IMPACTS OF DOH-LED POLICY SHIFTS ON HEALTH WORKERS AND ILOILO PUBLIC HOSPITALS' MANAGEMENT AT THE TIME OF COVID–19

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ABSTRACT

This study explored the actual policy shifts in public hospitals in Iloilo Province during the first six months of the COVID-19 pandemic, from January to June 2020. The study looked into how the implementation of the DOH-crafted policies impacted healthcare delivery, the health workforce, and response to the care-seeking behavior of the patients. Key informant interviews (KII) and semi-structured interviews were employed among the hospital management and the frontline workers of Rep. Pedro G. Trono Memorial Hospital and DOH-retained Western Visayas Sanitarium and General Hospital to gather data for the study. The KII were participated in by the hospital chiefs and the IPC heads. Meanwhile, doctors, nurses, medical technologists, admitting clerks, and non-medical health workers were respondents of semi-structured interviews to determine the impacts of the new policies. Conforming to the available literature on pandemic response, this study revealed that optimal conditions were not readily achieved in the public hospitals under this study, mainly due to lack of resources to materialize the DOH-mandated changes. The policies were not fit to the current structure and service capacity of the hospitals and health workers carried the burden of ensuring adequate delivery of care. We discovered that health workers were exhaustively working despite the lack of government support in terms of benefits, compensation, and hazard pays. Furthermore, health workers encountered difficulties in rendering immediate care to patients who initially avoided hospital care resulting in an increased number of recorded ER deaths. Overall, we observed that the hospitals were able to keep up with the policy shifts through exploring feasible alternatives. However, DOH-retained institutions garner more favorable outcomes than public district hospitals since resources were directly transferred to them from the DOH Regional Office. Crafting context-specific policies addressing public health crises is recommended following the results of this study.