



PHILIPPINES LIVING HiT UPDATE

4.2 Physical resources

4.2.1 Infrastructure

In the Philippines, hospitals and other health facilities are classified as either general or specialty and also according to their service capability. General health facilities provide services for all types of conditions. Specialty health facilities render clinical care and management, as well as ancillary and support services, for specific conditions. All hospitals have basic clinical, administrative, ancillary and nursing services. Variations in these services depend on the level of the hospital, as well as the hospital type (general or specialty).

Table 4.1 shows the number of hospitals and beds in the Philippines in 2005, 2007 and 2012, distributed according to levels of care. While the table shows that the total number of beds and hospitals has increased during this period, it is notable that from being almost equal in 2005, the number of hospital beds is now substantially more in the private sector than in government hospitals.,

Table 4.1. Distribution of hospitals and hospital beds in the Philippines

Hospitals		2005		2007		2012	
Beds		Public	Private	Public	Private	Public	Private
Level 1	Hospitals	336	465	333	439	372	390
	Beds	6094	6341	6516	5889	6942	5535
Level 2	Hospitals	271	397	282	405	266	428
	Beds	16237	11663	15175	11374	15485	13022
Level 3	Hospitals	26	113	32	169	45	209
	Beds	2982	8784	3881	13498	6563	18218
Level 4	Hospitals	62	85	54	67	46	68
	Beds	18357	16072	21569	14659	20458	15034
Total	Hospitals	695	1060	701	1080	728	1095
	Beds	43739	43397	47241	46744	49538	51809

Source: DOH, 2013..

Table 4.2 presents the distribution of hospitals by region. Comparing this with the 2005 data presented in the previous HiT (see Table 4.3 in the 2011 Philippines HiT¹), one can see that while there has been an increase in the absolute number of hospitals and beds, these gains are offset by the increase in the population in some regions, like ARMM and Region XII. Moreover, higher-level health-care facilities remain concentrated in urban centres, particularly the National Capital Region (NCR).

Table 4.2. Distribution of licensed government and private hospitals and beds by region, 2012

Region	Pop* (2010)	Level 1		Level 2		Level 3		Level 4		Total (Gov.)		Total (Pvt.)	
		Gov.	Pvt.	Gov.	Pvt.	Gov.	Pvt.	Gov.	Pvt.	Hosp.	Beds	Hosp.	Beds
NCR	11.9	3	26	16	60	7	17	24	33	50	16 844	136	12 271
CAR	1.6	25	7	11	7	1	2	1	1	38	1 678	17	717
I	4.7	18	35	15	25	7	17	1	1	41	2 102	78	2 114
II	3.2	25	23	16	20	1	6	1	0	43	1 888	49	1 337
III	10.1	12	26	38	85	2	29	4	5	56	3 714	145	5 410
IV-A	12.6	29	29	35	91	3	47	2	5	69	2 939	172	7 709
IV-B	2.7	24	21	14	5	0	3	0	0	38	1 685	29	591
V	5.4	33	29	13	17	4	11	2	1	52	2 408	58	1 811
VI	7.1	30	4	28	8	2	8	3	6	63	3 312	26	2 600
VII	6.8	36	14	20	13	2	11	2	7	60	2 752	45	3 693
VIII	4.1	32	12	14	9	3	5	0	2	49	2 165	28	1 001
IX	3.4	18	11	7	20	1	7	1	0	27	1 654	38	1 176
X	4.3	14	30	16	23	6	16	1	2	37	2 252	71	3 334
XI	4.5	10	55	4	17	2	14	2	4	18	1 087	90	3 807
XII	4.1	17	42	8	22	0	13	2	1	27	1 269	78	3 246
XIII	2.4	25	18	6	3	4	3	0	0	35	1 154	24	697
ARMM	3.3	21	8	5	3	0	0	0	0	26	635	11	295
National	92.3	372	390	266	426	45	209	46	68	729	49 538	1 095	51 809

*Population in millions (National Statistics Coordinating Board, data available at: http://www.nscb.gov.ph/secstat/d_popn.asp) ARMM: Autonomous Region in Muslim Mindanao; CAR: Cordillera Administrative Region; NCR: National Capital Region

Source: DOH, 2013.

1 The Philippines Health System Review, available at: http://www.wpro.who.int/philippines/areas/health_systems/financing/philippines_health_system_review.pdf

It is important to note that in subsequent updates the data may not be directly comparable to these data, because in 2012 Administrative Order No. 2012-0012 amended the classification criteria for hospitals, reducing the number of levels from 4 levels to 3 levels (DOH, 2012b). Under this new scheme, Level 1 hospitals provide emergency care and treatment, general administrative and ancillary services, primary care of prevalent diseases in the locality, and clinical services such as general medicine, paediatrics, obstetrics and non-surgical gynaecology, and minor surgery. Level 1 hospitals must have, at the minimum, an operating room, a recovery room, maternity facilities, isolation facilities, a clinical laboratory, an imaging facility and a pharmacy, all of which should be licensed by the Department of Health (DOH). Level 2 hospitals, on top of the requirements for Level 1, must be departmentalized and should have intensive care units, respiratory therapy services, a tertiary clinical laboratory and a Level 2 imaging facility with mobile X-ray equipment. Finally, Level 3 hospitals, in addition to the Level 1 and Level 2 requirements, must also be teaching/training hospitals with accredited residency training programmes in the four major specialties: medicine, paediatrics, obstetrics and gynaecology (OB-GYN), and surgery. Additionally, a Level 3 hospital must have a blood bank, an ambulatory surgery clinic, a dialysis facility, and Level 3 imaging and laboratory facilities (see Table 4.3).

Table 4.3. New classification of hospitals

Hospitals	Level 1	Level 2	Level 3
Clinical services for inpatients	Consulting specialists in all four major specialties (medicine, paediatrics, OB-GYN, surgery)	Departmentalized clinical services	Teaching/training plus accredited residency programme in all four major specialties
	Emergency and outpatient services	Respiratory unit	Physical medicine and rehabilitation unit
	Isolation facilities	General intensive care unit	
	Surgical/maternity facilities	High-risk pregnancy unit	Ambulatory surgical unit
	Dental clinic	Neonatal intensive care unit	
Ancillary services	Secondary clinical laboratory	Tertiary clinical laboratory	Tertiary clinical laboratory with histopathology
	Blood station	Blood station	Blood bank
	1st level X-ray	2nd level X-ray with mobile unit	3rd level X-ray
	Pharmacy		

Source: DOH, 2013.

Apart from hospitals, there are other health facilities, including primary care, custodial care, diagnostic and therapeutic, and specialized outpatient facilities (see Table 4.4).

Table 4.4. New classification of other health facilities

A: Primary care facility	B: Custodial care facility	C: Diagnostic or therapeutic facility	D: Specialized outpatient facility
• With inpatient beds (i.e. infirmary, birthing home) • Without inpatient beds (i.e. medical outpatient clinic, overseas foreign workers clinic, dental clinic)	• Psychiatry care facility • Drug abuse treatment and rehabilitation centre (DATRC) • Sanitarium/leprosarium • Nursing home	• Laboratory services (i.e. clinical laboratory, blood service facility, drug-testing laboratory, etc.) • Diagnostic/imaging centres	• Dialysis clinic • Ambulatory surgical clinic • In-vitro fertilization clinic • Radiology oncology facility • Oncology clinic

Source: DOH, 2012b.

Recent developments

In 2010, as one of the three major thrusts of *Kalusugang Pangkalahatan*, the universal health care agenda of President Benigno S. Aquino III, a Health Facilities Enhancement Program (HFEP) was launched, aimed at upgrading health facilities (i.e. health centres, rural health units, public health laboratories and other types of public health service establishments), and meeting the needs for infrastructure and equipment at the different levels of health care. Facilities covered by HFEP include those under the control of local governments as well as the DOH-retained hospitals. The main goal of HFEP is to improve the delivery of basic, essential and specialized health services by government facilities. As a sub-goal, the DOH aimed to increase the number of facilities that are accredited by the Philippine Health Insurance Corporation (PhilHealth) (DOH, 2011a).

Under HFEP, the capital outlay for the DOH doubled from Philippine pesos (Php) ² 3.2 billion in 2010 to Php 7.1 billion in 2011 (under the General Appropriations Act, GAA), underscoring the high priority the Government places on HFEP. From 2010 to 2013, through HFEP the DOH supported 4518 health-care facilities with funding totalling Php 33 billion. This support included: equipment or renovation for 1320 barangay health stations (BHS); renovation/expansion of 2367 rural health units (RHUs) in order to qualify for PhilHealth accreditation for the Outpatient Benefit Package, TB-DOTS and Maternal Care Package (i.e. the 3-in-1 package); modernization of infrastructure and/or equipment for 761 municipal, city and

2 On 1 January 2010, US\$ 1 = Php 46.

provincial hospitals and other health-care facilities (e.g. for the Philippine National Police and Armed Forces); and modernization for 70 DOH hospitals in order to quality as higher-level referral facilities. HFEP targets through 2016 are shown in Table 4.5 (DOH, 2011a). If these goals are met, the DOH expects to achieve an improved bed-to-population ratio (currently 1.04 per 1000 people).

Table 4.5. Annual targets of the Health Facilities Enhancement Program (HFEP)

Facility	Inventory as of 2010	Implemented 2010–2012	2013	2014	2015	2016
Barangay health units	16 308	1 026	297	612	2 200	2 416
Rural health units	3 074	1 246	1 622	768	250	249
Level 1 hospital	374	289	56	51	10	10
Level 2 hospital	268	294	171	35	6	6
Level 3 hospital	42	29	24	NA	3	3
Level 4 hospital	50	6	8	NA	3	3
Department of Health hospitals	70	45	54	NA	1	1
Others	NA	31	30	NA	1	1
Public–private partnership (PPP) projects	NA	25	NA	NA	NA	NA
Total	19 916	2 991	2 262	1 532	2 474	2 689

Source: DOH, 2012b.

References

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