

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

TWENTIETH CONGRESS
First Regular Session

HOUSE BILL NO. **119**



Introduced by: REP. MARCELINO C. LIBANAN

AN ACT

CONVERTING THE EASTERN SAMAR PROVINCIAL HOSPITAL IN THE CITY OF BORONGAN, PROVINCE OF EASTERN SAMAR, INTO A TERTIARY LEVEL HOSPITAL AND REGIONAL MEDICAL TRAINING CENTER TO BE KNOWN AS THE "EASTERN SAMAR TRAINING AND REGIONAL MEDICAL CENTER", UPGRADING ITS FACILITIES AND BED CAPACITY TO THREE HUNDRED (300) AND APPROPRIATING FUNDS THEREFOR

EXPLANATORY NOTE

The Eastern Samar Provincial Hospital (ESPH) in Borongan City is the only DOH-licensed 100-bed Level 2 hospital in the Province of Eastern Samar and it is maintained and managed by the Provincial Government of Eastern Samar. It was established in May 1952 as the Borongan Emergency Hospital and has been the core referral hospital of the Province.

Since its establishment, ESPH has not been upgraded despite the increasing population in the Province of Eastern Samar which has grown to 477,168 as per 2020 Census. While the province has ten (10) government hospitals (including ESPH) that provides 150 in-patient beds and ten (10) Private Hospitals and Clinic that provides 268 beds, or a total of 418 beds, the same is still below the DOH recommended bed to population ratio which is 1 bed:1000 population.

Further, ESPH's service capability is comparatively limited, thus compelling them to send patients to the region's apex hospital, the Eastern Visayas Medical Center located in Tacloban City. It is worthy to note that Tacloban City in Leyte is about 190 kilometers away from Borongan City and will require a travel time (by land) of approximately four (4) hours. This logistical distance exacerbates the burden of patients and their families as this adds to the medical expenses they have to defray, and the stress brought about by the hassle of a long distance travel.

As per report by ESPH, there are several hospital service gaps that can be only addressed through the upgrading of the hospital. The following are the hospital service capability gaps:

1. Only two (2) Operating rooms can operate at the same time and most patients, particularly difficult cases like the Neurosurgical cases, cancer surgeries, head and neck surgeries, hepatobiliary surgeries, minimally invasive surgeries and complicated gynecological cases are all being referred to the level 3 hospitals in Tacloban City.
2. Critical units like the ICU, NICU, Surgical ICU are limited to two (2) mechanical vents at a time.

3. The hospital can only provide basic laboratory examinations. For histopathologic examination, these are sent to the apex hospital for processing hence, the need to improve Bacteriology and Histopathology.
4. Radiologic Imaging services is also limited to basic X-rays, Ultrasound and CT scan.

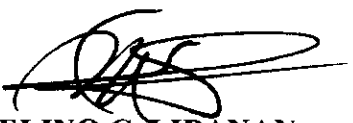
Averagely, ESPH admits nearly 7,000 patients per year, more than 15,000 out patients and more than 7,000 patients seen at the emergency room. Due to the aforementioned hospital services capability gap, ESPH refers an average of 165 patients per year to higher level hospitals. And despite the limitations of ESPH, an average of 400 patients per year are being referred to them from other health facilities all over the province.

In upgrading the nearly seventy-two (72) year old hospital, it will finally have the facilities and equipment and the manpower and personnel it will need to revitalize its operations and fill in the service capability gaps to better serve the people of Eastern Samar and become the next premier government hospital in the country. Considering that Eastern Samar has consistently been perturbed with infectious diseases, degenerative and lifestyle related diseases, and diseases from urbanization and industrialization, the conversion of ESPH into the Eastern Samar Regional Training and Medical Center will essentially assist the government in managing these diseases.

In addition, this Representation has filed House Bill No. 9872 entitled, "An Act Establishing a College of Medicine in the Eastern Samar State University (ESSU) in the City of Borongan, Province of Samar, to be known as the "Eastern Samar State University College of Medicine", and Appropriating Funds Therefor" which seeks to address the shortage of qualified medical professionals "by training a new generation of competent and compassionate healthcare practitioners, fostering local talent to serve the specific needs of our community". The conversion of the ESPH into a tertiary level hospital and a training medical center will complement the proposed establishment of a College of Medicine in ESSU in Borongan City as this will be the primary health institution where medical students and other students whose courses are related to health service such as nursing, medical technology, radiology, pharmacy, can undergo their training/internship. The conversion into a training hospital will also draw doctors to acquire their residency or their specialization/sub-specialization therein, which will aid in boosting the number of doctors in Eastern Samar and in Region VIII in general to bridge the gap on the need of doctors in the Province and in the Region.

The same measure was filed during the 19th Congress and was referred to the Committee on Health where it was approved by the members present during a public hearing.

In view of the foregoing, the immediate approval of this bill is earnestly sought.


MARCELINO C. LIBANAN
Representative, 4Ps Party-list

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Be it enacted by the Senate and the House of Representatives of the Philippines in Congress assembled:

SECTION 1. The Eastern Samar Provincial Hospital in the City of Borongan, Province of Eastern Visayas, is hereby converted into a tertiary level hospital and regional training center to be known as the Eastern Samar Regional Training and Medical Center, which shall be under the direct control and supervision of the Department of Health (DOH).

SECTION 2. The bed capacity of the Eastern Samar Regional Training and Medical Center shall be increased from one hundred (100) to three hundred (300) beds. Any future increase in bed capacity shall be consistent to its hospital development plan to be prepared by the DOH.

SECTION 3. The existing professional health care services and facilities of the Eastern Samar Regional Training and Medical Center shall also be upgraded to conform with and be commensurate to the increase in bed capacity as provided for in Section 2 hereof.

SECTION 4. The existing workforce of the Eastern Samar Regional Training and Medical Center including doctors, nurses, medical technologists, dieticians, laboratory technicians and all other support personnel, shall be increased correspondingly. The Secretary of Health shall, after consultation with the Chief of the Eastern Samar Regional Training and Medical Center, and in coordination with the Secretary of Budget and Management (DBM) and the Commissioner of the Civil Service Commission (CSC), determine the additional new positions to be created and filled up in the plantilla of the Eastern Samar Regional Training and Medical Center.

SECTION 5. The DBM shall, in consultation with the DOH and Provincial Government of Eastern Samar, determine the cost of the renationalized functions relative to the operations of the Eastern Samar Regional Training and Medical Center from the latter's current National Tax Allotment (NaTA) and thereafter cause the allocation of the same to the DOH chargeable against the Internal Revenue Allotment (IRA) of the Provincial Government of Eastern Samar.

SECTION 6. The Secretary of Health shall immediately include in the Department's program the implementation of this Act and the funding necessary for the operations of the Eastern Samar Regional Training and Medical Center shall be included in the annual General Appropriations Act.

SECTION 7. If any provision or part of this Act is declared unconstitutional, the parts not affected thereby shall remain force and effect.

SECTION 8. All laws, executive orders, rules and regulations and other issuances. Inconsistent with this Act are hereby remain in force and effect.

SECTION 9. This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.

Approved,