
Combating COVID-19 Pandemic: The Best Management Practices of A Designated Hospital in Southern Philippines

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ABSTRACT

The worldwide fight against COVID-19 is a battle in progress. As long as its antidote is still unknown to man, each country is left to formulate its strategy to combat the pandemic. In the Philippines, designated COVID-19 hospitals are tasked to receive admissions of positive cases including the possible ones. But how should these designated hospitals effectively respond to the crisis? This qualitative case study identified the best practices of a COVID-19 designated hospital in Southern Philippines. The results show the following initiatives of the facility: provision of material support for frontliners, efficient donations management, calibration of medical personnel on proper triaging, designating Southern Philippines Medical Center as the COVID-19 hospital in Davao City, regular COVID-testing of the medical frontliners, the conduct of free debriefing for medical frontliners, facility expansion, and seamless collaboration between law enforcement, investigators, and health authorities. A government report showed that this facility is effective in managing COVID-19 cases. It is therefore imperative that other designated hospitals in the country should replicate the best practices in their facility.

1. Introduction

There is no doubt that the spread of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) has already taken on pandemic proportions (Remuzzi and Remuzzi, 2020) with worldwide 30,369,778 confirmed cases, 948,795 confirmed deaths, and at least 216 countries and territories affected as of 19, September 2020 (WHO, 2020). Virtually, no part of the globe will remain unaffected except in the most isolated locations (Le Blanc, 2020, p. 81). The numbers indicate that COVID-19 is unstoppable at the moment and the only way to handle it is to prevent or lessen the spread of the coronavirus by implementing preventive and protective measures such as social distancing, wearing of protective gears, community quarantines, and lockdowns to name a few. Although containment measures, for example, in China have reduced new cases by more than 90%, this reduction is not the case elsewhere thus making a global response to prepare health systems imperative (Remuzzi and Remuzzi, 2020).

Pandemic like this is not new. According to Lazzari and Stohr (2004, p. 242), before the 31 influenza outbreaks recorded since the first pandemic was described in 1580, pandemic-like events were reported as early as the fifth century BC by the Greek physician Hippocrates. In the last century, they added, the Spanish flu pandemic of 1918-19 killed 20-40 million people, while the Asian flu pandemic in 1957 and Hong Kong flu in 1968 each caused an estimated 1-4 million deaths. This time, the world is shuttered by COVID-19 and the expanse of its aftermath on a global scale still appears to be uncertain.

Countries in the world have taken their steps to combat the pandemic. Countries that have flattened the curve made testing widely and freely available, using innovative approaches like mass drive-thru test centers. The United States, South Korea, India, and China are investing heavily to come up with viable test kits and suppression methods (Purusottam, 2020, p. 102). In the Philippines, the government responded to it through the agencies of the executive branch particularly the Department of

Health (DOH), the Department of Interior and Local Government (DILG), the Department of Agriculture (DA), the Department of Trade and Industry (DTI), to name a few. But the influx of infected persons with COVID-19 is taken care of by the medical experts in designated health facilities. Although the Philippines has a considerably manageable number of COVID-19 cases compared to other leading countries, the health care system of the country is not prepared for this kind of critical health and security crisis. The level of per-person healthcare spending in the country is one of the lowest among Southeast Asia’s major economies (Folger, 2020). In terms of doctor-to-patient ratio, the Philippines has one doctor per 33,000 patients, and one hospital bed is available to every 1,121 Filipino patients. This data tells us that the Philippines is not ready to fight a global pandemic. Medical front liners have felt anxious, especially medical doctors, nurses and laboratory technicians with the exponential increase of COVID-19 cases in the country (Bayod, 2020, p. 70). Hence, the health workers to population ratio can never be ideal.

Nevertheless, the Philippine government is catching up. With the declaration of the national state of emergency by the executive branch, the entire country was placed under strict regulation through community quarantines and lockdowns. Metro Manila was even put into the tighter implementation of the quarantine. Thousands of people are refused entry into the country’s capital and lockdowns in major cities mean very strict discipline imposed by the military and the police (Maboloc, 2020, p. 77). Although this resulted in major social and economic disruptions, the initiative is to control the spread of the virus. But one major initiative that the government has put in place is the designation of major healthcare facilities as COVID-19 hospitals. Meaning, no suspected patients should be brought to any other medical facilities but only to these facilities. Most of them are government hospitals in the provincial areas while some private health facilities have been identified in the National Capital Region. One notable facility is the Southern Philippines Medical Center (SPMC) in Davao City, Philippines. With the help of the local government unit, it has shown significant achievements in combating the COVID-19. By the offset of the implemented community quarantine, the facility was able to control the crisis. Institutional data shows that outside National Capital Region, SPMC topped in the number of individuals tested which reached 2,084 and only 103 persons found positive with COVID-19. But as of 13 April 2020, the figures seemed to have manifested plateau. As shown in the following figure, SPMC has recorded as consistent positive cases of 74 while recoveries are jumping to 41 and no indication of an increased number of deaths. New positives and new deaths, as well as recoveries, are noticeably flattened.

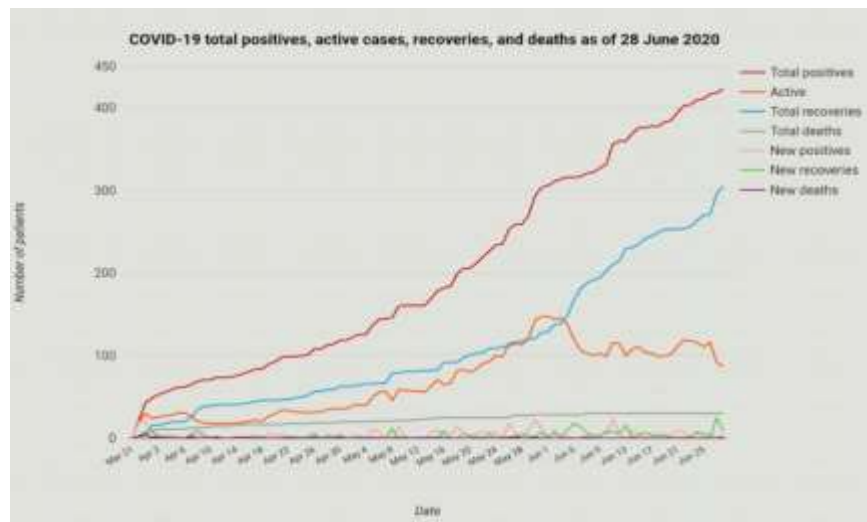


Figure 1. Graphical Presentation of the COVID-19 Cases in SPMC
 Source: spmcdoh.gov.ph

Aside from that, Colina (2020) reported that the health workers in this facility are highly motivated to respond to the call of duty because of the support that they are getting from the hospital administration. They feel that they are fully equipped to go into the war (versus the COVID-19). In a report by Cudis (2020), one of the main drivers of the city’s progress in the fight against the virus is it has assigned the Southern Philippines Medical Center as the only institution to receive COVID-19 patients. Further, having to keep all equipment and medication necessary for the containment and cure of the viral disease in one facility is a good strategy. It is therefore worthy to document the initiatives of the facility to generate best management

practices to combat the pandemic. Once documented, these best practices can be worthy of reflecting and replicating by other facilities in the country for them to also reasonably combat COVID-19.

2. Method and Materials

This qualitative research made use of the interview responses from the medical doctors and top management of Southern Philippines Medical Center in Davao City, Philippines. To maintain social distancing, the researcher made use of social media accounts to reach the research participants. To provide guidance and ensure the scope of data, the research participants were asked to answer this question: "What are the strategies and initiatives that your hospital has undertaken to successfully combat COVID-19?" The answers were then transcribed and analyzed with the use of thematic content analysis. The final themes generated represent the best practices of the facility in combatting the COVID-19.

3. Results and Discussion

The following are the best practices of Southern Philippines Medical Center generated from the thematic analysis of the qualitative data.

Provision of Material Support for Frontliners. The COVID-19 designated hospital was able to procure the necessary equipment and supplies for its frontliners. These include personal protective equipment and gears, surgical masks, face shields, goggles, gown, N95, and shoe cover. Also, alcohol and other disinfectants were procured. The purchases are made to ensure a steady supply, acknowledging the concern of most frontliners for an extra layer of protection from contamination while attending to the infected patients. The center is also providing the frontliners with much-needed transportation and food to keep their spirits up to win the battle against the coronavirus. The hospital management also takes care of the frontliners' shelters where they could rest while undergoing the 14-day quarantine protocol after their perpetual duty in the hospital before returning home safe. This reassures that their health workers are given the right support so they do not get contaminated by the disease. To further fast track the procurement processes, the hospital was able to strengthen its internal business processes by prioritizing the procurement of any COVID-19 related materials and resources. Logistics regularly monitor the inventory of materials given the difficulty in the transport of goods from suppliers in Manila and other countries. With this, material support for frontliners and the patients themselves is ensured.

Efficient Donations Management. One overwhelming initiative of the hospital is the efficient management of donations coming from different stakeholders such as the local government unit, non-government organizations, international aids, private corporations and persons, and other agencies. Most donations include food, cash, personal protective equipment, alcohols and disinfectants, and medicines. To manage them efficiently, the hospital has allotted a section with the right administrative personnel who accept and screen the donations. It is being managed by the logistics team head for COVID19 that was formed when the disease hit the region. The donations obtained are then distributed to the different departments of the hospital where the COVID-19 frontliners are operating. Although the donations might be exhausted, managing them very efficiently will help augment the resources of the hospital while the procurements are being done.

Calibration of Medical Personnel on Proper Triage. Healthcare professionals specialized in upper respiratory tract cases are rare. With the onset of many patients whose symptoms are in the upper respiratory tract, several hospital staff needs to be calibrated so they can focus on these patients. In most cases, the medical frontliners experience difficulty in differentiating patients with or without COVID-19 especially those asymptomatic patients. Hence, these frontliners need to be trained on proper triaging of the patients. As medical frontliners, they have to internalize the protocols since they are newly-trained in these cases. Triage is the clustering of patients according to the manifestation of their symptoms. This practice of the hospital makes it easy for them to provide an utmost response to those patients that extremely need medical care compared to those patients whose symptoms of COVID-19 are relatively manageable.

Designating SPMC as The COVID-19 Hospital in Davao City. To combat the spread of coronavirus, the government has identified COVID-19 hospitals. In Davao City, the only hospital that is allowed to accept COVID-19 patients is the Southern Philippines Medical Center. Meaning, no suspected patients should be brought to any other medical facilities but only to this facility. Most of them are government hospitals in the provincial areas while some private health facilities have been identified in the National Capital Region. Having this practice ensures focus on the medical attention that the patients need. Also, designating the SPMC as COVID-19 hospital in the city guarantees the efficient allocation of resources that should be earmarked for COVID-19 patients. Hence, this will avoid confusion on donors, funders, and other stakeholders who may want

to extend aid in any aspect that the hospital may need. On the part of suspected patients, it will be easier for them to submit themselves for proper care and medical attention.

Regular COVID-Testing of the Medical Frontliners. Another important best practice of the hospital is the conduct of regular testing of the medical frontliners to monitor their exposure to coronavirus. Even if the health worker is manifesting or not manifesting any symptom, they are automatically given the test to check whether they are still safe or not. There had been many cases already where the medical frontliners are being infected by the disease. Most of them recover while some others did not survive. Hence, early detection of the presence of the virus will help control the spread of the virus and further protect the health and welfare of the medical frontliners.

Conduct of Free Debriefing for Medical Frontliners. With too much pressure and emotional quandaries that the medical frontliners implicated in the hospital while attending to the needs of the patients, it cannot be denied that they would be prone to psychological variability. This could lead to anxiety among them and can affect their performance and medical frontliners. In response to this dilemma, the hospital conducts a free debriefing for all medical frontliners to make sure they are mentally, emotionally and psychologically sound. This is done at any time of the day according to their availability and need. This initiative is a best practice which indicates that the medical frontliners' health and welfare are on top of the hospital management's thrust in combating COVID-19. This is very important to boost the confidence and motivation of the medical frontliners amidst the threat that they are facing every day as they attend to the medical needs of the COVID-19 patients.

Facility Expansion. As a government hospital that caters to all the towns and cities in Southern Philippines, the hospital is equipped with adequate amenities and facilities. However, with the influx of patients who are under investigation and the special needs that are demanded by the COVID-19 positive patients, the hospital needs to expand its facilities that can accommodate them. SPMC took a vital role in expanding its wards especially the surgery ward, intensive care unit, and pay wards for moderate to severe positive cases in the different buildings within the hospital area. With this initiative, the resources of the hospital are mobilized to its maximum capacity which is easy for the logistics team to monitor. Further, it will be beneficial for the medical frontliners because they would not have to transfer to another facility to attend to the needs of the COVID-19 patients.

Seamless Collaboration between Law Enforcements, Investigators, and Health Authorities. The Southern Philippines Medical Center does not operate single-handedly in the combat against the COVID -19. Essential to its prevailing success is the constant linkage with the local government unit and with other government and non-government agencies. In its move to respond to the crisis, the hospital collaborated with the Disaster Risk and Management Council and activated a team of around 50 frontliners, comprising doctors, nurses, and housekeeping personnel. There are a fully-functional second line and third line of responders composed of around 30 nurses and around 50 housekeeping personnel. To provide further assistance to the medical frontliners of the hospital, the local government unit provided buses that transport the personnel from home to work and vice versa. The hospital also collaborated with some privately owned hotels and inns that provided free accommodation of the medical frontliners if they need to isolate themselves from their families. These collaborative actions facilitated the smooth operations of the designated hospital in the combat against COVID-19.

4. Conclusion and Recommendations

The battle against COVID-19 requires institutional initiatives than can be treated as best management practices. In the case of Southern Philippines Medical Center, which is one of the designated COVID-19 hospitals in Davao Region, the study was able to identify best management practices to effectively respond to the pandemic. Given the prominence of these strategies, it is highly recommended that the other designated COVID-19 hospitals in the Philippines replicate the abovementioned initiatives. This will not solve the crisis but it will hasten the response to this life-threatening crisis.

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