



# Health Services

## **Mandates:**

1. Implementation of basic health services;
2. Develop plan and strategies on health programs and projects;
3. Execute all public health laws, ordinances and regulations;
4. Conduct sanitary inspections of all business establishments selling food items or providing accommodations such as hotels, motels, lodging houses, pension houses and the like in accordance with the sanitation code; and
5. Linkaging to other government agencies and NGO's involved in the promotion and delivery of Health Services

## **VISION:**

Healthy and productive people of Kasibu

## **MISSION:**

**Provision of comprehensive equitable health care utilizing appropriate** technology that is available, cost effective and client responsive through participatory governance.

## I. PROVISION OF OUT-PATIENT CONSULTATION SERVICES

This provides medical assistance to any individual who comes with general body complaints. This aims to diagnose and treat illnesses.

<b>Office or Division</b>	Municipal Health Office/Out Patient Consultation Services			
<b>Classification</b>	Simple			
<b>Type of transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Referral Slip (if applicable)			Barangay Health Station (BHS) Other referring Health Facilities	
<b>CLIENTS STEP</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Register in the log book	1. Provide Logbook	None	1 minute	<i>Fatima D. Binwag</i> Midwife-I
	2. Retrieve patient's Individual Treatment Record (ITR) or accomplish if new client.	None	5 minutes	<i>Fatima D. Binwag</i> Midwife-I
	3. Take vital signs and medical history of client.	None	10 minutes	<i>Fatima D. Binwag</i> Midwife-I
2. Proceed to consultation room	4. Assess client	None	10 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer
3. Proceed to designated room	5. Instruct client to proceed to designated room for the needed services:	None	1 minute	<i>Elizabeth M. Joaquin</i> Municipal Health Officer
<ul style="list-style-type: none"> <li>Treatment Room</li> </ul>	<ul style="list-style-type: none"> <li>Provide treatment/procedure</li> </ul>	None	30 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer

<ul style="list-style-type: none"> <li>Laboratory Room</li> </ul>	<ul style="list-style-type: none"> <li>Provide request form</li> </ul>	(Please see laboratory services)	2 minutes	<i>Melita E. Dalmacio</i> Midwife-I
<ul style="list-style-type: none"> <li>Dental Room</li> </ul>	<ul style="list-style-type: none"> <li>Send client to the Dental Room</li> </ul>	( Please see Dental services)	1 minute	<i>Melita E. Dalmacio</i> Midwife-I
<ul style="list-style-type: none"> <li>Other Diagnostic Centers</li> </ul>	<ul style="list-style-type: none"> <li>Accomplish referral slip and instruct client.</li> </ul>	None	3 minutes	<i>Melita E. Dalmacio</i> Midwife-I
4. Return to the examining physician with diagnostic results.	6. Provide diagnosis and management	None	3 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer
5.Proceed to the pharmacy with Individual Treatment Record (ITR).	7.Provide prescribed medicines or prescription receipt.	None	1 minute	<i>Melita E. Dalmacio</i> Midwife-I
	8.Give instructions on dosage, frequency and duration of medication.	None	3 minutes	<i>Melita E. Dalmacio</i> Midwife-I
	9.Provide health teachings and counselling if necessary.	None	5 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer  <i>Melita E. Dalmacio</i> Midwife-I
	10. Record services given in the ITR and daily patient's Log Book.	None	3 minutes	<i>Fatima D. Binwag</i> Midwife-I
<b>TOTALI</b>		None	1 hour and 30 minutes	

## **II. PROVISION OF NATIONAL IMMUNIZATION PROGRAM AND SERVICES**

**Description:** To immunize all Infant against 9 immunizable diseases (1 BCG, Hepa B Mono, 3 Penta5, 3 OPV, 1 IPV, 3 PCV, 2 Measles) before reaching 1 year of age.

<b>Office or Division</b>	Municipal Health Office			
<b>Classification</b>	Simple			
<b>Type of transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	0-11 months old children			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Mother and Child Book		Barangay Health Station (BHS)		
<b>CLIENTS STEP</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Register in the Log Book	1. Provide Logbook	None	1 minute	<i>Fatima D. Binwag</i> Midwife-I
2. Present Mother and Child Book for new client.	2. Retrieve Individual Treatment Record (ITR)	None	2 minutes	<i>Fatima D. Binwag</i> Midwife-I
	3. Review the mother and child book for regular client. Prepare new Mother and Child book for new client.	None	5 minutes	<i>Fatima D. Binwag</i> Midwife-I
	4. Get vital signs, height/length and weight. Plot and Record findings.	None	8 minutes	<i>Fatima D. Binwag</i> Midwife-I
3. Proceed to the vaccination area/room	5. Instruct mother/guardian to go to the vaccination area/room	None	3 minutes	<i>Fatima D. Binwag</i> Midwife-I
	6. Provide vaccination services.	None	3 minutes	<i>Mary P. Atenyao</i> Midwife-I <i>Roselyn O. Andrada</i>

				Midwife-I
4. Proceed to the observation area	7. Observe infant for atleast 30 minutes.	None	30 minutes	Mary P. Atenyao Midwife-I Roselyn O. Andrada Midwife-I
	8. Provide instructions.		5 minutes	Mary P. Atenyao Midwife-I Roselyn O. Andrada Midwife-I
	9. Record services given.		3 minutes	Mary P. Atenyao Midwife-I Roselyn O. Andrada Midwife-I
<b>TOTAL</b>		None	1 hour	

## **II. PROVISION OF FAMILY PLANNING SERVICES**

**Description:** The office provides counselling and supplies for artificial family planning methods and information and education for natural methods.

<b>Office or Division</b>	Municipal Health Office/Out Patient Consultation Services			
<b>Classification</b>	Simple			
<b>Type of transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	15-49 years old women			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Referral Slip or Family Planning (FP) Card		Barangay Health Stations (BHSs)		
<b>CLIENTS STEP</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Register in the Log Book	1. Provide Log Book	None	1 minute	Fatima D. Binwag Midwife-I

2. Present Family Planning Patient's Card or referral form	2. Retrieve Individual Treatment Record and Family Planning (FP) Form 1.	None	1 minute	<i>Fatima D. Binwag</i> Midwife-I
3. Proceed to consultation room	3. Assess client	None	30' minutes	<i>Fatima D. Binwag</i> Midwife-I
	4. Provide Family Planning counselling	None	30 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer  <i>Jesica M. Palmes</i> Nurse-III  <i>Fatima D. Binwag</i> Midwife-I
	5. Provide Family Planning (FP) method chosen as follows: <ul style="list-style-type: none"> <li>• Pills</li> <li>• Condom</li> <li>• DMPA injection</li> <li>• Intradermal Insertion</li> <li>• Intrauterine Insertion</li> <li>• Stantard Days Method</li> <li>• Lactation Amenorrhea Method (LAM)</li> </ul>	None	5 minutes 5 minutes 10 minutes 30 minutes 1 hour 30 minutes 30 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer  <i>Fatima D. Binwag</i> Midwife-I  <i>Melita E. Dalmacio</i> Midwife-I
	6. Provide Instructions.	None	5 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer  <i>Fatima D. Binwag</i> Midwife-I

				<i>Melita E. Dalmacio</i> Midwife-I
4. Get updated Family Planning Card.	7. Record services given.	None	2 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer  <i>Fatima D. Binwag</i> Midwife-I  <i>Melita E. Dalmacio</i> Midwife-I
<b>TOTAL</b>		None	2 hour and 15 minutes	

#### **IV. MATERNAL AND CHILD HEALTH SERVICES**

**Description:** Provision of prenatal, delivery, post-partum and newborn care and services.

<b>Office or Division</b>	Municipal Health Office			
<b>Classification</b>	Simple			
<b>Type of transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	Pregnant, Post-partum and Lactating women and the Newborn			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Mother and child baby book Referral form			Barangay Health Station or other health facilities Barangay Health Station or other health facilities	
<b>A. PROVISION OF PRENATAL SERVICES</b>				
<b>CLIENTS STEP</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Register in the Log Book	1. Provide Log Book	None	1 minute	<i>Fatima D. Binwag</i> Midwife-I

2. Present Mother and child baby book and referral form	2. Retrieve Individual Treatment Record	None	2 minutes	<i>Fatima D. Binwag</i> Midwife-I
	3. Review mother and child book and referral slip	None	5 minutes	<i>Fatima D. Binwag</i> Midwife-I
3. Proceed to designated room/facility.	4. Instruct client to go to the designated room/facility as needed:	None	1 minute	<i>Fatima D. Binwag</i> Midwife-I
<ul style="list-style-type: none"> <li>• Consultation room</li> </ul>	<ul style="list-style-type: none"> <li>• Provide prenatal services.</li> </ul>	None	45 minutes	<i>Fatima D. Binwag</i> Midwife-I
<ul style="list-style-type: none"> <li>• Laboratory room</li> </ul>	<ul style="list-style-type: none"> <li>• Provide accomplished laboratory request</li> </ul>	(Refer to laboratory services)	3 minutes	<i>Fatima D. Binwag</i> Midwife-I
<ul style="list-style-type: none"> <li>• Dental room</li> </ul>	<ul style="list-style-type: none"> <li>• Give Individual Treatment Record and Mother and Baby Book.</li> </ul>	(Refer to laboratory services)	1 minute	<i>Fatima D. Binwag</i> Midwife-I
<ul style="list-style-type: none"> <li>• Other diagnostic facility</li> </ul>	<ul style="list-style-type: none"> <li>• Provide accomplished referral form</li> </ul>	None	3 minutes	<i>Fatima D. Binwag</i> Midwife-I
4. Proceed to the examining physician with diagnostic results.	5. Diagnose and manage client.	None	10 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Office
5. Proceed to the pharmacy and give Individual Treatment Record.	6. Provide prescribed medication and instructions.	None	2 minutes	<i>Melita E. Dalmacio</i> Midwife-I
6. Get updated mother and child book.	7. Record services given.	None	3 minutes	<i>Melita E. Dalmacio</i> Midwife-I
Total		None	1 hour and 17 minutes	
<b>B. DELIVERY, IMMEDIATE POST-PARTUM AND NEWBORN CARE AND SERVICES</b>				



1.Register in the Log Book	1. Provide Log Book	None	1 minute	<i>Fatima D. Binwag</i> Midwife-I
2.Present Mother and Child Booklet and referral slip	2. Retrieve Individual Treatment Record (ITR).	None	2' minutes	<i>Fatima D. Binwag</i> Midwife-I
	3.Review Mother and Child Booklet and Referral Slip and.	None	5 minutes	<i>Fatima D. Binwag</i> Midwife-I
3. Proceed to Labor Room.	4. Assess mother in labor.	None	15 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer  <i>Fatima D. Binwag</i> Midwife-I
	5. Observe and record progress of labor until fully dilated.	None	5 hours	<i>Elizabeth M. Joaquin</i> Municipal Health Officer <i>Fatima D. Binwag</i> Midwife-I
4. Proceed to the delivery room	6.Assists mother to the delivery room	None	3 minutes	<i>Fatima D. Binwag</i> Midwife-I
	7. Provide delivery care and services	PHP2,000	1 hour	<i>Elizabeth M. Joaquin</i> Municipal Health Officer  <i>Ernest Ramon G. Malanta</i> Nurse-II  <i>Fatima D. Binwag</i> Midwife-I
	8.Bring patient to the ward.	None	3 minutes	<i>Ernest Ramon G. Malanta</i> Nurse-II  <i>Fatima D. Binwag</i> Midwife-I

	9. Provide immediate post-partum and newborn care and services.	None	24 hours	<i>Elizabeth M. Joaquin</i> Municipal Health Officer  <i>Ernest Ramon G. Malanta</i> Nurse-II <i>Fatima D. Binwag</i> Midwife-I  <i>Melita E. Dalmacio</i> Midwife-I
	10. Prepare discharge summary.	None	5 minutes	<i>Fatima D. Binwag</i> Midwife-I
5. Proceed to the Municipal Treasury Office (MTO) for payment.	11. Give charge slip to the watcher and instruct to pay delivery and newborn care services in the Municipal Treasury office	None	1 minute	<i>Fatima D. Binwag</i> Midwife-I
6. Receive discharge summary.	12. Give discharge summary with instructions.	None	1 minute	<i>Fatima D. Binwag</i> Midwife-I
<b>TOTAL</b>		<b>PHP2,000</b>	<b>30 hours and 36 minutes</b>	

## **V. PROVISION OF DIRECT OBSERVE TREATMENT SERVICES**

**Description:** This service provides treatment for tuberculosis.

<b>Office or Division</b>	Municipal Health Office
<b>Classification</b>	Simple
<b>Type of transaction:</b>	G2C- Government to Citizen
<b>Who may avail:</b>	Patient with signs and symptoms of Tuberculosis

CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Referral Slip if any Diagnostic result: Gene-xpert, Chest x-ray, PPD etc.		Referring Facility Diagnostic Centers		
CLIENTS STEP	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Register in the Log Book	1. Provide Log Book	None	1 minute	<i>Fatima D. Binwag</i> Midwife-I
2. Present Individual Treatment Record with attached diagnostic result/s and referral slip if applicable.	2. Retrieve Individual Treatment Record.	None	2 minute	<i>Fatima D. Binwag</i> Midwife-I
	3. Take vital signs and weight measurement.	None	6 minutes	<i>Fatima D. Binwag</i> Midwife-I
3. Proceed to consultation room.	4. Review Individual Treatment Record and attached diagnostic result/s.	None	5 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer
	5. Assess and diagnose patient.	None	5 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer
	6. Explain disease and treatment course.	None	30 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer  <i>Jesica M. Palmes</i> Nurse-III
1. Proceed to Tuberculosis Room and receive medicines.	7. Provide medication with proper instructions.	None	5 minutes	<i>Jesica M. Palmes</i> Nurse-III
5. Receive Individual Treatment Card.	8. Record services given. Upload data to Integrated Tuberculosis Information System (IT IS)	None	20 minutes	<i>Jesica M. Palmes</i> Nurse-III

	9. Accomplish endorsement form and endorse patient to midwives assigned.	None	5 minutes	<i>Jesica M. Palmes</i> Nurse-III
<b>TOTAL</b>		None	1 hour and 19 minutes	

## VI. PROVISION OF DENTAL SERVICES

The Dental section performs on rendering professional diagnostic, preventive, promotive, and treatment services to patients. The Dental section is under the Municipal Health Office.

<b>Office /Division</b>	Municipal Health Office			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2C- Government to citizens			
<b>Who may avail</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1. Individual Treatment Record			Out Patient Department	
<b>CLIENTS STEP</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Register in the Log Book	1. Provide Log Book	None	1 minute	<i>Fatima D. Binwag</i> Midwife-I
2. Present Individual Treatment Record (ITR)	2. Assess patient.	None	10 minutes	<i>Maria Alyzza M. Bumolo</i> Dentist-II
3. Proceed to Treasury Office to pay needed dental service/s.	3. Provide charge slip.	None	1 minute	<i>Maria Alyzza M. Bumolo</i> Dentist-II
4. Return with Official Receipt	4. Provide dental care and services:			

	<ul style="list-style-type: none"> <li>• Tooth extraction including anesthesia per tooth</li> </ul>	PHP150	2 hours	<i>Maria Alyzza M. Bumolo</i> Dentist-II
	<ul style="list-style-type: none"> <li>• Prophylaxis (Cleaning)</li> </ul>	PHP200	2 hours	<i>Maria Alyzza M. Bumolo</i> Dentist-II
	<ul style="list-style-type: none"> <li>• Temporary Filling per tooth</li> </ul>	PHP50	1 hours	<i>Maria Alyzza M. Bumolo</i> Dentist-II
	<ul style="list-style-type: none"> <li>• Permanent Filling per tooth</li> </ul>	PHP250	2 hous	<i>Maria Alyzza M. Bumolo</i> Dentist-II
	7. Provide health education	None	5 minutes	<i>Maria Alyzza M. Bumolo</i> Dentist-II
8. Get Individual Treatment Record (ITR)	8. Record services given in the ITR and oral diagnosis form.	None	5 minutes	<i>Maria Alyzza M. Bumolo</i> Dentist-II
9. Proceed to the Pharmacy.	9. Instruct to go to the Pharmacy to get medicine.	None	1 minute	<i>Maria Alyzza M. Bumolo</i> Dentist-II
<b>TOTAL</b>		PHP600	2 hours and 23 minutes	

## **VII. PROVISION OF ENVIRONMENT AND HEALTH SANITATION SERVICES**

Description: This provides services on environment and sanitation services. This aims to lower the cases of water-borne diseases.

### **A. INSPECTION OF BUSINESS ESTABLISHMENTS**

<b>Office /Division:</b>	Municipal Health Office/Environment and Health Sanitation Services		
<b>Classification:</b>	Simple		
<b>Type of Transaction:</b>	G2B-Government to Business		
<b>Who may Avail:</b>	Business Sectors		
<b>CHECKLIST REQUIREMENTS</b>		<b>WHERE TO SECURE</b>	
None			

<b>CLIENT STEP</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Receive notice	1. Prepare and issue notice of inspection to business establishment/s.	None	24 hours	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
	2. Prepare mission order.	None	5 minutes	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
	3. Proceed to the site/business establishment.	None	24 hours	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
1. Assist the Sanitation Inspector	4. Perform the sanitation inspection procedure	None	30 minutes	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
	5. Discuss findings and provide recommendations.	None	30 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer  <i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I

2.Receive copy of inspection report with recommendations	6.Provide copy of inspection report.	None	1 minute	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
	7.Record data and file document.	None	3 minutes	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
<b>TOTAL</b>		None	49 hours and 9 minutes	

## B. WATER COLLECTION FOR BACTERIOLOGY TESTING

<b>Office /Division:</b>	Municipal Health Office/Environment and Health Sanitation Services			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2B-Government to Business G2C-Government to Citizen			
<b>Who may Avail:</b>	All, Business Sectors			
<b>CHECKLIST REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Water Sample Payment			Not applicable	
<b>CLIENT STEP</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Register in the Log Book	1. Provide Log Book	None	1 minute	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i>

				Sanitation Inspector I
2.Submit collected water sample	2.Check and label submitted water sample	None	3 minutes	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
3. Give payment	3.Collect payment to be submitted in the Provincial Treasury Office	None	1 minute	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
	4.Instruct client to come back for the result	None	7 days	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
	5.Submit the payment for the bacteriology testing fee in the Provincial Treasury Office	PHP200	(Provincial Treasury Office)	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
	6.Proceed to the Provincial Integrated Office	None	1 day	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
	7.Submit water sample and present Official Receipt	None	3 minutes	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I



4.Receive water bacteriology result with attached Official Receipt.	8. Explain result and provide recommendation if necessary. Give bacteriology result with official receipt.	None	10 minutes	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
	9.Recod services given.	None	3 minutes	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
<b>TOTAL</b>		PHP200	8 days and 21 minutes	

### C. ISSUANCE OF SANITARY PERMIT

<b>Office /Division:</b>	Municipal Health Office/Environment and Health Sanitation Services			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2B-Government to Business			
<b>Who may Avail:</b>	Business Sectors			
<b>CHECKLIST REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
<ul style="list-style-type: none"> <li>• Mayors Permit Application</li> <li>• DTI Certification</li> <li>• Health Certificate</li> <li>• Inspection Report</li> </ul>		<ul style="list-style-type: none"> <li>• MAYOR'S OFFICE ( BPLO SECTION)</li> <li>• DTI OFFICE</li> <li>• MHO</li> <li>• Sanitation Inspector (during onsite inspection)</li> </ul>		
<b>CLIENT STEP</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Register in the Log Book	1. Provide Log Book	None	1 minute	<i>Ernesto de Palma</i> Sanitation Inspector IV

				<i>Godfreda F. Dawal</i> Sanitation Inspector I
2.Present requirements.	2.Check documents	None	3 minutes	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
3.(see inspection services)				
4.Proceed to treasury office,	4. Provide charge slip for sanitation permit fee.	PHP300	1 minute	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
3. Return with official receipt.	5. Prepare sanitary permit.	None	3 minutes	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
4. Get approved sanitary permit.	6.Release approved sanitary permit.	None	1minute	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
	7.Record services given.	None	1 minute	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
<b>TOTAL</b>		PHP300	10 minutes	

**D. PROVISION OF WATER CHLORINATION AND DISINFECTION SERVICES**

<b>Office /Division:</b>	Municipal Health Office/Environment and Health Sanitation Services			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may Avail:</b>	ALL			
<b>CHECKLIST REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
<ul style="list-style-type: none"> <li>Request letter</li> </ul>			Client	
<b>CLIENT STEP</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Register in the Log Book	1. Provide Log Book	None	1 minute	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
2. Submit request letter	2.Receive request letter.	None	3 minutes	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
	3.Schedule date of inspection and chlorination	None	1 minute	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I

3. Assist Sanitation Inspector in the site/water source.	4. Proceed to the site and conduct disinfection/chlorination.	None	24 hours	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
	5. Instruct client to collect another water sample after 24 hours and send to RHU.	None	1 minute	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
	6. (Please see water bacteriology test services)			
<b>TOTAL</b>		None	24 hours and 6 minutes	

### E. PROVISION OF PLASTIC TOILET BOWL

Office /Division:	Municipal Health Office/Environment and Health Sanitation Services			
Classification:	Simple			
Type of Transaction:	G2C- Government to Citizen			
Who may Avail:	Indigent without Sanitary Toilet			
<b>CHECKLIST REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
<ul style="list-style-type: none"> <li>Recommendation Letter from midwife</li> </ul>			Barangay Health Station	
<b>CLIENT STEP</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Register in the Log Book	1. Provide Log Book	None	1 minute	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I

2.Present the recommendation letter	2.Validate the presented document	None	2 minutes	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
3. Receive Plastic Toilet Bowl	3.Provide Plastic Toilet Bowl (PTB)	None	5 minutes	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
	4.Provide proper instruction.	None	5 minutes	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
	5.Go to the site for inspection of installed PTB	None	6 hours	<i>Ernesto de Palma</i> Sanitation Inspector IV  <i>Godfreda F. Dawal</i> Sanitation Inspector I
<b>TOTAL</b>		None	6 hours and 13 minutes	

### VIII. PROVISION OF ROUTINE LABORATORY SERVICES

The Laboratory performs examination on clinical specimen to provide information pertaining to the health of a patient as pertaining to the diagnosis, treatment and prevention of diseases. The Laboratory is under the Municipal Health Office.

<b>Office /Division</b>	Municipal Health Office/Laboratory Services
<b>Classification</b>	Simple

<b>Type of Transaction</b>	G2C- Government to citizens			
<b>Who may avail</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1.Laboratory request form ( 1 original) 2. Official receipt for paying clients (1 original) 3. MDR for 2Ps / NHTS for free services for those not included in the data base (1 copy) 4. Senior citizen's ID for free services (1 original) 5. PWD ID for free services (1 original)		1. Municipal Health Office-OPD 2. Treasury office - Cashier 3. Philhealth Office Solano / online 4. MSWD office 5. MSWD office		
<b>Client Steps</b>	<b>Agency action</b>	<b>Fees to paid</b>	<b>Processing time</b>	<b>Person responsible</b>
1.Register in the Log Book	1. Provide Log Book	None	1 minute	<i>Irene M. Dario</i> Medical Technologist II
2.Present laboratory request form.	2. Check laboratory request form.	None	1 minute	<i>Irene M. Dario</i> Medical Technologist II
3.Present MDR, senior citizen/PWD ID (for non-paying clients).	3.Assess eligibility of the client.	None	1 minute	<i>Irene M. Dario</i> Medical Technologist II
4.Proceed to Municipal Treasury Office for payment (for paying clients)	4. Provide charge slip for the needed laboratory examination.	None	2 minutes	<i>Irene M. Dario</i> Medical Technologist II
5.Proceed to laboratory. Give official receipt	5. Copy the OR number and record.	None	2 minutes	<i>Irene M. Dario</i> Medical Technologist II
6.Submit self for specimen collection or self-collected specimen.	6.Receive submitted specimen or extract specimen and label.	None	10 minutes	Municipal Health Officer Municipal Health Office
7.Proceed to the waiting area	7.Process specimen as follows:			
	<ul style="list-style-type: none"> <li>• CBC</li> </ul>	None	1 day	<i>Irene M. Dario</i>

				Medical Technologist II
	• Hemoglobin	150.00	30 minutes	<i>Irene M. Dario</i> Medical Technologist II
	• Malarial smear	None	30 minutes	<i>Irene M. Dario</i> Medical Technologist II
	• HBsAg screening	None	30 minutes	<i>Irene M. Dario</i> Medical Technologist II
	• Anti- HAV IgM/IgG	250.00	30 minutes	<i>Irene M. Dario</i> Medical Technologist II
	• Dengue NS1	50.00	15 minutes	<i>Irene M. Dario</i> Medical Technologist II
	• Anti T.pallidum screening	100.00	30 minutes	<i>Irene M. Dario</i> Medical Technologist II
	• Blood typing	80.00	30 minutes	<i>Irene M. Dario</i> Medical Technologist II
	• Pregnancy test	50.00	30 minutes	<i>Irene M. Dario</i> Medical Technologist II
	• Urinalysis	50.00	30 minutes	<i>Irene M. Dario</i> Medical Technologist II
	• Fecalalysis	100.00	3 hours	<i>Irene M. Dario</i> Medical Technologist II
	• KOH	50.00	2 days	<i>Irene M. Dario</i> Medical Technologist II
	• Gram staining	250.00	1 day	<i>Irene M. Dario</i> Medical Technologist II
	• AFB staining/DSSM	150.00	6 hours	<i>Irene M. Dario</i> Medical Technologist II
	• Sperm fluid analysis	150.00	6 hours	<i>Irene M. Dario</i> Medical Technologist II

	• FBS examination	200.00	6 hours	<i>Irene M. Dario</i> Medical Technologist II
	• Total cholesterol examination	360.00	6 hours	<i>Irene M. Dario</i> Medical Technologist II
	• Triglyceride examination	150.00	6 hours	<i>Irene M. Dario</i> Medical Technologist II
	• HDL/LDL examination	150.00	6 hours	<i>Irene M. Dario</i> Medical Technologist II
	• BUA examination	150.00	5 minutes	<i>Irene M. Dario</i> Medical Technologist II
	• BUN examination	50.00	5 minutes	<i>Irene M. Dario</i> Medical Technologist II
	• Creatinine examination		5 minutes	<i>Irene M. Dario</i> Medical Technologist II
	• Capillary blood glucose examination	60.00	5 minutes	<i>Irene M. Dario</i> Medical Technologist II
	• Capillary cholesterol examination	None	2 minutes	<i>Irene M. Dario</i> Medical Technologist II
	• Capillary blood uric acid	None	1 minute	<i>Irene M. Dario</i> Medical Technologist II
8.Receive laboratory examination result.	8.Release examination result	None	1 minute	<i>Irene M. Dario</i> Medical Technologist II
9.Proceed to the examining physician	9.Instruct client to return to the examining physician.	None	1 minute	<i>Irene M. Dario</i> Medical Technologist II
	10.Record findings.	None	3 minutes	<i>Irene M. Dario</i> Medical Technologist II
<b>TOTAL</b>		As Applicable	2 days and 22 minutes.	



## IX. ISSUANCE OF DEATH AND MEDICAL CERTIFICATES

### A) DEATH CERTIFICATE

Issuance of Death Certificate regarding attended and unattended deaths within Kasibu.

<b>Office or Division</b>	Municipal Health Office			
<b>Classification</b>	Simple			
<b>Type of transaction:</b>	G2C- Government to Citizens			
<b>Who may avail:</b>	All and Business Sectors			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
A. Attended Death <ul style="list-style-type: none"> <li>• Personal appearance of an authorized person or relative knowledgeable of the cause of death</li> </ul> B. Unattended Death <ul style="list-style-type: none"> <li>• Certificate of death</li> <li>• Police Report</li> <li>• Any proof of possible cause of death such as discharge summary slip, any diagnostic test</li> </ul>		Municipal Registry Office Not applicable  Barangay Captain Philippine National Police Health Facility where the patient seek medical services		
Death Certificate				
<b>CLIENTS STEP</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Register in the Log Book	1. Provide Log Book	None	1 minute	Fatima D. Binwag Midwife I
2. Proceed to the receiving section and receive Individual Treatment Record (ITR).	2. Retrieve Individual Treatment Record of the dead individual (ITR).	None	2 minutes	<i>Fatima D. Binwag</i> Midwife I

3.Proceed to the physician. Present ITR and required documents	3.Review the ITR and documents presented.	None	3 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer
	4.Interview client.	None	5 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer
	5.Determine cause of death.	None	5 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer
4.Proceed to the Municipal Registry Office	6. Instruct client to bring Death Certificate to the Municipal Registry Office for completion.	None	1 minute	<i>Elizabeth M. Joaquin</i> Municipal Health Officer
<b>TOTAL</b>		None	17 minutes	

#### B) MEDICAL/HEALTH/MEDICO-LEGAL CERTIFICATE

Issuance of medical certificate stating the physical status of the person examined and diagnosed by the MHO for legal purposes.

<b>Office or Division</b>	Municipal Health Office/Administrative Services			
<b>Classification</b>	Simple			
<b>Type of transaction:</b>	G2C- Government to Citizens G2B- Government to Business			
<b>Who may avail:</b>	All Business Sector			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Diagnostic Results (Laboratory, X-ray, Neuropsychology, etc.) if applicable			Municipal Treasury Office Diagnostic Facility of choice	
<b>CLIENTS STEP</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Register in the Log Book	1. Provide Log Book	None	1 minute	<i>Fatima D. Binwag</i>

				Miwife I
	2.Retrieve Individual treatment record.	None	2 minutes	<i>Fatima D. Binwag</i> Miwife I
2.Present required documents	3.Assess presented documents for completeness.	None	3 minutes	<i>Fatima D. Binwag</i> Miwife I
	4.Take vital sign and record.	None	6 minutes	<i>Fatima D. Binwag</i> Miwife I
3.Proceed to consultation room	5.Assess and diagnose client.	None	10 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer
4. Proceed to the Treasury Office to pay Medical Health/Certificate Fee.	6. Instruct client to go to the Treasury Office to pay Medical Certificate Fee.		1 minute	<i>Elizabeth M. Joaquin</i> Municipal Health Officer
	For employment/business	PHP100	5 minutes	Municipal Tresurer Municipal Treasury
	For medico-legal cases, including for insurance claims	PHP70	5 minutes	Municipal Tresurer Municipal Treasury
	For Students, persons with disability, senior citizens and indigents	PHP25	5 minutes	Municipal Tresurer Municipal Treasury
	Other than for employment/business	PHP50	5 minutes	Municipal Tresurer Municipal Treasury
5. Receive medical certificate.	7. Give medical certificate signed by the examining physician.	None	1 minute	<i>Zeny E. Dugay</i> Administrative Aide VI
	8. Record data in the daily patients log book.	None	2 minutes	<i>Fatima D. Binwag</i> Midwife I
<b>TOTAL</b>		PHP100	31 minutes	

## X. AMBULANCE AND PATIENT TRANSPORT SERVICES

This service provides transport of emergency and non-emergency cases from the RHU to higher level facilities and vice versa.

<b>Office or Division</b>	Municipal Health Office			
<b>Classification</b>	Technical			
<b>Type of transaction:</b>	G2C-Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Request letter of the client		Not applicable		
<b>CLIENTS STEP</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Register in the Log Book	1. Provide Log Book	None	1 minute	<i>Fatima D. Binwag</i> Midwife I
2. Give request letter	2. Fill-up ambulance/service vehicle request form	None	3 minutes	<i>Fatima D. Binwag</i> Midwife I
3. Proceed to consultation room	3. Endorse/recommend the approval of the request.	None	1 minute	<i>Elizabeth M. Joaquin</i> Municipal Health Officer
4. Proceed to the Municipal Mayors Office	4. Instruct client to go to the Local Chief Executive for approval of the request.	None	1 minute	<i>Elizabeth M. Joaquin</i> Municipal Health Officer
5. Proceed to Municipal Treasury Office	5. Instruct client to go to the Municipal Treasury Office to pay ambulance service fee as follows: Kasibu-Bambang Kasibu-Bayombong  Kasibu-Solano	None  PHP500 PHP1,000  PHP1,500	1 minute  1 hour 1 hour 30 minutes 2 hours	<i>Elizabeth M. Joaquin</i> Municipal Health Officer

	Kasibu-Lagawe Kasibu-Santiago Kasibu-Baguio Kasibu-LaTrinidad Kasibu-Tuguegarao Kasibu-Metro Manila	PHP2,500 PHP2,500 PHP3,000 PHP3,300 PHP4,000 PHP5,000	2 hours and 30 minutes 3hours 4 hours 4 and 15 minutes 4 hours 7 hours	
5. Submit approved request to the Municipal Health Office- Administrative Section	5. Schedule the travel and prepare travel order of the Driver and ambulance medical staff.	None	5 minutes	<i>Elizabeth M. Joaquin</i> Municipal Health Officer  <i>Zeny E. Dugay</i> Administrative Aide VI
	6. Inter data in the Ambulance/Transport Vehicle Logbook.	None	1 minute	<i>Zeny E. Dugay</i> Administrative Aide VI
<b>TOTAL</b>		PHP5,000	7 hours and 13 minutes	

## FEEDBACK AND COMPLAINTS MECHANISM

<p>How to send feedback?</p>	<p>Answer the client feedback form and drop it at the designated drop box in front of the lobby of Municipal Building 2.</p> <p><b>Contact info:</b>          Public Assistance and Complaints Desk: 0975-565-8265          HRMO: 0915-251-3852          Administrative Officer: 0997-325-8807          Email: mlgukasibu@gmail.com</p>
<p>How feedbacks are processed?</p>	<p>Every Friday, the Designated Personnel manning the Public Assistance and Complaint Desk opens the dropbox and compiles and records all feedback submitted.</p> <p>Feedback requiring answers are forwarded to relevant offices and they are required to answer within three (3) days of the receipt of the feedback.</p> <p>The answer of the office is then relayed to the citizen.</p> <p><b>For inquiries and follow-ups, the client may contact the following:</b>          Public Assistance and Complaints Desk: 0975-565-8265          HRMO: 0915-251-3852          Administrative Officer: 0997-325-8807          Email: mlgukasibu@gmail.com</p>
<p>How to complain?</p>	<p>Answer the client Complaint Form and drop it at the designated drop box in front of the lobby of Municipal Building 2.</p> <p>Complaints can be also filed via telephone. Make sure to provide the following information:          Name of person being complained</p>

	<p>Incident Evidence</p> <p><b>For inquiries and follow-ups client may contact the following:</b>  Public Assistance and Complaints Desk: 0975-565-8265  HRMO: 0915-251-3852  Administrative Officer: 0997-325-8807  Email: mlgukasibu@gmail.com</p>
<p>How complaints are processed</p>	<p>The Designated Personnel manning the Public Assistance and Complaint Desk opens the complaint drop box on the daily basis and evaluates each complaint.</p> <p>Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation.</p> <p>The Designated Personnel manning the public Assistance and Complaint Desk will create a report after the investigation and shall submit it to the Head of Agency for appropriate action.</p> <p>The Designated Personnel manning the public Assistance and Complaint Desk will give feedback to the client.</p> <p><b>For inquiries and follow-ups, the client may contact the following:</b>  Public Assistance and Complaints Desk: 0975-565-8265  HRMO: 0915-251-3852  Administrative Officer: 0997-325-8807  Email: mlgukasibu@gmail.com</p>
<p>Contact Information:  <b>Public Assistance and Complaints Desk:</b>  <b>Human Resource Management Office:</b></p>	<p>0975-565-8265  0916-831-4804</p>

<b>Office of the Municipal Mayor:</b>	0997-325-8807
<b>Anti Red Tape Authority (ARTA):</b>	(02) 8478-5091 / (02) 8478-5093 / (02) 8478-5099
<b>Presidential Complaints Center (PCC):</b>	8-2498310 / 8-736-8645 / 8-736-8603 / 8-736-8606 / 8-736-8629 / 8-736-8621
<b>CSC Contact Center ng Bayan:</b>	09088816565 / 1-6565*