND MANAGEMENT



V. PRODUCT LINES/SERVICES

- 1. HOSPITAL FEES
 - 1.1 HOSPITAL FEES IN-PATIENT
 - 1.2 HEALTH CERTIFICATE
 - 1.3 MEDICAL AND DENTAL FEES
 - 1.4 MEDICINE BILL/ PHARMACY

2. LABORATORY FEES

- 2.1 X-RAY
- 2.2 BLOOD TEST
- 2.3 URINALYSIS
- 2.4 ULTRASOUND
- 2.5 FECALYSIS
- 3. PHILHEALTH REIMBURSEMENT

VI. MARKETING AND SALES

It takes a lot to encourage people to support and patronize what is ours. Patients tend to ask for the availability of competent Medical Professionals and quality health services and facilities with affordable rates. That is why as an initiative, the LGU must hire adequate health professionals as well procure adequate equipment and facilities to cater the increasing health services needs of our constituents. The following are the marketing and sales Strategy of MCH:

- a. A comprehensive monitoring and maintaining of database of all pregnant women in the locality should be religiously prepared. These pregnant women must be encourage to avail the health services of community hospital. An incentive should be allocated to those pregnant women who completed the package;
- Indigent matalomnons who avail AICS from MSWO are encourage to avail the health services of community hospital first. Note: LGU Matalom allocates more or less 2,000,000.00 Financial Assistance for AICS, this amount can be a potential income of MCH;
- c. Resident Doctors should be available 24/7 to increase in patient revenues and lessen referral to other hospitals;

- d. Out-patient department should be enhanced and encourage patient to avail our laboratory services; and
- e. Maximized and improve the MCH Pharmacy

VII. FUNDING AND INVESTMENT

Matalom Community Hospital is currently operational and it serves the locality for a very long time. Considering that it is operated by a 3rd class municipality, it simply means financial appropriation and sources are basically not on large amount from its treasury to construct facilities of Matalom Community Hospital.

Despite of its financial difficulties, the Matalom Community Hospital was able to sustain its delivery to the public and have done gradual improvements primarily through the hard earned effort of our Local Government Unit and government agencies such as sustenance from the congressman, governor and other national government agencies. We can also gather some funds from private investors who are willing to meet the desired requirements for minimal continued delivery of services.

Another way to source funding is the PUBLIC PRIVATE PARTNERSHIP (PPP). It is a form cooperative undertaking with private sector to finance improvements of its health facilities and equipment.

LGU Matalom also is committed to allocate financial assistance or subsidies to fund the MOOE and Capital Outlays of Matalom Community Hospital.

On this manner, proceeds and net income can be safe guarded and eventually become self-sufficient in utilization for the MCH transformation and better public utility as well.

VIII. FINANCIAL SALES AND INCOME FORECASTING

Based on 2019 to 2021 Annual Revenue, Matalom Public Market was able to collect an average of Php 2,800,000.00. Unfortunately, this amount is lower compared to the P 6,500,000.00 Personal Services requirement of the Community Hospital.

Table 1

ANNUAL INCOME OF MATALOM COMMUNITY HOSPITAL (Health Cert, Hospital Fees, Medical Dental and lab, PHIC facilities Fees)

2019	Jan	feb	Mar	Apr	May	Jun	Jul	Aur			1	1	
Health Certificate	40,150.00	5,600.00	6,525.00					Aug	Sep	Oct	Nov	Dec	Total
Hospital Fees	162,358.00		16,195.00	1	1	1				2,250.00	12,300.00	7,975.00	112,150.0
Medical, Dental and Lab Fees	71,046.00		46,737.00	1			34,045.00			14,835.00	3,560.00	217,735.00	537,068.0
PHIC Facility FEEs	991.66		1,634,853.00	_	24,300,00	46,738.00	42,055.00	36,004.00	45,843.00	41,152.00	27,756.00	34,558.00	523,148.0
Total	274,545.66		1,704,310.00		77 452 00	67 704 44	150.00			525.00		617,415.00	2,253,934.6
		34,272,00	1,704,310.00	74,169.00	77,152.00	63,591.00	87,025.00	53,649.00	57,526.00	58,762.00	43,616.00	877,683.00	
2020	Jan	feb	Mar	Apr	May	Jun	Jul	Aus					
Health Certificate	44,050.00	5,625.00	4,650.00		1,950.00	1,410.00		Aug	Sep	Oct	Nov	Dec	Total
Hospital Fees	138,453.00	66,718.50	38,755.00	82,113.50	6,770.00		6,310.00	7,700.00	2,475.00	3,075.00	3,000.00	10,050.00	91,870.0
Medical, Dental and Lab Fees	59,554.00	12,965.00	20,680.00	20,500.00	11,275.00	13,494.00	164,768.00	58,350.00	52,425.00	40,500.00	4,900.00	50,655.00	717,902.0
PHIC Facility FEEs			20,000.00	20,300.00	11,273.00	24,872.00	42,682.00	14,950.00	11,105.00	26,410.00	29,700.00	30,495.00	305,188.0
Total	242,057.00	85,308.50	64,085.00	104 100 50	10 00r on	20 === 1	525.00	675.00	1,296,107.00				1,297,307.0
	- 12/22/180	03,300.30	04,063.00	104,188.50	19,995.00	39,776.00	214,285.00	81,675.00	1,362,112.00	69,985.00	37,600.00	91,200.00	2,412,267.0
2021	Jan	feb	Mar	Apr	May	Jun	to.l						
lealth Certificate	49,225.00	10,575.00	6,975.00	3,300.00	2,175.00		Jul	Aug	Sep	Oct	Nov	Dec	Total
los pital Fees	108,289.00	104,599.00	116,084.00	5,277.00		825.00	2,925.00	1,725.00	1,525.00	1,275.00	6,900.00	7,650.00	95,075.00
Medical, Dental and Lab Fees	71,590.00	10,070.00	13,397.00		6,507.00	3,800.00	108,872.00	15,690.00	137,405.00	78,310.00	22,460.00	19,700.00	726,993.00
HIC Facility FEEs		20,010.00	12,377,00	11,760.00	11,695.00	3,030.00	17,550.00	11,680.00	7,045.00	8,155.00	18,710.00	17,805.00	202,487.00
otal	229,104.00	125,244.00	120 400 00	365,235.00		336,738.00	100.00					803,998.00	1,506,071.00
	223,104.00	143,244.00	136,456.00	385,572.00	20,377.00	344,393.00	129,447.00	29,095.00	145,975.00	87,740.00	48,070.00		2,530,626.00

Table 2
FIVE-YEAR FORECAST/PROJECTION

			826,545.	1,801,878		
Services Offered	2021	2023	2024	2025		
Health Certificate	95,075.00	237,687.50	285,225.00			
Hospital Fees	726,993.00	1,817,482.50	2,180,979.00	328,008.75	492,013.13	541,214.44
Medical, Dental and Lab Fees	202,487.00	506,217.50	10.7	2,508,125.85	3,762,188.78	4,138,407.65
PHIC Facility FEEs	1,506,071.00	3,765,177.50	607,461.00	698,580.15	1,047,870.23	1,152,657.25
Pharmacy fees		500,000.00	4,518,213.00	5,195,944.95	7,793,917.43	8,573,309.17
General Fund Subsidy			750,000.00	1,125,000.00	1,687,500.00	2,531,250.00
Province of Leyte Subsidy	4,000,000.00	8,000,000.00	6,000,000.00	5,000,000.00		
Total	6,530,626.00	14,826,565.00	14,341,878.00	14,855,659.70	14,783,489.55	16,936,838.51
Expenditures	2021	2023	2024	2025		
Personnel Services	5,312,120.12	6,561,252.00	7,000,000.00		2026	2027
Maintenance and Other Operating Expenses	3,341,617.94	3,500,000.00		7,500,000.00	7,500,000.00	7,500,000.00
Capital Outlays	653,684.35	4,265,313.00	4,000,000.00	4,500,000.00	4,500,000.00	4,500,000.00
Total	100,000	14,326,565.00	2,591,878.00	1,730,659.70	1,095,989.55	2,405,588.51
		14,320,363.00	13,591,878.00	13,730,659.70	13,095,989.55	14,405,588.51
Net Cash flows						
Cash Inflows	2021	2023	2024	2025	2026	2027
Cash Outflows		14,826,565.00	14,341,878.00	14,855,659.70	14,783,489.55	16,936,838.51
Net cash		14,326,565.00 500,000.00	750,000.00	13,730,659.70	13,095,989.55	14,405,588.51



FEASIBILITY STUDY OF

MATALOM COMMUNITY HOSPITAL

MATALOM, LEYTE 2022

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I. INTRODUCTION

A Hospital Feasibility Study is the best way to find out the sources of patient flow to the Hospital. It comprises both a Market and Financial Analysis of the Project and is an essential aspect to be considered either while establishing a new hospital or a new facility in an existing hospital or expanding the existing hospital and enhancing its facilities.

A hospital is a health care institution providing patient treatment with specialized health science and auxiliary healthcare staff and medical equipment. It is typically funded by public funding, health organizations (for-profit or nonprofit), health insurance companies, or charities, including direct charitable donations.

Matalom Community Hospital (MCH) is wholly owned by the Local Government Unit of Matalom. Since it is a government owned hospital, it was established and created by law.

Further, hospitals have categories according to functional capacity – Level 1 to Level 3.

A Level 1 hospital shall have, as minimum, the following services and capacity:

- a. A staff of qualified medical, allied medical and administrative personnel headed by a physician duly licensed by the Professional Regulation Commission (PRC);
- b. Bed space for its authorized bed capacity in accordance with DOH Guidelines in the Planning and Design of Hospitals;
- c. An operating room with standard equipment and provision for sterilization of equipment and supplies;
- d. A post-operative recovery room;
- e. Maternity facilities, consisting of ward(s), room(s), and a delivery room exclusively for maternity patients and newborns;
- f. Isolation facilities with proper procedures for the care and control of infectious and communicable diseases as well as for the prevention of cross infections;
- g. A separate dental section/clinic;
- h. A blood station;
- i. A DOH-licensed secondary clinical laboratory with the services of consulting pathologist;
- j. A DOH-licensed Level 1 imaging facility with the services of a consulting radiologist; and
- k. A DOH-licensed pharmacy

A Level 2 hospital shall have as minimum, all of Level 1 capacity, including, but not limited to, the following:

- a. An organized staff of qualified and competent personnel with Chief of Hospital/Medical Director and appropriate board-certified Clinical Department Heads;
- b. Departmentalized and equipped with service capabilities needed to support board-certified/eligible medical specialists and other licensed physicians rendering services in the specialties of Medicine, Pediatrics, Obstetrics and Gynecology, Surgery, their sub-specialties and ancillary services;
- c. A general Intensive Care Unit (ICU) for critically ill patients;
- d. A Neonatal Intensive Care Unit (NICU);
- e. A High Risk Pregnancy Unit (HRPU);
- f. Provision of respiratory therapy services;
- g. A DOH-licensed tertiary clinical laboratory; and
- h. A DOH-licensed Level 2 imaging facility with mobile x-ray inside the institution and with capability for contrast examinations.

A Level 3 hospital shall have as minimum, all of Level 2 capacity, including, but not limited to, the following:

- a. Teaching and/or training hospital with accredited residency training program for physicians in the four (4) major specialties, namely: Medicine, Pediatrics, Obstetrics and Gynecology, and Surgery;
- b. A physical medicine and rehabilitation unit;
- c. An ambulatory surgical clinic;
- d. A dialysis unit;
- e. A blood bank;
- f. A DOH-licensed tertiary clinical laboratory with standard equipment/reagents/ supplies necessary for the performance of histopathology examinations; and
- g. A DOH-licensed level 3 imaging facility with interventional radiology.

Currently, MCH is classified as Level 1 hospital according to its functional capacity. It also categorized as a Primary Care Facility which only offers minimal or basic services including emergency service and provision for normal deliveries.

II. EXECUTIVE SUMMARY

Population of Matalom has been increasing with the greater percentage. In the 2020 Census conducted by PSA, the population of Matalom was 32, 586. Way back 1995 when Matalom Community Hospital formally opened, the population was only 28, 232 – an increase of 4, 324 or 86.64%. It has also become very difficult and quite challenging in providing health services due to manpower shortage. Thus, this arise a strong need of hospital with qualified and competent health personnel, modern technology and better infrastructure to provide matalomnons an efficient and best health care services.

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MCH on the other hand is the only hospital facility within Matalom and Bato jurisdiction; as such, it has the potential to operate with a lower cost structure than its competitors. Its location and service configuration make it an ideal referral facility for Infirmary cases which helps to ensure cost-effective occupancy levels for the Project. Being LGU-owned, MCH has access to development funds which improve the Project's prospects for generating a positive return on the capital invested in the Project.

III. OBJECTIVES AND AREA OF THE STUDY

A. Objectives

Community hospitals play an important role in providing healthcare services to patients in their local communities. They typically provide a wide range of services, including emergency care, inpatient and outpatient care, and surgery. While the exact number of patients a community hospital receives can vary depending on its size and location, it is typically in the thousands. Community hospitals typically have a staff of doctors, nurses, and other healthcare professionals who work together to provide care for their patients. Community hospitals are an important part of the healthcare system and provide a valuable service to their local communities.

The objective of the feasibility study is primarily to promote the development of high quality hospital services and community health care. This research aims to develop research in the field of health and hospital management in order to improve the efficiency of health care delivery systems. The goal of this study is to prepare for the proposed standardization, development, construction, and expansion of the indicated hospital in the Municipality of Matalom; incorporated in the proposed upgrading of the hospital.

B. Outcome / Output

Meeting the standard treatment is always a significant moment. By meeting the study's objectives, a modernization of the Matalom Community Hospital will be carried out. In terms of tasks and functionalities, efficiency will grow. These objectives result in effective treatment planning. Providing additional and standard staffing employees to achieve the appropriate level of care to accommodate the patients' demands. The improvement of Matalom Community Hospital enhances the quality of diagnoses, treatment decisions. and treatment monitoring. The use of equipment/technologies for admission, medical examinations, medical treatment, diagnosis, monitoring and for timely releasing of results will have a significant impact.

C. Area Of The Study

The research focuses on the staffing pattern, the community, modernization of facilities' equipment and establishments.

1. Staffing Pattern

Keeping a hospital running requires a great deal of organization and administration. There are several people who contribute to our care while we are in the hospital. Numerous people and services work together to provide patients with successful treatment in a hospital, from medical assessments and daily treatment to medication and catering. As of the moment there is a shortage of MCH Staff. The current staff are trying their best to accommodate the patients even if they are understaffed. A complete staffing pattern according to the hospital level will greatly increase the level of care and attention the staff can provide to their patients. The quality of services the MCH personnel can provide will increase.

2. Equipment and Buildings

Like other technologies, medical technology is constantly advancing. Thus, if we want to have the newest up-to-date technology in our facility, we'll need to upgrade that technology frequently. In general, the performance of newer medical tools will exceed that of older equipment, making the new technology a worthwhile investment. Because doing so can be a financial burden, we don't have to update our equipment right away when a new model comes out—but updating our equipment every so often will be an investment that serves us well in the long run. Another reason to invest in new medical equipment is the higher levels of efficiency new technology has to offer. Whether it's a new program for inputting patient information to our system or a machine to help perform a procedure, newer equipment will get the same job done more efficiently, leaving medical workers more time to complete other tasks and duties.

Older medical equipment is often more expensive to maintain and repair compared to newer equipment. Older equipment is more likely to break down and need additional maintenance, while newer equipment will only need routine maintenance. In the end, the cost of repairing an old piece of equipment may be enough to warrant replacing it instead of repairing it. Adding new, updated technology to our medical facility will allow us to offer procedures our facility previously wasn't equipped to perform. When we're able to offer new

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procedures and treatments, we'll also draw in more patients who are looking for these services. With updated, varied technology, our facility will be able to perform specialized treatments for more clients. For health care workers and facilities, patient care is of the utmost importance. A main reason why we should upgrade your medical equipment is to provide the best possible patient care. Upgraded equipment will allow us to serve our patients in new ways, completing both everyday tasks and complex procedures with efficiency, effectiveness, and experience.

3. Local and Neighborhood Area

Community Hospital play an important part in our community by providing healthcare services to individuals in their communities. They frequently provide a wide range of services, including emergency care, inpatient and outpatient care, and surgery. The exact number of patients admitted to a community hospital varies depending on its size and location, although it is frequently in the thousands. Community hospitals frequently include a team of physicians, nurses, and other healthcare workers who work together to serve their patients. Community hospitals are an important part of the healthcare system since they serve their local communities. Hospitals provide services to communities in a number of ways. They offer medical treatment to the sick and injured, as well as a variety of community health services. Hospitals create jobs and help the local economy. Local community health is a discipline of medicine that focuses on the health of a localized population. This vital field of public health involves programs to help local populations protect and improve their health, prevent the spread of infectious diseases, and prepare for natural disasters.

D. Project Cost Estimate

The Project will cost P15 million to construct and furnish. The allocation for medical equipment is based on DOH Infirmary estimates with an additional provision for equipment costs for the aforementioned service enhancements. Equity funding for the Project will be provided by LGU Matalom and MCH's revenues.

III. ORGANIZATIONAL AND MANAGEMENT ANALYSIS

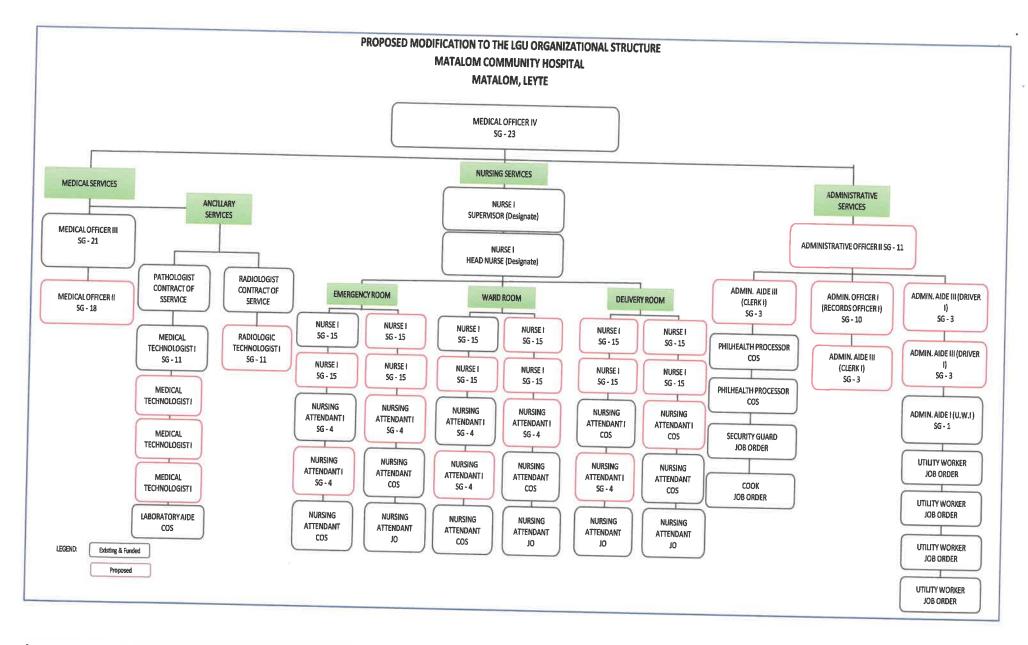
Every health facility have an adequate number of qualified, trained and competent staff to ensure efficient and effective delivery of quality services.

- 1. Every health facility shall have a duly license physician to oversee the clinical/medical operations of the health facility.
- The staff composition, particularly the Medical, Allied Medical, Nursing, Administrative and Finance Sections of the hospital, shall depend on the workload and the services being provided and other personnel qualification as may be required by DOH.
- 3. There shall be staff development and continuing education program at all levels of organization to upgrade the knowledge, attitude and skills of staff.

The new standards on organizational structure and staffing pattern of government hospitals took into consideration the following factors:

- a. Minimum DOH Licensing Requirements and Philhealth Accreditation Requirements;
- b. New hospital licensing category (Level 1, Level 2, Level 3 hospitals)
 based on Department of Health Administrative Order No. 2012-0012;
- c. Specialty Society Training Accreditation Requirements (particularly for Medical Staff);
 - d. Distribution of Medical Staff to cover the Outpatient Department, Emergency Room and Inpatient hospital areas; and
 - e. Health Human Resource Master Plan.

Level 1 and Level 2 hospitals shall have four (4) basic organizational units: the Office of the Chief of Hospital; Medical Service; Nursing Service; and Hospital Operations and Patient Support Service (HOPSS). Internal management functions are combined under one organizational unit, the HOPSS, which shall subsume both administrative and finance services.



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The general functions of the major organizational units are as follows:

a. Office of the Chief of Hospital/ Medical Center Chief

Shall be responsible for the overall management and administration of the hospital; formulation of policies, plans, programs and strategies to ensure implementation of health standards for the attainment of quality health care and high standards of clinical training for medical and allied medical personnel; and the day-to-day supervision and administration of the functional units.

b. Medical Service

Shall be responsible for providing quality inpatient and outpatient care and high standards of clinical training for medical and allied medical personnel; provision of ancillary and allied health services to patients; promotion of research activities; implementation of clinical resource management system; and advising and assisting the chief of hospital in the formulation and implementation of policies, plans and programs of the hospital.

c. Nursing Service

Shall be responsible for implementing nursing programs for total quality health care; providing nursing care to medical cases; and developing, coordinating and implementing relevant training programs for nursing personnel.

d. Hospital Operations and Patient Support Service (formerly Administrative Service)

Shall be responsible for the provision of administrative services relating to personnel management, administrative records management, property and supply management, general services, engineering, and security.

IV. MARKET ANALYSIS

The Municipal Infirmary also known as MCH operates with a 30 bed capacity. It has nine (9) regular employees; two (2) doctors, three (3) nurses, two (2) nursing attendants, one (1) medical technologist and one (1) ambulance driver. MCH also have twenty-three (23) support staffs; five (5) nurses, one (1) midwife, one (1) lab assistant, four (4) utility workers, one (1) security guard, one (1) cook/laundromat, two (2) Philhealth processors and eight (8) nursing attendants that caters to the health and welfare of the people in and outside the municipality. It has basic facilities such as the examination/treatment room, pharmacy, semi-private and private rooms, reception area and records.

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MCH envisions providing quality health services to the people of the municipality. Manned by trained professionals, the medical team aims to provide health services of the best quality and help address health concerns of the community. MCH being the only facility in town that offers health services has the potential to operate with a higher revenue than its (mostly private) competitors from neighboring towns. MCH's location and service configuration make it an ideal referral facility for Infirmary cases which helps ensure cost-effective occupancy. Being LGU-owned, MCH has access to development funds which improve the project's prospects for generating a positive return on the capital invested. The competitive environment presents many challenges. As a government-owned hospital, MCH is required to adhere to public procurement processes which can often be costly and inefficient. MCH will also face competition from new entrants (e.g., specialist clinics).

Derived mostly from the indigent sector who rely solely on Philhealth coverage to pay for their hospital bills, the project's revenues will essentially be capped by the case rates promulgated by Philhealth, putting pressure on its cost management capabilities. Disease profiles may change over time and render specialized equipment obsolete, as well as require new capital investments to ensure hospital services are relevant to the market. Additional capital may also be required if the Philhealth reimbursement process is improperly handled. Lastly, MCH's long term viability rests on sustained implementation of universal health care, and the ability of LGU Matalom to underwrite Philhealth premium payments on behalf of its indigent sector.

But, perhaps the most important is the way Community Hospitals serve as leading infirmary in the area for its people with different ailments and health problems. The success of a Community Hospital can be measured if it has healthy and vibrant constituents because just like any other Local Government Unit, to provide access to a quality healthcare system is one of the top most priorities of the Local Government Unit of Matalom.

A. Services and Product Lines

- 1. Hospital Fees
 - 1. Hospital Fees In-patient
 - 2. Health Certificate
 - 3. Medical and Dental Fees
 - 4. Pharmacy Billing
- 2. Laboratory Fees
 - 1. Blood Test
 - 2. Urinalysis
 - 3. Ultrasound
 - 4. Fecalysis
- 3. Philhealth Reimbursement

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B. Marketing and Sales

Due to circumstances and personal preferences, it is quite challenging for MCH to appeal to the public for possible admittance. Families and even patients themselves tend to ask for the availability of a competent medical professional in order for them to receive the best health care services expecting to be charged at affordable rates. When will the doctor arrive? Where is the doctor? These are just the two of the most common questions raised in Infirmaries like MCH. When one is available and present at all times, there will be no simultaneous search for where the doctor is. The very reason why possible admittance is less likely to happen in MCH is because of the absence of medical professionals. That is why as an initiative, the LGU must hire adequate health professionals as well procure adequate pieces of equipment and provide facilities to cater the increasing health services needs of the people in and outside Matalom. As an effective marketing strategy the Municipal Infirmary must:

Monitor and maintain records. Complications during pregnancy and delivery can only be prevented when appropriate mitigating measures are done but, only when comprehensive monitoring exists can it be known what mitigating measure to apply. This is the very reason why the Municipal Infirmary together with the Rural Health Unit must monitor and maintain records of all the pregnant women in the locality. A strengthened information drive in order to avoid more cases of teenage and unwanted pregnancies is also vital. Educating pregnant women the value of prenatal and other necessary procedures will help eradicate ignorance and help avoid further complications and even the loss of innocent lives. To promote the value of pre-natal and encourage pregnant women to undergo such procedures, an incentive to those who will complete the process awaits.

Availability of Financial Assistance. Due to financial scarcity, some would rather self-diagnose than see a medical professional that will give them the right prescription and diagnosis. This may temporarily save them money but it does not guarantee their health and safety. To prevent people from self-diagnosing and suffering from further ailments and complications, the Local Government Unit of Matalom must encourage its people especially the indigent ones to avail health services and worry less because financial assistance such as AICS (Assistance to Individuals in Crisis Situation) exists. Note: LGU - Matalom allocates more or less \$\frac{1}{2},000,000.00 \text{ for AICS, a potential income of MCH.}

Resident Doctors. Doctors and medical professionals should be available 24/7 to encourage more admittance that will eventually increase in patient revenues and lessen referral to other hospitals. The full time availability of these medical professionals will also save Indigent

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Matalomnons from hassle and additional expenses for MCH is likely to charge expensive rates.

Procurement of Machineries and Equipment. The enhancement of our outpatient department is vital in the increase of MCH's revenue. This can be done through procurement of additional and more advanced machineries and equipment and by hiring additional manpower. By providing services that charge cheaper rates compared to what private clinics in neighboring towns charge, we can expect that more people will patronize our Laboratory Services.

MCH Pharmacy. MCH seeking to increase profit may turn to its pharmacy to develop a new revenue stream. But, Hospital Pharmacies can only succeed and provide more revenue when its present resources are well utilized and when money is available to be invested in its improvements. Though it is often thought to be a high-cost center, the pharmacy can also be a great source of revenue which makes it worthy of investments.

V. FINANCIAL ANALYSIS

A. Annual Income Report

Matalom Community Hospital was established way back March 16,1995 and had played a very important role in ensuring the wellness on the health aspect for the people of Matalom up to the present. This data shows the flow of revenue from year 2019 to 2021 of Matalom Community Hospital (MCH) from the services and facilities it offered.

2019	Jan	Feb	March	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Total
Health Certificates	P40,150.00	₱5,600.00	P6,525.00	P4,125.00	P6,975.00	#9,050.00	₱10,775.00	P2,525.00	P3,900.00	P2,250.00	P12,300,00	P7.975.00	P112,150.00
Hospital Fees	P162,358.00	\$18,397.00	₱16,195.00	P24,020.00	P15.217.00	97,803.00	934,045.00	P15,120.00	₱7,783.00	\$14,835.00	P3,560,00	P217,735.00	
Medical, Dental and Lab Fees	P71,046.00	# 30,275.00	P46,737.00	P46,024.00	P54,960.00	# 46,738.00	P42,055.00	#36,004.00	9 45,843.00	P41,152.00	P27,756.00	#34,558.00	9537,068.00 9523,148.00
PHIC Facility Fees	₱991.66		P1,634,853.00				P150.00			P525.00		P617.415.00	P2,253,934,6
Total	9274,545.66	P54,272.00	\$1,704,310.00	# 74,169.00	P77,152.00	P63,591.00	P87,025.00	P53,649.00	957,526.00	P58,762.00	P43,616.00	P877,683.00	PZ,253,334.60
											- topozoto	. 011/400/00	
2020	Jan	Feb	March	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Total
Health Certificates	₱44,050.00	P5,625.00	P4,650.00	P1,575.00	P1,950.00	P1,410.00	P6,310.00	97,700,00	#2,475.00	P3,075.00	P3.000.00	₱10.050.00	991,870.00
Hospital Fees	P138,453.00	P66,718.50	P38,755.00	P82,113.50	P6,770.00	P13,494,00	P164.768.00	P58.350.00	P52,425.00	P40,500.00	P4,900.00	P50,655.00	
Medical, Dental and Lab Fees	9 59,554.00	₱12,965.00	P20,680.00	P20,500.00	P11,275.00	#24,872.00	P42,682.00	P14,950.00	₱11,105.00	926,410.00	P29,700.00	#30,495.00	9717,902.00 9305,188.00
PHIC Facility Fees							P525.00	P675.00	P1,296,107.00				## 202 002 0
Total	#242,057.00	P85,308.50	P64,085.00	₱104,188.50	P19,995.00	P39,776.00	P214,285.00	P81,675.00	P1,362,112.00	P69,985.00	P37,600.00	P91,200,00	P1,297,307.0
								1 100,01000	1 aproxystation	100,000.00	P37,000.00	P31,200.00	PARTICIPANT OF
2021	Jan	Feb	March	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Total
Health Certificates	9 49,225.00	₱10,575.00	P6,975.00	P3,300.00	P2,175.00	P825.00	P2,925.00	91,725.00	₱1,525.00	P1.275.00	P6.900.00	97,650.00	P95.075.00
Hospital Fees	P108,289.00	P104,599.00	₱116,084.00	P5,277.00	P6,507.00	#3,800.00	P108.872.00	P15,690.00	P137,405.00	P78,310.00			
Medical, Dental and Lab Fees	#71,590.00	₱10,070.00	P13,397.00	₱11,760.00	*11,695.00	P3,030.00	P17,550.00	P11,680.00	P7,045.00	P8,155.00	\$22,460.00 \$18,710.00	P19,700.00 P17,805.00	₱726,993.00 ₱202,487.00
PHIC Facility Fees				P365,235.00		₱336,738.00	₱100.00					8003.000.00	#4 FOC 074 O
Total	P229,104.00	P125.244.00	9136,456,00	9 385,572.00	P20,377.00	P344,393.00	P129.447.00	\$29,095,00	P145,975,00	P87.740.00	P48.070.00	P803,998.00 P849,153.00	*1,506,071.0

The total revenue of the MCH from the 3-year Annual Report sum-up to \$\mathbb{P}8,369,193.66\$. This proves that the MCH can play a key role for the LGU in both public service and revenue generating facility.

B. Five Year Forecast/Projection

,075.00 5,993.00 2,487.00	₱237,687.50 ₱1,817,482.50	₱285,225.00 ₱2,180,979.00	₱328,008.75 ₱2,508,125.85	P492,013.13	₱541,214.44
	₱1,817,482.50				₱541,214.44
		#2,180,979.00	#2 500 125 OF		
2 / 07 AA			L 2,200,123.03	₱3,762,188.76	P4,138,407.65
2,407.00	P506,217.50	₱607,461.00	₱698.580.15	\$1 047 970 22	
6,071.00	₱3,765,177.50				₱1,152,657.25
					₱8,573,309.17
		P750,000.00	₱1,125,000.00	₱1,687,500.00	\$2,531,250.00
	\$8,000,000.00	#6.000.000.00	₱5 000 000 on		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
0,000.00		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10,000,000.00		
0,626.00	₱14.826.565.00	\$14 341 979 OO	#14 OFF CF0 70		₱16,936,838,51
	0,000.00	6,071.00	6,071.00	6,071.00	6,071.00

Expenditures	2021	2023	2024	2025	2026	2027	
Personnel Services	₱5,312,120.12	₱6,561,252.00	₱7,000,000.00	₱7,500,000.00	A7 500 000 00		
Maintenance and other		7,,,,,,,,,, -	17,000,000.00	P7,300,000.00	₱7,500,000.00	₱7,500,000.00	
Operating expenses	₱3,341,617.94	₱3,500,000.00	₱4,000,000.00	* 4,500,000.00	₱4,500,000.00	P 4,500,000.0	
Capital Outlays	₱653,684.35	* 4,265,313.00	₱2,591,878.00	#1 730 ccn 70			
Total			7	₱1,730,659.70	₱1,095,989.55	₱2,405,588.5 1	
· otal		₱14,326,565.00	₱13,591,878.00	₱13,730,659.70	*13,095,989.55	P14.405.588 51	

Net Cashflows	2021	2023	2024	2025	2026	2027
Cash Inflow		*14,826,565.00	₱14,341,878.00	#44 OFF 500 TO		
Cash Outflow				₱14,855,659.70	₱14,783,489.55	₱16,936,838.5 :
Net Cash		₱14,326,565.00	₱13,591,878.00	₱13,730,659.70	₱13,095,989.55	P14,405,588.5
Met Cash		P500,000.00	₱750,000.00	\$1,125,000.00	₱1,687,500.00	\$2,531,250.00

The above data shows that the Matalom Community Hospital (MCH) will become self-sufficient given with all the service enhancements and additional amenities. Matalom Community Hospital will be sustainably able to continue its operation for the next succeeding years.

C. Funding And Investment

Matalom Community Hospital is operational and steadily providing its services and facilities for the people of Matalom for 27 years up to the present. Considering that it is operated by a 3rd class municipality, it simply means financial appropriation and sources are basically not on large amount. Despite of its financial difficulties, the Matalom Community Hospital was able to sustain its delivery to the public and has done gradual improvements primarily through the hard earned effort of our Local Government Unit and government agencies such as sustenance from the congressman, governor and other national government agencies. We can also gather some funds from private investors who are willing to meet the desired requirements for minimal continued delivery of services.

Through the statistical data we have provided that the Matalom Community Hospital (MCH) will be able to run sustainably for the next succeeding years. Another way to source funding is the PUBLIC PRIVATE PARTNERSHIP (PPP). It is a form cooperative undertaking with private

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sector to finance improvements of its health facilities and equipment. LGU Matalom also is committed to allocate financial assistance or subsidies to fund the MOOE and Capital Outlays of Matalom Community Hospital. On this manner, proceeds and net income can be safe guarded and eventually become self-sufficient in utilization for the MCH transformation and better public utility as well.

In this sense, Matalom Community Hospital (MCH) will be able to operate continuously and be able to provide its services and facilities to the people of Matalom and its neighboring Municipalities. It will play a key role for the LGU for its public service aspect as well as providing the necessities for safe guarding and a sanative to its constituents.

VI. CONCLUSIONS

We have generally associated hospitals with illness but the case is the opposite of wellness. In other words, we visit the hospital all sick and leave healthy or better than before. Moreover, hospitals play an essential role in offering consultation services to patients and making the population healthier.

Quality improvement is directly related to the service delivery approach, level of patient satisfaction, efficiency and outcome. A successful program always incorporates principles of quality improvement to achieve an enhanced level of performance and a successful organizational healthcare system.

Improving patient care has become a priority for all health care providers with the overall objective of achieving a high degree of patient satisfaction. Greater awareness among the public, increasing demand for better care, keener competition, more health care regulation, the rise in medical malpractice litigation, and concern about poor outcomes are factors that contribute to this change.

The quality of patient care is essentially determined by the quality of infrastructure, quality of training, competence of personnel and efficiency of operational systems. The fundamental requirement is the adoption of a system that is 'patient oriented'. Existing problems in health care relate to both medical and non-medical factors and a comprehensive system that improves both aspects must be implemented. Health care systems in developing countries face an even greater challenge since quality and cost recovery must be balanced with equal opportunities in patient care.

VII. RECOMMENDATIONS

Effective management is the key to success for any business and the same can be said for the management of hospital systems. Here we explore the top nine management tips to running your hospital successfully.

1) Training of Hospital Staff

New staff introduced to the hospital must be competent hospital managers. Hospital staff should be encouraged to participate in ongoing training to enhance their skills. Current staff should, therefore, be trained in both management and technology (e.g. cloud image storage), with training also being offered in-house.

2) Use Innovative Technology

Automation of hospital systems can be beneficial to everybody involved. For example, the use of DICOM or cloud image storage can reduce the number of staff required and eventually lead to the more effective management of these areas of the hospital.

3) Accountability is Key

Staff should be accountable for their daily, weekly and monthly tasks. If every hospital staff member adheres to this and is answerable for their assigned tasks, including senior doctors, this produces better hospital management.

4) Establish a Managed Care System

A managed care system should already be implemented in hospitals, but its improvement can lead to the more efficient running of daily tasks. This includes punctuality of physicians, no delays for operations and well-managed stock for in-demand medicines.

5) Develop an Effective Communication Strategy

Communication can be a challenging area for hospitals, however, not addressing a lack of communication can create poor management. Communication channels should be customized according to the needs of the hospital.

6) Identify Vulnerable Areas

It is important to know where your hospital has been failing. It is only by identifying these areas that you can then focus on the areas that are vulnerable and work to strengthen them. The most qualified staff can then be applied to these areas to ensure effective management.

7) Keep Contact Details Updated

The information of hospital staff can change without the hospital knowing. Therefore, it is important to update the staff's contact details as out-dated information can affect the patient and demonstrates inefficient management.

8) Oversee Important Departments

Departments such as the emergency department and admissions may require more attention in your hospital. Good hospital management is making sure that the best people and systems are operating efficiently in these areas.

9) Remain Patient-Centered

Regardless of any innovative actions you plan to initiate in your hospital, the main priority should always be the patient. Communicative staff or the latest technology will not matter if the patient is suffering. Therefore, effective hospital management lies in remaining patient-centered.

Adding Of A Hospital Management System

What are Hospital Management Systems?

Hospital management systems (HMS) are software suites that provide private information and management features. These systems are customized to suit the needs of many different types of medical organizations, including hospitals, clinics, ambulatory surgical centers, and nursing homes.

Hospital management systems are the backbone of running any medical facility. An HMS enables staff to communicate with each other and share patient information securely across departments. A well-designed HMS improves workflows and procedures, increases patient safety, and keeps a hospital run smoothly.

These systems help administrators streamline everything from medical billing to inventory management, scheduling medical procedures, and assigning rooms to incoming patients. Hospital management systems provide administrators a centralized view of hospital operations so they can:

- Monitor hospital performance
- Measure hospital efficiency
- Manage food and supplies
- Schedule operating rooms

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- Identify safety concerns
- Streamline communications within and across departments
- Monitor regulatory compliance
- Manage utilities, waste, laundry
- Provide solutions for broken workflows
- Improve hospital efficiency

Hospital management systems must also access, create, and secure patient electronic medical records (EMR) and electronic health records (EHR). HMSs help hospitals with patient-focused functions, such as:

- Patient registration
- Admittance
- Insurance and billing
- Patient notifications
- Pharmacy
- Emergency care
- Secure personal health information (PHI)

Hospitals have many moving parts and handle life-threatening situations every day. Hospital management systems are critical for consistent procedure implementation, risk mitigation, strategic analysis for improvements, and efficiency.

A flexible and efficient Hospital Information Management System (HIMS) has a vital role in every hospital in case of a health system. Healthcare professionals are adapting to the latest technology developments to keep their IT infrastructure high. HIMS helps healthcare organizations to overcome any complicated challenges they face in the current healthcare industry.