 <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p> <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p>	Document Code:	DPOTMH-C-27-P01-S02
	Effective Date:	06-30-2022
	Document Type:	Standard Operating Procedure
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	Department/Section:	Medical Social Services
	Document Title:	IDENTIFYING HOUSE CASE PATIENTS

**PURPOSE:**

1. To classify house case patients as indigent.
2. To increase the accessibility of patients from low-income families to quality health services.

**SCOPE:**

Applies to Medical Social Services and Resident Doctors of Dr. Pablo O. Torre Memorial Hospital (DPOTMH)

**PERSON RESPONSIBLE:**


Medical Social Worker, Residents, Medical Director

**DEFINITION OF TERMS:**

1. **Housecase.** A patient who is admitted to RMCI under the Departments of Surgery, OB-Gyne, Pediatrics, and Internal Medicine.
2. **Indigent.** A person who has no visible means of income or whose income is *insufficient for the subsistence of his family.*
3. **Poverty threshold.** The minimum income/expenditure required for a *family/individual to meet the basic food and non-food requirements.*

**POLICY:**

1. All patients who were examined by the resident physicians shall be referred to the Medical Social Worker using the MSS Form 1.
2. The patient and their family shall live below the poverty threshold in order to *qualify as indigent.*
3. To prove their eligibility, the referred patient/representative shall provide an original copy of the Certificate of Indigency from their barangay.


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4. The Medical Social Worker shall determine the qualification of the patients through an interview.
5. The patient/representative shall sign a consent form for the use of their personal and medical information.
6. The Medical Social Worker shall notify the patient/representative if they are qualified to the program or otherwise.
7. Qualified patients shall be subject for approval by the Medical Director.
8. All approved housecase patients shall be classified as indigent.
9. All documents and data gathered from the patient/representative shall be kept *confidential*.

#### **PROCEDURE:**

1. Service hours are Monday to Friday, from 8:00 AM to 5:00 PM.
2. The patient/representative presents the MSS form 1 from the Resident physician.
3. The patient/representative presents the Certificate of Indigency from their Barangay.
4. The Medical Social Worker interviews the patient/representative and orients them about the Housecase admission.
5. The Medical Social Worker evaluates the patient's eligibility, prepares the patient's Medical Social Profile (MSS form 2), and submits the documents to the Medical Director for approval.
6. The Medical Social Worker informs the resident physician and the patient/representative of their approved request.




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
7. The patient avails of the requested procedure.


#### **REFERENCE:**

1. DOH – Manual for Medical Social Workers Fifth Edition
2. <https://www.officialgazette.gov.ph/2004/02/10/republic-act-no-9241/>
3. Philippine Statistics Authority - Highlights of the First Semester 2021 Official Poverty Statistics

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**APPROVAL:**

	Name/Title	Signature	Date
Prepared by:	<b>CHARMAINE M. VILORIA, RSW</b> Medical Social Services Supervisor		06/15/2022
Reviewed:	<b>DENNIS C. ESCALONA, MN, FPSQua, FPCHA</b> Quality Assurance Supervisor		06/15/2022
Recommending Approval:	<b>FREDERIC IVAN L. TING, MD</b> OIC-Total Quality Division Head		
	<b>MA. ANTONIA GENSOLI, MD, FPPS, FPCHA</b> Vice President- Chief Medical Officer		
	<b>SOCORRO VICTORIA L. DE LEON, CPA, MBA, PhD</b> Vice President- Chief Operating Officer		
Approved:	<b>GENESIS GOLDI D. GOLINGAN</b> President and CEO		

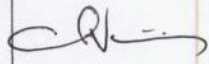

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KEY TASKS	PERSON RESPONSIBLE
1. Presents the MSS form 1 from the Resident physician.	Patient/representative
2. Presents the Certificate of Indigency from their Barangay.	
3. Interviews the patient/representative and orients them about the Housecase admission.	Medical Social Worker
4. Evaluates the patient's eligibility, prepares the patient's Medical Social Profile (MSS form 2), and submits the documents to the Medical Director for approval.	
5. Informs the resident physician and the patient/representative of their approved request.	
6. Avail of the requested procedure.	Patient/representative



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	<b>MA. ANTONIA GENSOLI, MD, FPPS, FPCHA</b> Vice President- Chief Medical Officer		
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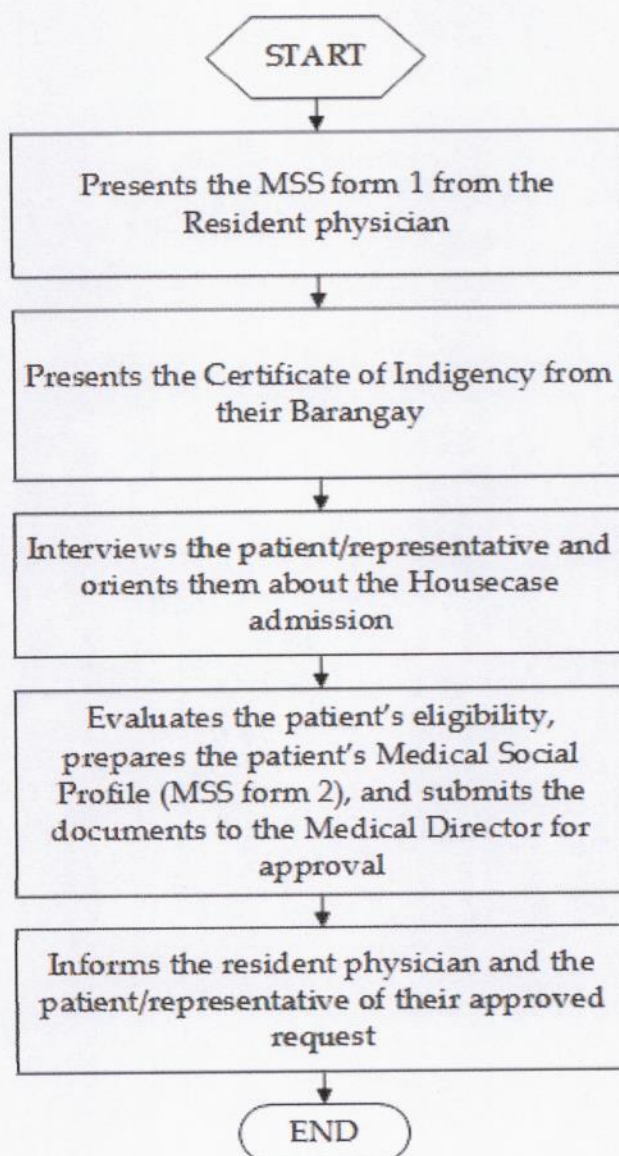


DR. PABLO O. TORRE  
MEMORIAL HOSPITAL


B.S. Aquino Drive,  
Bacolod City,  
Negros Occidental,  
6100

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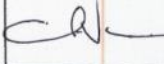

## FLOWCHART





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