



**SURGICAL &
INTERVENTIONAL CARDIAC
MISSION IN BGHMC**
SEE PAGE 3

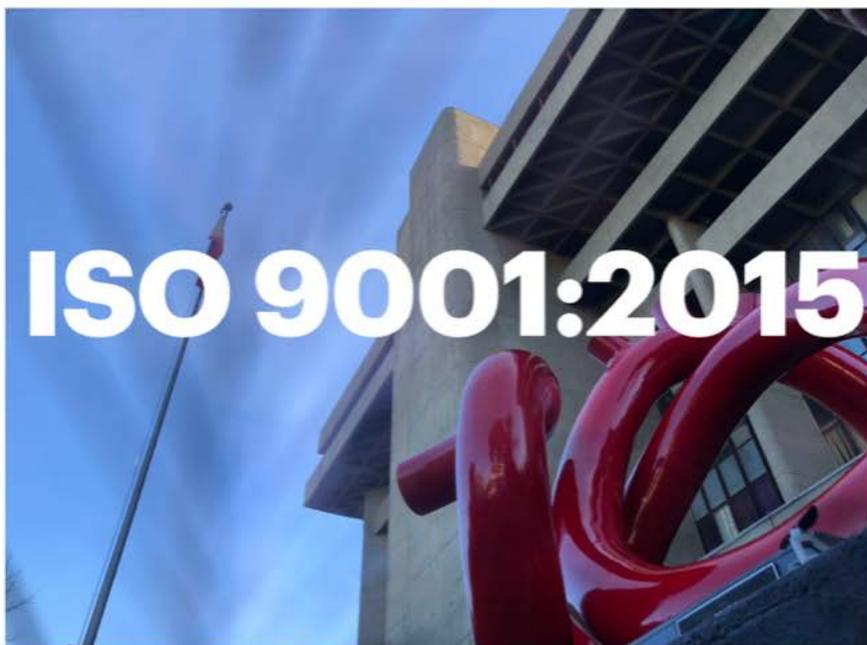


**PHC COVID
DASHBOARD**
SEE PAGE 9



**ELECTION
PROHIBITIONS**
PAGE 6

PHILIPPINE HEART CENTER NEWSLETTER



Positive Remarks ISO 9001:2015 for PHC

PHC recently underwent an audit for the ISO 9001:2015 recertification last March 23 and 24, 2022. The audit on quality management system was facilitated by SOCOTEC Certification Philippines remotely on a virtual platform.

Adapting the virtual venue typify independence from physical fora and evidence. The conduct of the online audit streamlined the reporting and

PHC processes,
implementation and
presentation of
documents gets a
thumbs up from
SOCOTEC



evaluation of the required documents and information pertinent to the audit in a digital format. ISO 9001:2015 recertification audit evaluated the PHC quality management system by checking compliance with the following requirements.

1. The center is able to demonstrate the ability to consistently provide the services that meet customer and applicable statutory and regulatory requirements, and
2. That the center ensures continued enhancement of customer satisfaction through effective quality management systems including processes and assurance that is in conformity to patient needs and applicable regulatory obligations.

The 2-day virtual survey evaluated the center's different services' areas thru an online presentation of the processes and evaluation of data. An overall thumbs up was given to the center after the audit. In summary, SOCOTEC reported the 4 positive and 1 non conformity remark:

- PHC as an institution has a "fluid process of the PDCA (plan-develop-check-act cycle)" that help link the objectives and performance of each unit to the center's breakthrough target.
- Majority of the audited units were able to show a comprehensive presentation of previous milestones and implementation of operational controls.
- The Department of Pediatric Cardiology was congratulated for retaining its accreditation.
- The center was likewise commented for its commitment to pursuing its advocacies and missions.
- The Radiological Sciences was praised for its innovation on the Golden Heart signages to aid in the levity of patients and public.
- The Nutrition and Dietetics Division was observed to have prompt and organized retrieval and presentation of documented information.
- Lastly, the center was again commented on the significant infrastructure improvement that was completed since last ISO audit. Noted were the new emergency room, additional 70-bed wards, constructed molecular diagnostic laboratory and the numerous EMD initiatives for COVID-19 control in the center.

Source: Elmer Benedict Collong, RMT,MMPA, MPA-HEDM, EMT-B

PHC ISO 9001:2015 Recertification Audit



Virtual ISO 9001:2015 recertification audit by SOCOTEC Certification Philippines opening meeting in the Heart Hub Auditorium held last March 23, 2022. In attendance were PHC Executive Director Joel M. Abanilla, MD, Deputy Executive Directors and the different department heads and division chiefs.

Mission Possible: PHC goes to Baguio General Medical Center

The Baguio General Hospital and Medical Center (BGHMC) has long started to plan and build itself into one of the Regional Heart Centers in the Cordillera Autonomous Region (CAR). However, this journey was abruptly curtailed when the COVID-19 pandemic was declared in March 2020. Two years into the global health crisis, the BGHMC reinstitute their plans to pursue this noble undertaking.

The Pediatric and Adult Cardiac Surgical and Interventional Mission recommended the plight of the BGHMC. In cooperation with the Philippine Heart Center, the team of doctors, nurses and allied healthcare workers convened to serve 26 patients from the Cordillera Region with ailing heart conditions that necessitated either a surgical or percutaneous cardiac intervention. These undertakings were held in BGHMC last February 28 to March 4, 2022. The week-long mission aside from open heart surgeries and invasive cardiac procedures included a virtual webinar on "Raising Children with Healthier Hearts" by the PHC Pediatric Cardiology Team and a blended Orientation on the

PhilHealth Z-benefit Open Heart Packages from the PHC Z-Benefit Office.

The 2nd Baguio Cardiac mission was definitely raised the bar from the previous one as it encapsulated the first 3-in-1 mission in the 6th year of PHC Regional Heart Center development journey. This successful endeavor was again made possible through the steadfast commitment of PHC and BGHMC top leadership and the passionate engagement of our "Modern Day Heroes", the men and women behind the masks and PPEs: the PHC-BGHMC CV Surgical and Intervention Team.

Sharing the laurels of this victorious endeavor for the Cordillerians are our mission partners: Office of Senator Bong Go, Heart Warriors of the Philippines, Inc. under Imee Kalusugan Program of Sen. Imee Marcos, Rotary Club of Metro Pasig, District 3800 thru the approval of Global Grant 2095133 and its International partner Club: Rotary Club of Granada Hills, U.S.A District 5280 and other Rotary Club Partners and Contributors, Mending Kids, Medtronic Philippines, Inc., Terumo, IDS Medical Systems Philippines, Inc., B Braun, and PHP Medical Distributors, Inc.

- by Glorilyn Joy C. Lacey, MA Psy and

Francoise May A. Sarmiento, MD

BGHMC welcomes PHC delegates



Snapshots of PHC-BGHMC Mission 2022



Message from the Director

Finally after 2 years into the pandemic of COVID-19, we are seeing a glimmer of hope. Cases in our PHC community has dropped with zero HCWs becoming positive for the SARS-CoV2

virus for several weeks now. Our hospital operations have finally resumed into full gear to reach pre pandemic levels, or even greater. However excited we are to fully resume our operations, we must carefully do this in the most safe possible way. PPE, complete vaccinations plus booster doses for the PHC healthcare workers and careful screening of our patients for COVID-19 remain a must despite the easing of the quarantine restrictions in the country.

Looking back, the PHC has been preparing for this and has been eager to serve patients that need our services since the pandemic was announced in 2019. Yet in spite of the pandemic restrictions and resurgence of overwhelming cases of HCWs becoming positive last January, we have continued to strive to meet the goals of our center. PHC continues to successfully capacitate regional hospitals to become a heart center. Recently, last month, the PHC team went to Baguio to successfully intervene surgically and via percutaneous approach to 25 patients in Baguio General Hospital and Medical Center in a collaborative manner between the 2 centers. Also, last month, we have undergone another ISO recertification audit. The PHC as an institution has done a great job as the final report of the SOCOTEC certification body noted 4 positive and only 1 non conformity in the management system of our center.

Moving forward, the PHC will continue to operate full scale and will aim to serve more patients as we open up more wards, cathlab units and beds in the new ER. The PHC will remain to be resilient against the COVID-19 pandemic or other unexpected events in the future. The center has adapted hybrid forms of communications, training, patient consultations, etc. And in spite of this innovations that has become the new normal in our daily routine, we still strive to go back to full face to face training especially in essential skills that our fellows and residents, as well as nurses and other allied medical staff need to master. Slowly we are doing this and hopefully we can continue what we do even if the threat of COVID-19 still stands.

Stay safe and stay strong, PHC Family!

- Joel M. Abanilla, MD

PHC Resiliency Plan

Patient Care Beyond and With COVID-19

Last March 2022, the PHC re-opened its efforts to resume hospital operations in the safest possible way — that is without easing of the proven safety protocols against the transmission of the novel SARS-CoV2 virus.

COVID-19 BOOSTER VACCINATION

The institution-wide roll-out for the first booster dose of the COVID-19 vaccine was held last November 22 to 26, 2021 at the DAPA Hall. A total of 2,582 PHC healthcare workers and dependents received the Pfizer mRNA vaccine as a booster dose > 6 months after the completion of the primary COVID-19 vaccines. The second batch of booster vaccines was given to 1,883 healthcare workers and dependents last January 20 to 22, 2022.

The PHC likewise extended its vaccination roll-out to the pediatric population - from giving complete 2 doses of Pfizer mRNA vaccine to dependents and patients aged 12 to 17 years (total 419 adolescents) and 5 to 11 years old (total 911 children).

The mass vaccination for the PHC community ended last March 2022. Unused adult Pfizer COVID-19 vaccines were returned to DOH for redistribution.

From almost a thousand to zero in 3 months

The OMICRON variant of the SARS-CoV2 virus caused the overwhelming number of cases last January here in the country, including here in the center. A total of 878 PHC healthcare workers were confirmed positive and almost all presented only with mild symptoms. However, the alarming number of healthcare workers being affected crippled the health system that led to adjustment of the quarantine protocols for healthcare workers becoming infected with the SARS-CoV2 virus. By the end of January, a total of 955 PHC staff were cleared to return to work after fulfillment of the health criteria as well as the prescribed isolation period. Slowly thereafter, the number of PHC healthcare workers getting sick from COVID-19 dwindled down significantly. Since the first week of March, there were zero HCWs reported to be positive for COVID-19.

Continued on page 9...

ELECTION PROHIBITIONS

In view of the 2022 National and Local elections, the Civil Service Commission (CSC) reminded all government officials and employees **not to engage in electioneering and partisan political activity**. Such acts are prohibited under the 1987 Constitution and other laws and statutes with the aim, to ensure that civil servants are focused on the discharge of their duties and functions to insulate them from politics.

In accordance with Section 1, Paragraph 4 of COMELEC Resolution No. 10049 (promulgated 01 February 2016), an "election campaign" or "partisan political activity" refers to **any act designed to promote the election or defeat of a particular candidate/s or party/ies to public office**, which includes any of the following:

- Forming organization, associations clubs, committees, or other groups of persons for the purpose of soliciting votes and/or undertaking any campaign for or against a candidate/party;
- Holding political caucuses, conferences, meetings, rallies, parades, or other similar assemblies for the purpose of soliciting votes and/or undertaking any campaign for or against a candidate/party;
- Making speeches, announcements, or commentaries, or holding interviews for or against the election of any candidate or party for public office;
- Publishing, displaying, or distributing campaign literature, or materials designed to support or oppose the election of any candidate or party;
- Directly or indirectly soliciting votes, pledges, or support for or against any candidate or party;

CSC Memorandum Circular No. 30 (s. 2009), citing CSC Memorandum Circular No. 40 (s. 1998), adds the following acts to the above mentioned enumeration:

- Being a delegate to any political convention, or a member of any political committee or directorate, or an officer of any political club or other similar political organizations,
- Receiving any contributions for political purposes, either directly or indirectly; and
- Becoming publicly identified with the success or failure of any candidate/s or party/ies.

CSC Memorandum Circular No. 09 (s. 1992), includes the following prohibited acts:

- Wearing of t-shirts or pins, caps or any other similar election paraphernalia bearing the names of the candidates or political party except as authorized by the Commission on Elections;
- Being a watcher for a political party or candidate during the election;
- Consistent presence in political rallies, caucuses of, and continuous companionship with certain political candidates and/or political party in said political activities, causing the employee to be closely identified with such candidate and/or political party;
- Giving personal, financial or other monetary contribution, supplies, equipment and materials for the benefit of a candidate and/or political party,
- Utilizing government resources such as personnel including job orders or contract of service hires, time and properties for political purposes.



EMPLOYEES CORNER

Engaging in Quality and Safety Through ROPs ACI 2022

Required Organizational Practices (ROPs) are evidenced-based practices dealing with high-priority areas paramount to quality and safety. They are categorized into six patient safety areas:

- Safety Culture
- Communication
- Medication Use
- Worklife/Workforce
- Infection Control
- Risk Assessment

According to the Health Standards Organization (HSO), it is crucial for health service providers to have these practices in place to enhance patient safety and minimize risks.

Summarized here are the different ROPs currently in place here at the Philippine Heart Center under each patient safety area.

Reference:

Omentum Global. (2018). HSO Required Organizational Practices Handbook

PHILIPPINE HEART CENTER REQUIRED ORGANIZATIONAL PRACTICES & STANDARDS	
Patient Safety Area	Required Organizational Practices
SAFETY CULTURE Create a culture of safety within the organization	1. Accountability for Quality 2. Patient Safety Culture (Organization's Mission Statement) 3. Patient Safety Officer's Report 4. Patient Safety Incident Database *
COMMUNICATION Improve the effectiveness and coordination of communication among staff and departments and with the recipient of care and services across the institution	5. Open Identification 6. The "No Bad" list of observations (Organizational Mission Statement) 7. Staff Identification 8. Staff Identification of Care Transitions 9. Address for Nurse Care Services (Outpatient) 10. Address for Outpatient Care Services 11. Address for Inpatient Care Services 12. Address for Emergency Department Services
INFORMATION Ensure the safe use of high-risk medications	13. Safe Surgery Checklist 14. Information Transfer at Care Transitions/Change of Care Information at Transition Point *
INTEGRATED MANAGEMENT Create a healthy and optimal environment that supports the safe delivery of care and services	15. Communication Improvement 16. Comprehensive Evaluation of Comprehensive Documentation 17. Infection Safety 18. High Alert Medications 19. Inpatient Safety Culture Survey/Practice Training * 20. Infection Safety
INTEGRATED OPERATIONS Create a healthy and optimal environment that supports the safe delivery of care and services	21. Resilience Management Program 22. Patient Safety Observation and Training (Using an Patient Safety) * 23. Clinical Risk * 24. Incident Reporting
INTEGRATED OPERATIONS Reduce the risk of health care-associated infections and their impact across the institution of care	25. Hand Hygiene Compliance 26. Hand Hygiene Education and Training 27. Infection Rates 28. Monitoring
HEALTH MANAGEMENT Identify safety risks inherent in the client population	29. Identification and Risk Reduction (Patient Presentation Strategy) * 30. Resilience (Over Prevention) 31. Resilience (Under Prevention) 32. Resilience (Transition/Continuity of Care)
STANDARDS	33. Infection Prevention and Control 34. Medication Management 35. Medication Management and Infection Prevention 36. Medication Safety 37. Medication Safety 38. Medication Safety 39. Medication Safety 40. Medication Safety

* Note: An Overall Score of 100% is required for On-site Business Month Ending 2018

Employee Planning Division - Required Organizational Practices



Webinar
On-Demand

YOU ARE INVITED TO JOIN THE
WEBINARS ON

REQUIRED ORGANIZATIONAL PRACTICES

EVERY MONTH, THERE WILL BE 2 AVAILABLE ROP WEBINARS:

- April 2022 PHC's Emergency Protocols
Medication Management and Reconciliation
- May 2022 Prevention of Violence in the Workplace
Venous Thromboembolism
- June 2022 Research Ethics
- July 2022 Pressure Ulcer Prevention
Bioethics
Procedural Sedation for Non-Anesthesiologists

To join, enter the LINK below or scan this QR code

<https://phc.jp/rops-rop>



FOR FURTHER INQUIRIES,
Call us at local 3542 or 43
Email us at: phc@phc.etrsm.com

PHC Welcomes New Fellows and Residents for 2022

The Education, Training and Research Services announced the acceptance of 65 specialty and 20 subspecialty fellows/residents for training in our center. Our new trainees started their official tour of duty last March 22, 2022 in adjustment to the election ban.

Department of Adult Cardiology

- Julie Ann R. Davalos, MD
- Krizia Anne Claudine B. Tomenes, MD
- Julienne Antoniette E. Rivera, MD
- Stephanie Marie C. Seno, MD
- Madelle DM de Leon- Naredo, MD
- Kenneth George C. Murakami, MD
- Jezreel M. Tere, MD
- Jamari R. Bifas, MD
- Elkim Ino D. Chomi, MD
- Jayson O. Mallare
- Kevin Sam S. Eliseo, MD
- John Kenneth Y. Magtoto, MD
- Samuel Anthon P. Bello, MD
- Roxane Ingrid Y. Ngo, MD
- Eden Mae B. Rula, MD
- Rus Cyan Josef E. Rodelas, MD

LEARNING SESSIONS

APRIL 2022

- Mental Health Promotion in the Workplace, April 6, 2022 (all levels)
- Sexual Harassment in the Workplace, April 7, 2022 (all levels)
- Lenten Recollection, April 8, 2022 (all levels)
- HRIS Orientation - April 19, 2022 (all levels)
- The Basics of Google Workspace - April 20, 2022 (all levels)
- Exercise During COVID: Home Exercise and Pandemic-Safe Exercises - April 21, 2022 (all levels)
- "Creating a Healthy Workplace" Managers and Leaders for Mental Health - April 27, 2022 (Supervisors, Division Chiefs, Department Managers)

- Volkman B. Bando, MD
- Kara Kristy V. Congiujico, MD
- Adelbert Daniel S. Casabar, MD
- Yiezza Llana Lauren L. Cruz, MD
- These Frances C. Ferandos, MD
- Bryan Carlo D. Jalbuena, MD
- Julie Annetheh R. Salazar, MD
- Phillip L. Laynesa, MD
- Roger R. Mission, Jr., MD
- Sittie Aysa A. Iba, MD
- Juanito S. De La Cruz, Jr., MD
- Jerran U. Babao, MD

Subspecialty Fellowship

Division of Invasive Cardiology

- John Joel H. Javier, MD

Division of Interventional Cardiology

- Adrian Patrick P. Calimag, MD

Non-Invasive Cardiology

- Katherine Rose A. Acosta, MD
- Miguel Angelo D. Ang Co, MD
- Wilbert B. Tarun, MD

Division of Vascular Medicine

- Julie Ann Stephanie Miralles-Amora, MD
- Niña Carissa L. Alegado-Aseniero, MD
- Vina Florentino P. Palmero, MD

Division of Critical Care Medicine

- Juxerez Maria B. Sulit, MD
- Shandi Mar L. Basiri, MD
- Larissa Camille C. Manapat, MD

Division of Cardiac Rehabilitation

- Danah Zoraydalyn B. Alih, MD
- Hazeleone Joyce G. Ramos, MD
- Intizar Padate, MD

Division of Electrophysiology

- Mark N. Adorada, MD

Division of Pediatric Cardiology

- Denise Ayn Sevilla - Ortiz, MD

Subspecialty Fellowship

Division of Invasive Cardiology

- Geraldine C. Casi, MD

Division of Critical Care

- Kristine Mae Biene V. Buhat, MD
- Melanie DR Lopez, MD

Division of Electrophysiology

- Camille Marie A. Go-Cacanidin, MD

Specialty Fellowship

- Sittie Soriena D. Kundo, MD
- Joshua Adrian G. Robiño, MD
- Vernaliza S. Pasol, MD

Division of Cardiac Rehabilitation

- Janice Joy G. Tan, MD
- Pristine Rose D. Fajardo, MD
- Fiel Ronan Leo R. Fortez, MD

Division of Pulmonary Medicine -

Section of Adult Pulmonary

- Jean Marie P. Maramag, MD
- Sherwina H. Juljani, MD
- Lea Dianne C. Ayuyao, MD
- Shareefah-Huda L. Mandangon, MD

Section of Interventional Pulmonary

- Cynthia Kristina G. Aldovino-Espino, MD

Division of Pulmonary Medicine -

Section of Adult Pulmonary

- Jesanel B. Ancheta, MD
- Christopher P. Go, MD
- Diane Alexis C. Millare - Riambon, MD
- Jonatha Mae R. Ayunting, MD

Section of Interventional Pulmonary

- Virgilio Vinkuan, Jr., MD

Department of Anesthesia and Surgery

- Division of CV Surgery

- Xandru L. Damalerio, MD
- Miguel Carlos B. Reyes, MD
- Jerome D. Urbina, MD

- Division of General Surgery

- Michael Louis V. Burdador, MD
- Mark Lawrence L. Gotamco, MD
- Maricar Irene L. Lovino, MD
- Gerardo Luis B. Manzo, MD

Department of Anesthesia and Surgery

- Division of CV Anesthesia

- Jay Mark Z. Ong, MD
- Ar-J T. Estabillio, MD
- Green R. Auguis, MD
- Odys Gladney C. Obuyes, MD
- Sarah Angelica C. Yambao, MD

Division of CV Radiological Sciences

Residency

- Jazreel P. Botacion, MD
- Justin Daniel C. Belmonte, MD
- Maria Clarissa Z. Justo, MD
- Emmanuel Carlos M. Limos, MD

CT-MRI Fellowship

- Rafael Joseph C. Villarica, MD
- Sarah Agnes Mary R. Lim, MD
- Alexis Joyce T. Sanchez, MD
- Vanika Mariel P. Feliciano, MD

Ultrasound Fellowship

- Rainier Pausanos, MD
- Feliz Pamela P. Vasquez, MD

Interventional Radiology Fellowship

- Nigel M. Carabaccan, MD

PHC Resiliency Plan

Continued from page 5...

Reopening of PHC Services

With the decreasing number of COVID-19 related admissions and fully immunized staff, the PHC resumed its hospital operations into full-scale last March 2022. The aim was to return to (or maybe surpass) pre pandemic level of operations to be able to serve more patients.

Accommodating the influx of patients was supported by the opening of the new units in the center:

- New wards: 4E-4F-4G (70 beds)
- New telemetry wards: 3A-3F-APW2 (60 beds)
- New cath lab units: room 5 and 6 (total of 7 Cath labs + hybrid OR)
- "One stop shop" - plan to open by April or May 2022

Currently, the hospital has 532 functional beds including 116 critical care and 7 ICU beds. 86.6% are allocated to non COVID-19 admissions and procedures. The rest are maintained as COVID units in the MICU1, 4D ward and 4A/4B as contingency wards. An additional 16 EID/COVID beds in the new ER building are expected to augment the hospital bed capacity by the end of the year.

And to ensure the safest resumption of operations, the PHC Execom has required the following:

- Maintain level 4 PPE for the organic staff of the COVID units. Level 3 isolation gowns can be given to those who will do "short visits" to COVID patients in these units and at the ER Special Triage area.
- Patients who become positive for COVID-19 during hospitalization will be transferred temporarily to the isolation COVID unit in 4D. If the patient is for an elective procedure, it is recommended that the procedure be deferred until the patient completes prescribed quarantine period. For patients who are stable and eligible for early discharge, they will be advised to complete quarantine requirement at home.
- Asymptomatic patients who turn out positive on gene expert for SARS-CoV2, even with a high CT > 30 will be presumed to be positive, especially if there is no history of an official positive swab result.

DBP Loan SHIELD

Lastly, the center is planning to upgrade and expand its Hospital Information System thru acquiring a DBP loan worth 150million pesos. However, this may be subject to approval of the monetary board.

Amidst the pandemic, PHC will strive to continue its mission - that is to serve Filipino patients needing excellent CV care - while keeping a watchful eye on the SARS-CoV2 virus and its new variants. Hopefully, with the decreasing

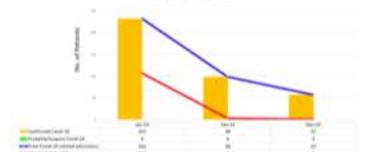
PHC COVID-19 DASHBOARD

Total Covid-19 related admissions
March 2020 - March 2022

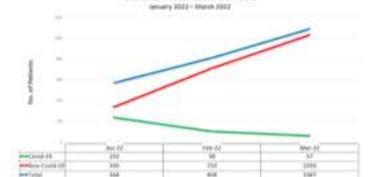


Total COVID-19 related admissions: 2584, Total admitted PHC HCWs COVID-19: 966

Total Covid-19 related admissions
January 2022 - March 2022



Covid-19 : Non Covid-19 Ratio
January 2022 - March 2022



number of COVID-related admissions, scheduling of the second booster dose for the HCWs and the proper use of PPEs, the center will be able to continue its full-scale hospital operations, offer full face-to-face education and training activities and become resilient to the change that the pandemic has brought in.