

# REPUBLIC OF THE PHILIPPINES DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT

A. Francisco Gold Condominium II, EDSA corner, Mapagmahal St., Diliman, Quezon City



MEMORANDUM CIRCULAR

NO. 2011 - 145

TO

:

ALL PROVINCIAL GOVERNORS, CITY AND MUNICIPAL MAYORS, PUNONG

October 5, 2011

BARANGAYS, DILG REGIONAL DIRECTORS AND OTHERS CONCERNED

SUBJECT

CONDUCT OF KALUSUGAN PANGKALAHATAN - COMMUNITY HEALTH TEAM

**MOBILIZATION** 

Administrative Order No. 2010-0036 entitled, "The Aquino Health Agenda: Achieving Universal Health Care for All Filipinos" was issued to provide strategic thrust to carry out the Universal Health Care or Kalusugan Pangkalahatan (KP) for the Filipino poor families.

To ensure delivery of basic health services to the poorest National Household Targeting System-Poverty Reduction (NHTS-PR) households including beneficiaries of the Conditional Cash Transfer (CCT) Program, the Department of Health (DOH) with the Department of Social Welfare and Development (DSWD), Department of Education and this Department (DepEd), being part of the Human Development and Poverty Reduction (HDPR) Cabinet Cluster, through convergence approach, shall implement the Kalusugan Pangkalahatan (KP) – Community Health Team (CHT) Mobilization nationwide.

Series of KP - CHT mobilization-related activities will be conducted and arranged by the DOH through its respective Center for Health Development/Regional Health Office (CHD/RHO).

In this regard, all Local Chief Executives in coordination with CHD/RHO of the DOH, are hereby enjoined to provide support on the following:

- a) Organization, orientation and mobilization of CHT;
- b) Monitoring and validation of CHT reports to be submitted to the CHD/RHOs through the Local Health Offices; and
- c) Logistical and other necessary assistance to ensure the successful implementation of KP-CHT mobilization.

Likewise, all DILG Regional Directors are hereby directed to:

- a) Assign Regional and field office focal persons on KP- CHT who shall be responsible in closely coordinating with the CHD/RHO relative to the orientation and conduct of CHT mobilization;
- b) Ensure attendance to the coordination meetings called by the DOH in their respective region including participation in other activities related to KP-CHT mobilization;
- c) Assist the regional and local health offices within their respective jurisdiction, in coordinating with the LGUs, matters related to the conduct of the CHT orientation and mobilization; and
- d) Submit report on the implementation of KP-CHT mobilization to the Office of Undersecretary for Local Government (OUSLG) using the attached templates.

For compliance of all concerned.

JESSE M. ROBREDO Secretary



## **CHT FORM 01**

# COMMUNITY HEALTH TEAM (CHT) MONITORING FORM As of \_\_\_\_\_

Region :	
Province :	
City/Mun. :	
No. of Brgy.:	
No. of Community Health Teams Organized:	
LGU Participation extended through DILG - e.g. ve	enue, transportation, food for CHT, etc. (specify all)
Issues and Concerns (If any)	
Domonics (any other information comments at a that	move not be now of the issues and concerns)
Remarks (any other information, comments, etc. that	may not be part of the issues and concerns)
	Prepared by:
	City Director/MLGOO
Submitted by:	
Provincial Director	

Note:

CHT Form 01 will be used to gather information at the city and municipal level.

It will be the basis for consolidation using CHT Form 02, for submission at DILG. Central Office.

#### CHT FORM 02

## COMMUNITY HEALTH TEAM MOBILIZATION REGIONAL MONITORING FORM

Region

**Province** 

Total No. of Municipality

Total No. of Barangays

No. of CHT Organized

LGU PARTICIPATIO N				8829	
( Pls. Check)	( Pls. Check)	FOOD ( $\checkmark$ ) ( Pls. Check)	OTHERS (SPECIFY)	MAJOR ISSUES AND CONCERNS	REMARKS
(1)	(2)	(3)	(4)	(5)	(6)
		7 5	- 5		
		4 6			
		: 3		1748 122	3 3
	Marca arcinae concuestrs	no reconnilente	(O) E		Sport de mon
oluma 6	<b>Indicate o</b> ther informatio	and inputs relate	d to the implements	tion of the CHT mobilization	
comma s	Refreste only the most co	menon and major :	22062 2110 COHCSUID I	elated to the implementation	
elumn 4	Include/specify other ass	tance exten <b>ded</b> b	y the LGUs, if any.		
	and white beneficialises a	trie naratigay iev			
	at the barangay level ( thi	is a door to door	of visit of the team t	a the CCT beneficiaries	
cluma 3	Check if the LGU provides	food and snacks	during the conduct o	f actual CHT mobilization.	

		Prepared by:
Submitted by:		
	conduct of Ciff Mobilization	
	Check or indicate the transportation provided by the LGU during the orientation	PLGOO/CLGOO

**Regional Director** 

#### Instructions to Fill-out CHT Form 02

Column 1	Check or indicate the transportation provided by the LGU during the orientation and actual conduct of CHT Mobilization							
Column 2 FEE PA	Check if the LGU provided the venue during the orientation and actual conduct of CHT  Mobilization  Check if the LGU provided the venue during the orientation and actual conduct of CHT  Oceoberg ph:							
Column 3	Check if the LGU provided	Check if the LGU provided food and snacks during the conduct of actual CHT mobilization						
	at the barangay level (this and NHTS beneficiaries at			the CCT beneficiaries				
Column 4	Include/specify other assi	stance extended l	by the LGUs, if any.		*			
Column 5	Indicate only the most cor of the CHT mobilization	nmon and major	issues and concerns re	lated to the implemenation				
Column 6	Indicate other information and inputs related to the implementation of the CHT mobilization which include comments and recommendations							
	(2)	(3)						
			OTHERS (SPECIFY)					
TRANSPORTATION ( )	TRAINING VENUE ( \ )							
marchen nuRenissa		TION						

Province
Total No. of Municipality
Total No. of Barangays