



Republic of the Philippines
Department of Health
'AMANG' RODRIGUEZ MEMORIAL MEDICAL CENTER
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December 14, 2023

TO: IMELDA M. MATEO, MD, MBAH, FPCP, FPCCP
Medical Center Chief II

Dear Dr. Mateo:

Warm greetings of wellness!

Respectfully submitting to your good office, the Customer Satisfaction and Internal Relations Satisfaction Survey results and analysis for the month of November 2023.

Thank you very much.

Sincerely yours,

MARRIEL BRIGETTE F.C. FERRER-DELA REYNA, MD, DPPS
Chairperson, Customer Satisfaction Survey Subcommittee



**CUSTOMER SATISFACTION SURVEY SUBCOMMITTEE REPORT
MONTH OF NOVEMBER 2023**

I. OVERVIEW

Amang Rodriguez Memorial Medical Center is a tertiary DOH-retained hospital that serves patients from Marikina City, cities/towns of Rizal Province, and nearby places such as Quezon City and Pasig City.

As of October 2023, the revised ARMMC Customer Satisfaction Survey and the Internal Relations Survey Forms are available in all areas. The use of this harmonized survey form is in compliance with the DM No. 2023-0131, *Interim Guidelines on the Use of the Harmonized Hospital Client Experience Survey (HCES) Tool to Measure Responsiveness* and to ARTA Memorandum Circular (M.C.) No. 2022-05, government agencies shall administer the CSM to all clients with completed transactions.

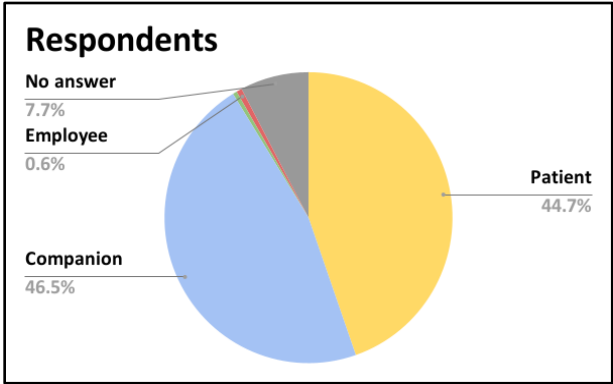
II. DATA AND INTERPRETATION

The November survey showed that there were 1286 respondents. Compared to the previous month, there was a 36% increase in the survey respondents.

A. DEMOGRAPHICS

Customer Type

According to the type of customer, among the respondent majority classified themselves as patient companions (45.5%), which majority were patient companions. There were 0.6% who are employees.

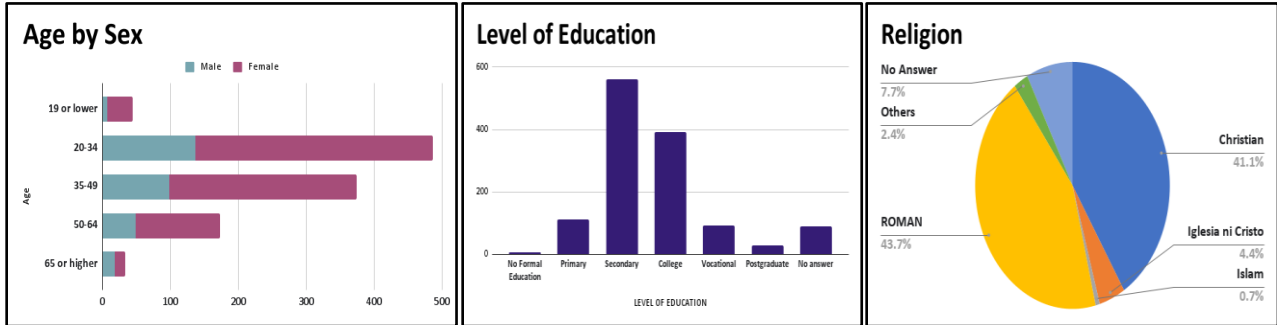


Office/ Department Visited and Frequency of Visit

Majority of the respondents were from the Medical Social Work (38.3%), and Inpatient services (27.6%). Other respondents visited other administrative offices (5.1%), Information and Admitting (2.3%), Cashier/Billing (1.9%) and the least was Emergency Room (1.2%). Majority of the respondents were first time in the institution.

Age by Sex, Level of Education, and Religion

Majority of the respondents identified themselves as female and from the 20-34 age group. Majority completed secondary education and are Roman Catholic.





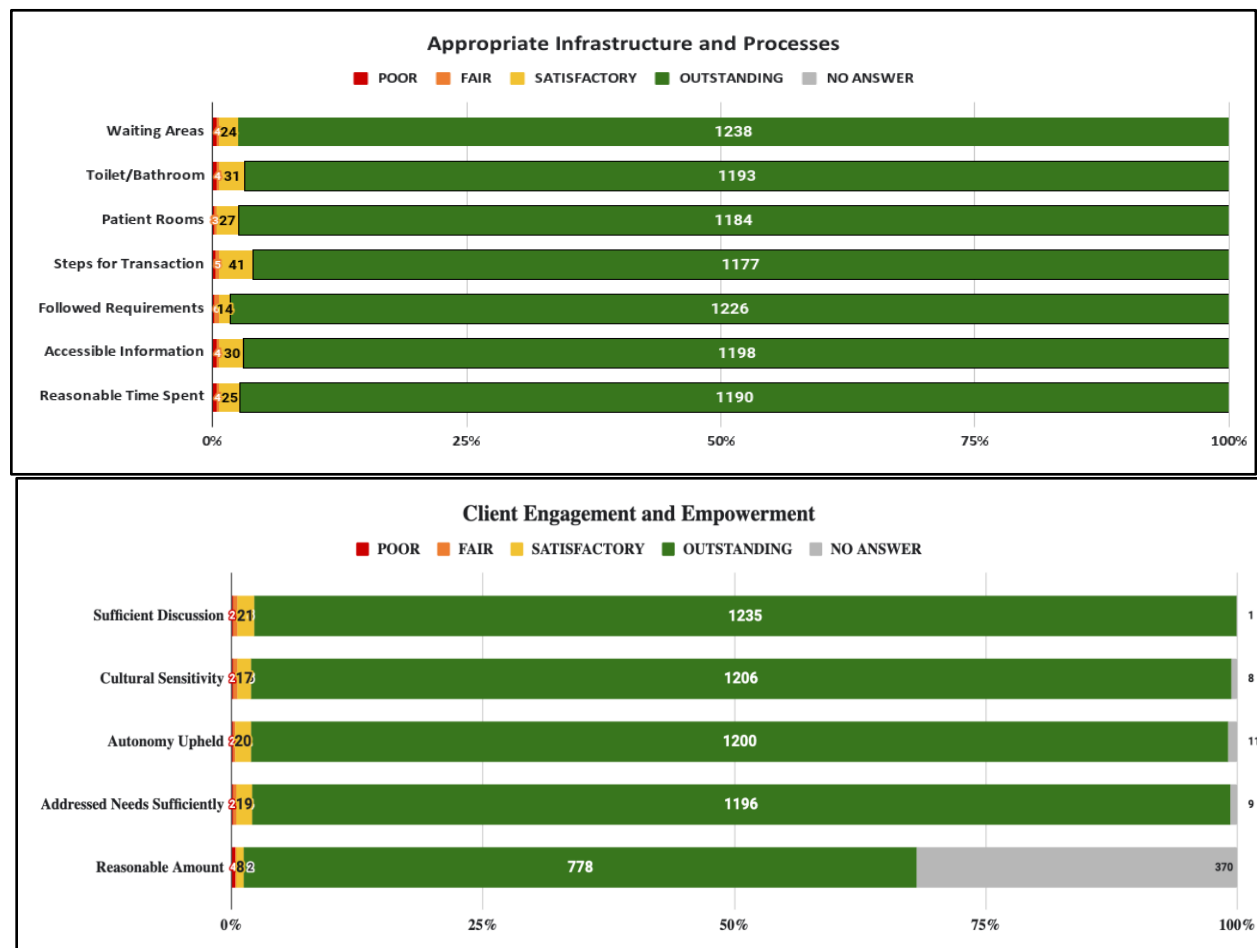
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B. RESPONSIVENESS ANALYSIS

The assessment of the respondents to the 3 strategies on responsiveness namely, Strategy on Appropriate Infrastructure and Processes (95.24%), Strategy on Client Engagement and Empowerment (97.02%), Strategy on Culture Responsiveness (96.34%) were all with OUTSTANDING ratings, hence the overall responsiveness score (Hospital Scorecard Score) for this month was 96%.

Appropriate Infrastructure and Processes	Assessment			
	POOR	FAIR	SATISFACTORY	OUTSTANDING
	2	7	52	1221
	0.16%	0.55%	4.06%	95.24%
Client Engagement and Empowerment	Assessment			
	POOR	FAIR	SATISFACTORY	OUTSTANDING
	2	5	31	1237
	0.16%	0.39%	2.43%	97.02%
Culture of Responsiveness	Assessment			
	POOR	FAIR	SATISFACTORY	OUTSTANDING
	6	1	40	1238
	0.47%	0.08%	3.11%	96.34%
Overall	Assessment			
	POOR	FAIR	SATISFACTORY	OUTSTANDING
	2	6	42	1224
	0.16%	0.47%	3.30%	96.08%

97% of the respondents gave an OUTSTANDING rating to all the specific areas measured under the strategies of Appropriate Infrastructure and Processes and Client Engagement and Empowerment.



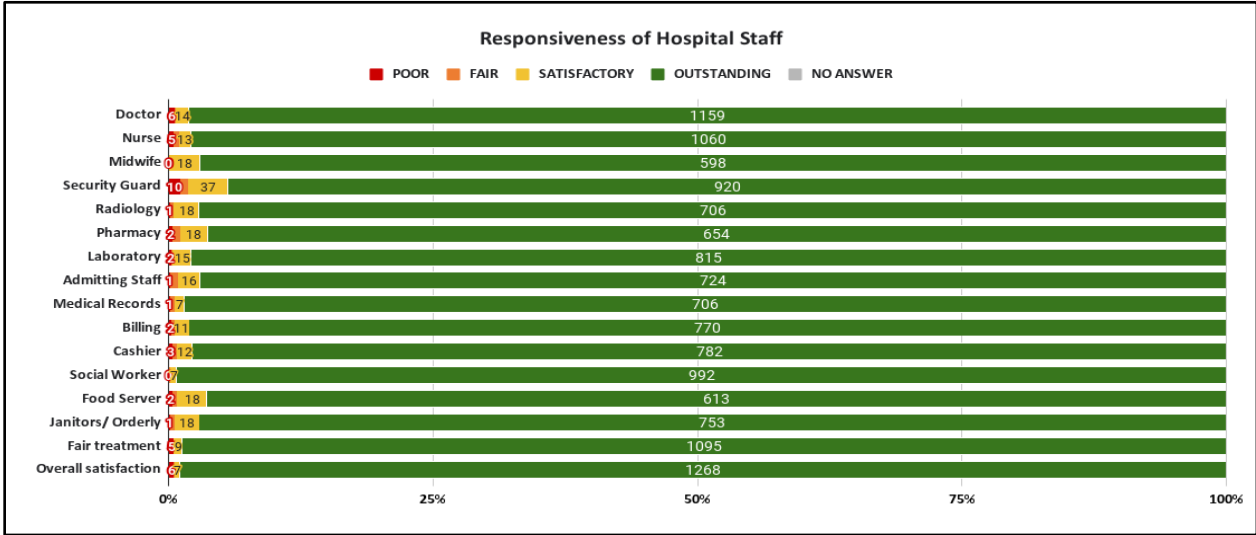


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The staff were rated by the majority of the respondents as OUTSTANDING. Those who rated the frontline staff, less than 1% gave a POOR rating. Moreover, the security guard received the highest number of poor (10) and fair (37) ratings. With regards to fair treatment and overall satisfaction experience, the majority had OUTSTANDING experience and only few respondents were dissatisfied.



C. CITIZEN CHARTER ANSWERS ANALYSIS

Based on the number of completed transactions per service indicated below, the minimum number of respondents were calculated. Based on the calculated minimum number of respondents, only the Medical social Work Service had a sufficient number of respondents. The other services had a low number of respondents and response rates.

No.	External	Responses	Total Transaction	Overall Rating	Number of Minimum Respondents
1	Consultation	260	22,850	1.1%	378
2	Admission	32	1,357	2.4%	300
3	Laboratory	2	9,591	0.0%	369
4	Radiology	5	7,073	0.1%	364
5	Discharge	92	1,305	7.0%	297
6	Settlement of Fees (billing/cashier	23	8,898	0.3%	368
7	Request for Medical Records	19	1,695	1.1%	313
8	Request for Psychosocial Assessment or Intervention	9	105	8.6%	83
9	Request for Financial Assistance	486	4,711	10.3%	355
10	Counseling (i.e. Nutrition and Dietetics)	0	16	0.0%	15
11	Other Services	55	5,580	1.0%	359
External Services Total		983	63,181	2.9%	
OVERALL TOTAL		983	63,181	3%	



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The overall response score for the questions about Citizen Charter (CC) knowledge was 21.19%, visibility was 17.05%, and helpfulness was 20.80%. The responses showed that the CC was visible in the areas visited (64.36%), easy to see (71.74%), and the CC in the areas were very helpful to them (73.86%).

NO.	CC QUESTIONS	TOTAL		
		Responses	%	Overall Score
CC1	I know what a CC is and I saw this office’s CC.	820	64.36%	21.19%
CC1	I know what a CC is but I did NOT see this office’s CC.	38	2.98%	
CC1	I learned of the CC only when I saw this office’s CC.	159	12.48%	
CC1	I do not know what a CC is and I did not see one in this office (Answer ‘N/A’ on CC2 and CC3)	63	4.95%	
CC2	Easy to see	914	71.74%	17.05%
CC2	Somewhat easy to see	90	7.06%	
CC2	Difficult to see	15	1.18%	
CC2	Not visible at all (Skip question CC3)	19	1.49%	
CC2	Not applicable	48	3.77%	
CC3	Helped very much	941	73.86%	20.80%
CC3	Somewhat helped	58	4.55%	
CC3	Did not help	4	0.31%	
CC3	Not applicable	57	4.47%	

The overall customer satisfaction among 1285 respondents was 99%. Among the Service Quality Dimensions, Assurance received the highest rating of 99%. Other dimensions were all above 95%. The overall service quality dimension rating was 98%.

BREAKDOWN OF THE RESULTS PER SERVICE QUALITY DIMENSION									
SERVICE QUALITY DIMENSIONS		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	NOT APPLICABLE	RESPONSES	OVERALL
SQD0	Overall Satisfaction	1185	83	7	1	6	3	1285	99.00%
SERVICE QUALITY DIMENSIONS		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	NOT APPLICABLE	RESPONSES	OVERALL
SQD1	Responsiveness	971	219	25	5	4	8	1232	97.00%
SQD2	Reliability	1011	215	14	6	2	0	1248	98.00%
SQD3	Access and Facilities	940	237	41	5	3	6	1232	96.00%
SQD4	Communication	994	204	30	4	4	2	1238	97.00%
SQD5	Costs	638	127	8	2	4	380	1159	98.00%
SQD6	Integrity	1001	94	9	1	7	16	1128	98.00%
SQD7	Assurance	936	74	1	1	5	0	1017	99.00%
SQD8	Outcome	996	196	19	4	2	9	1226	98.00%
OVERALL SQD		7487	1366	147	28	31	421	9480	98.00%



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SQD0 AND SERVICE QUALITY DIMENSIONS ANALYSIS

The Overall score for the 8 SQDs were computed based on the following formula:

$$\text{Overall Score} = \frac{\text{Number of 'Strongly Agree' answers} + \text{Number of 'Agree' answers}}{\text{Total Number of Respondents} - \text{Number of 'N/A' answers}}$$

III. AREA SATISFACTION RATINGS (See attached tables in Annex A)

The overall satisfaction survey rating was 98%.

IV. COMPLAINTS

There were 3 issued complaints for the month of November from the survey forms and all were issued to the Nursing Service. Two (2) were due to attitude problems and 1 due to delay in the provision of service. All the concerns were classified under Integrity and Conduct.

V. SUMMARY AND RECOMMENDATION

The survey result for the month of November showed that the majority of the CSS survey respondents were generally very satisfied with the services they received. Although there were few respondents who gave a POOR rating, the majority had an outstanding experience with the services they received at the time of their visit. Also based on the concerns raised by the respondents, there was a shift from processes concerns to staff attitude concerns.

The visibility of the Citizen Charter and the improvements made in the infrastructure have a notable impact in clients' increased client satisfaction. Provision of comfortable space, making sure that the processes are implemented properly, and good communication skills are the 3 identified factors in the November survey result that contributes to the overall outstanding client experience.

The low number of respondents compared to the computed minimum number of respondents is a major concern to all external service providers except for the services of the Medical Social Work (Malasakit Center) who constantly meet the required minimum requirement of respondents.

The Customer Satisfaction Subcommittee members are constantly reminding all areas to offer the survey forms provided in their respective areas to increase their number of respondents. Moreover, with the increasing concerns regarding staff attitude, the subcommittee is planning to conduct a Customer Experience activity among staff assigned in all frontline services starting January 2024.

Prepared By:

Marriel Brigette F. C. Ferrer-Dela Reyna, MD, DPPS
Chairperson, Customer Satisfaction Subcommittee

Noted By:

IMELDA M. MATEO, MD, MBAH, FPCP, FPCCP
Medical Center Chief II



CUSTOMER SATISFACTION SURVEY SUBCOMMITTEE REPORT
MONTH OF NOVEMBER 2023

ANNEX A

I. ER/INPATIENT

The ER and inpatient services received an overall satisfaction rating of 99% and 100% of the respondents experienced fair treatment at the time of their visit in the Emergency Room and while they were admitted. Among the areas PICU received 80% satisfaction rating and all the rest were 100%. However, COVID Ward had no respondents. Based on the census for discharge, the number of minimum respondents were not met. There was 1 issued client concern from the Medicine Ward regarding delay in the provision of documents needed by the patient’s relative requested in the Medical Records.

A. CUSTOMER SATISFACTION RATING

November 2023	ER/INPATIENT CUSTOMER SATISFACTION						
	OUTSTANDING		SATISFACTORY	FAIR	POOR	TOTAL RESPONDENTS	SATISFACTION RATING
AREA	5	4	3	2	1		
EMERGENCY ROOM	2	0	0	0	0	2	100.00%
DIALYSIS	8	0	0	0	0	8	100.00%
LR/DR	16	3	0	0	0	19	100.00%
PEDIA WARD	19	3	0	0	0	22	100.00%
PICU	3	1	0	0	1	5	80.00%
NICU	7	0	0	0	0	7	100.00%
ICU PAY	2	0	0	0	0	2	100.00%
ICU CHA	3	0	0	0	0	3	100.00%
IMCU	7	0	0	0	0	7	100.00%
SICU	1	0	0	0	0	1	100.00%
SURGERY WARD	10	2	0	0	0	12	100.00%
CD WARD	19	1	0	0	0	20	100.00%
COVID WARD	0	0	0	0	0	0	
TOTAL	97	10	0	0	1	108	99.07%

B. RATING ON FAIR TREATMENT

November 2023	ER/INPATIENT CUSTOMER EXPERIENCE ON FAIR TREATMENT (no palakasan)						
	OUTSTANDING		SATISFACTORY	FAIR	POOR	TOTAL RESPONDENTS	SATISFACTION RATING
AREA	5	4	3	2	1		
EMERGENCY ROOM	2	0	0	0	0	2	100.00%
DIALYSIS	8	0	0	0	0	8	100.00%
LR/DR	15	3	0	0	0	18	100.00%
PEDIA WARD	29	3	0	0	0	32	100.00%
PICU	2	1	0	0	0	3	100.00%
NICU	7	0	0	0	0	7	100.00%
ICU PAY	1	0	0	0	0	1	100.00%
ICU CHA	3	0	0	0	0	3	100.00%
IMCU	7	0	0	0	0	7	100.00%
SICU	1	0	0	0	0	1	100.00%
SURGERY WARD	10	2	0	0	0	12	100.00%
COVID WARD	0	0	0	0	0	0	
TOTAL	85	9	0	0	0	94	100.00%



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II. OUTPATIENT DEPARTMENT

The overall Satisfaction Rating of the OPD was 98.69% and also 98.69% of the total respondents for outpatient services claimed that they experienced fair treatment during the time of their consultation. There were 2 issued client concerns to the OPD nursing service due to attitude. The highest number of respondents were from the Animal Bite Treatment clinic. For this month the CAM has no respondents. Based on the computed minimum number of respondents based on the completed transactions of consultations from the OPD and ER the required number was not met. It is recommended to increase the number of respondents by offering the available survey forms in each clinic.

A. CUSTOMER SATISFACTION RATING

November 2023	OPD CUSTOMER SATISFACTION						
	OUTSTANDING		SATISFACTOR Y	FAIR	POOR	TOTAL RESPONDENTS	SATISFACTION RATING
AREA	5	4	3	2	1		
ANIMAL BITE	63	0	0	0	0	63	100.00%
FAMILY AND COMMUNITY MEDICINE	11	1	0	0	0	12	100.00%
ACUTE PSYCHIATRIC UNIT	14	2	0	0	0	16	100.00%
INTERNAL MEDICINE	40	5	0	0	0	45	100.00%
DERMA	10	2	0	0	0	12	100.00%
ACTU	30	4	1	0	0	35	97.14%
ANESTHESIA	1	0	0	0	0	1	100.00%
OBSTETRICS AND GYNECOLOGY	4	1	0	0	0	5	100.00%
FAMILY PLANNING	1	0	0	0	0	1	100.00%
REHABILITATION MEDICINE	13	2	0	0	0	15	100.00%
GENERAL SURGERY	10	0	0	0	0	10	100.00%
ORTHO	0	0	0	0	0	0	
PEDIATRICS	18	2	2	0	0	22	90.91%
NTP	9	0	0	0	0	9	
OPHTHALMOLOGY	5	0	0	0	0	5	100.00%
ENT	18	3	0	0	0	21	100.00%
OPD SCREENING/TRIAGE	4	0	1	0	0	5	80.00%
CAM	0	0	0	0	0	0	
DENTAL	28	1	0	0	0	29	100.00%
TOTAL	279	23	4	0	0	306	98.69%

B. RATING ON FAIR TREATMENT



CUSTOMER SATISFACTION SURVEY SUBCOMMITTEE REPORT
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November 2023	OPD CUSTOMER EXPERIENCE ON FAIR TREATMENT (no palakasan)					TOTAL RESPONDENTS	SATISFACTION RATING
	OUTSTANDING	SATISFACTORY	FAIR	POOR			
AREA	5	4	3	2	1		
ANIMAL BITE	67	0	0	0	0	67	100.00%
FAMILY AND COMMUNITY MEDICINE	13	0	0	0	0	13	100.00%
ACUTE PSYCHIATRIC UNIT	14	2	0	0	0	16	100.00%
INTERNAL MEDICINE	39	5	0	0	0	44	100.00%
DERMA	9	3	0	0	0	12	100.00%
ACTU	26	5	1	0	0	32	96.88%
ANESTHESIA	1	0	0	0	0	1	100.00%
OBSTETRICS AND GYNECOLOGY	4	1	0	0	0	5	100.00%
FAMILY PLANNING	1	0	0	0	0	1	100.00%
REHABILITATION MEDICINE	13	1	1	0	0	15	93.33%
GENERAL SURGERY	9	1	0	0	0	10	100.00%
ORTHO	0	0	0	0	0	0	
PEDIATRICS	18	1	1	0	0	20	95.00%
NTP	11	0	0	0	0	11	100.00%
OPHTHALMOLOGY	5	0	0	0	0	5	100.00%
ENT	18	2	0	0	0	20	100.00%
OPD SCREENING/TRIAGE	4	0	1	0	0	5	80.00%
CAM	0	0	0	0	0	0	
DENTAL	28	1	0	0	0	29	100.00%
TOTAL	280	22	4	0	0	306	98.69%

III. ALLIED PROFESSIONAL HEALTH SERVICES

The overall customer satisfaction rating of 99.25% and 99.31% of respondents claimed that they received fair treatment during their visit in the services listed below.

A. 1. CUSTOMER SATISFACTION RATING

Social Work Service /Malasakit Center had the highest number of respondents and the only service who met the computed number of minimum respondents based on their number of completed transactions. Pharmacy has no respondents. Survey forms are available in their area provided by the CSS subcommittee. Other areas are encouraged to increase their number of respondents.

November 2023	ALLIED PROFESSIONAL HEALTH SERVICES CUSTOMER SATISFACTION						TOTAL RESPONDENTS	SATISFACTION RATING
	OUTSTANDING	SATISFACTORY	FAIR	POOR				
AREA	5	4	3	2	1			
DIAGNOSTICS	40	5	0	0	1	46		97.83%
LABORATORY	2	0	0	0	0	2		100.00%
RADIOLOGY	5	0	0	0	0	5		100.00%
ADMITTING/INFORMATION	29	1	0	0	0	30		100.00%
SWA/MALASAKIT	429	33	1	0	0	463		99.78%
MAIN MEDICAL RECORDS	16	3	1	0	0	20		95.00%
OPD MEDICAL RECORDS	20	0	0	0	0	20		100.00%
NUTRITION AND DIETETICS	83	0	0	0	2	85		97.65%
PHARMACY	0	0	0	0	0	0		
TOTAL	624	42	2	0	3	671		99.25%

2. CUSTOMER SATISFACTION RATE ON FOOD SERVICE



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For the Food Service provided by the Nutrition and Dietetics, there were 85 respondents from the different wards. Among the respondents 3 claimed that they did not receive food according to the patient diet prescribed by the doctors and 2 claimed that there was a delay in provision of food. Overall, 97.65% were satisfied with the food received while admitted in the hospital.

	OO	HINDI	WALANG SAGOT	TOTAL	SATISFACTION RATE
Ang pagkaing natanggap ay ayon sa order ng duktor (ayon sa diyeta ng pasyente)	81	3	1	84	96.43%
Ang pagkain ay naibigay sa tamang oras	83	2	0	85	97.65%
Nasiyahan ka ba sa mga pagkain na natanggap habang naka-admit?	83	2	0	85	97.65%

B. RATING ON FAIR TREATMENT

November 2023	ALLIED PROFESSIONAL HEALTH SERVICES CUSTOMER EXPERIENCE ON FAIR TREATMENT (no palakasan)						
	OUTSTANDING		SATISFACTORY	FAIR	POOR	TOTAL RESPONDENTS	SATISFACTION RATING
AREA	5	4	3	2	1		
DIAGNOSTICS	37	7	0	0	0	44	100.00%
LABORATORY	2	0	0	0	0	2	100.00%
RADIOLOGY	4	0	0	0	0	4	100.00%
ADMITTING/INFORMATION	29	1	0	0	0	30	100.00%
SWA/MALASAKIT	416	36	4	0	0	456	99.12%
MAIN MEDICAL RECORDS	14	4	0	0	0	18	100.00%
OPD MEDICAL RECORDS	23	0	0	0	0	23	100.00%
PHARMACY	0	0	0	0	0	0	
TOTAL	525	48	4	0	0	577	99.31%

IV. FINANCE SERVICES

All respondents who availed the services of the Finance Division gave a 100% gave an OUTSTANDING rating on the overall satisfaction and experience on fair treatment. However, the number of respondents for this service for the month of November did not meet the computed minimum number of respondents based on the areas completed transactions. There the areas are encouraged to offer the survey forms which are always available in the area. No issued complaints for the Finance Division for the month of November.

A. CUSTOMER SATISFACTION RATING

November 2023	FINANCE SERVICE OVERALL CUSTOMER SATISFACTION						
	OUTSTANDING		SATISFACTORY	FAIR	POOR	TOTAL RESPONDENTS	SATISFACTION RATING
AREA	5	4	3	2	1		
PHILHEALTH	16	3	0	0	0	19	100.00%
BILLING/CASHIER	9	0	0	0	0	9	100.00%
TOTAL	25	3	0	0	0	28	100.00%

B. RATING ON FAIR TREATMENT

November 2023	FINANCE SERVICE CUSTOMER EXPERIENCE ON FAIR TREATMENT (no palakasan)						
	OUTSTANDING		SATISFACTORY	FAIR	POOR	TOTAL RESPONDENTS	SATISFACTION RATING
AREA	5	4	3	2	1		
PHILHEALTH	18	1	0	0	0	19	100.00%
BILLING/CASHIER	9	0	0	0	0	9	100.00%
TOTAL	27	1	0	0	0	28	100.00%



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V. HOPS SERVICE

There were only 2 respondents for the in-house security service. The Satisfaction Rating of the inhouse security area was 100%. Moreover, 100% of the respondents claimed that they are treated fairly during their transaction with the inhouse security.

A. CUSTOMER SATISFACTION RATING

November 2023	HOPS SERVICE OVERALL CUSTOMER SATISFACTION						
	OUTSTANDING		SATISFACTORY	FAIR	POOR	TOTAL RESPONDENTS	SATISFACTION RATING
AREA	5	4	3	2	1		
IN HOUSE SECURITY	2	0	0	0	0	2	100.00%
TOTAL	0	0	0	0	0	2	100.00%

B. RATING ON FAIR TREATMENT

November 2023	EXPERIENCE ON FAIR TREATMENT (no palakasan)						
	OUTSTANDING		SATISFACTORY	FAIR	POOR	TOTAL RESPONDENTS	SATISFACTION RATING
AREA	5	4	3	2	1		
IN HOUSE SECURITY	2	0	0	0	0	2	100.00%
TOTAL	2	0	0	0	0	2	100.00%

VI. INTERNAL RELATIONS SATISFACTION SURVEY

There are only 5 respondents to the Internal Services. The areas with the survey respondents were the MCC office 1) , Budget Office (1) and Engineering services particularly the electromechanical service (2). All respondents gave 100% outstanding ratings to these areas. The use of the survey link must be offered to the offices for internal clients because of the low response rates.

Appropriate Infrastructure and Processes	Assessment			
	POOR	FAIR	SATISFACTORY	OUTSTANDING
	0	0	0	5
	0.00%	0.00%	0.00%	100.00%
Client Engagement and Empowerment	Assessment			
	POOR	FAIR	SATISFACTORY	OUTSTANDING
	0	0	0	5
	0.00%	0.00%	0.00%	100.00%
Culture of Responsiveness	Assessment			
	POOR	FAIR	SATISFACTORY	OUTSTANDING
	0	0	0	5
	0.00%	0.00%	0.00%	100.00%
Overall	Assessment			
	POOR	FAIR	SATISFACTORY	OUTSTANDING
	0	0	0	5
	0.00%	0.00%	0.00%	100.00%

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