

CITIZEN CHARTER
NATIONAL TUBERCULOSIS CONTROL PROGRAM (NTP)
Pasig Health Department

NAME OF SERVICE: Management of the NTP (TB) program

The NTP program manages the over-all implementation of the NTP (TB) program under the guidelines of the Department of Health; coordinates with the region office, different health centers, government hospitals and DOTS accredited private hospitals in Pasig City and selected private organizations; manages program logistics and provides technical assistance and monitoring to the lower health units.

| | |
|-----------------------------|---|
| Office or Division: | National Tuberculosis Control Program Unit |
| Classification: | Simple |
| Type of Transaction: | G2C – Government to Citizens G2G – Government to Government |
| Who may avail: | Health center/TB DOTS staff, Pasig Health Aides duly authorized by the health center staff, TB DOTS staff of DOH DOTS accredited private hospitals and government hospitals; partners from NGOs |

| CHECKLIST OF REQUIREMENTS | WHERE TO SECURE |
|--|--|
| 1. Laboratory results (Gene Xpert, DSSM results) | From accredited laboratories (Rapid TB Diagnostic Laboratories or Microscopy Laboratories) coursed through the Health center or TB DOTS unit |
| 2. Treatment card/s of TB patient to be enrolled | Health Center or TB DOTS units |

| # | CLIENT STEPS | OFFICE ACTIONS | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
|----------|--|--|------------------------|------------------------|---|
| 1 | Health Center staff/TB DOTS unit to present laboratory results or treatment card of the TB patients to be enrolled | 1.The NTP staff receives the request for TB medicines or supplies; 2. NTP staff prepares requested TB medicines or other supplies 3. NTP staff double checks the number of TB supplies to be given | None | 5- 10 minutes | DIÑO, YOLANDA H. / FRANCISCO. CHERRYLYN Z. / RAMOS, MA. ZENAIDA S. |

| # | CLIENT STEPS | OFFICE ACTIONS | FEEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
|--------|--|---|------------------|------------------------------|---|
| | | together with the requesting party. 4. The requesting party signs the logbook as proof of receipt of the TB supplies or medicines. | | | |
| 2 | Health center staff/TB DOTS unit staff to submit monthly or quarterly reports. | 1.The Health Center Staff/TB DOTS Unit staff presents to the reports to the NTP Coordinator/staff. 2. The NTP coordinator checks the reports for completeness and correctness. | None | 5-10 minutes | DIÑO, YOLANDA H. / FRANCISCO. CHERRYLYN Z. / RAMOS, MA. ZENAIDA S. |
| TOTAL: | | | None | 5-10 minutes per transaction | |

Feedback and Complaints

| FEEDBACK AND COMPLAINTS MECHANISM | |
|--|---|
| How to send feedback | Feedback on NTP services may be handed in through verbal or written complaint to the National Tuberculosis Control Program (NTP) Medical Coordinator or City Health Officer. |
| How feedback is processed | All feedback, comments and suggestions will be read by the NTP Medical Coordinator then will consequently be forwarded to the City Health Officer for review and investigation. |
| How to file a complaint | Complaints may be filed directly at the City Health Office through written means. |
| How complaints are processed | The City Health Officer reviews written complaints and conducts an investigation. Complaining or offended parties may be called for further explanation of their case. Offending parties of office being complained will also be called for an investigation and explanation. |
| Contact Information | Tel. 86431111 loc 391; 09176210859 |