



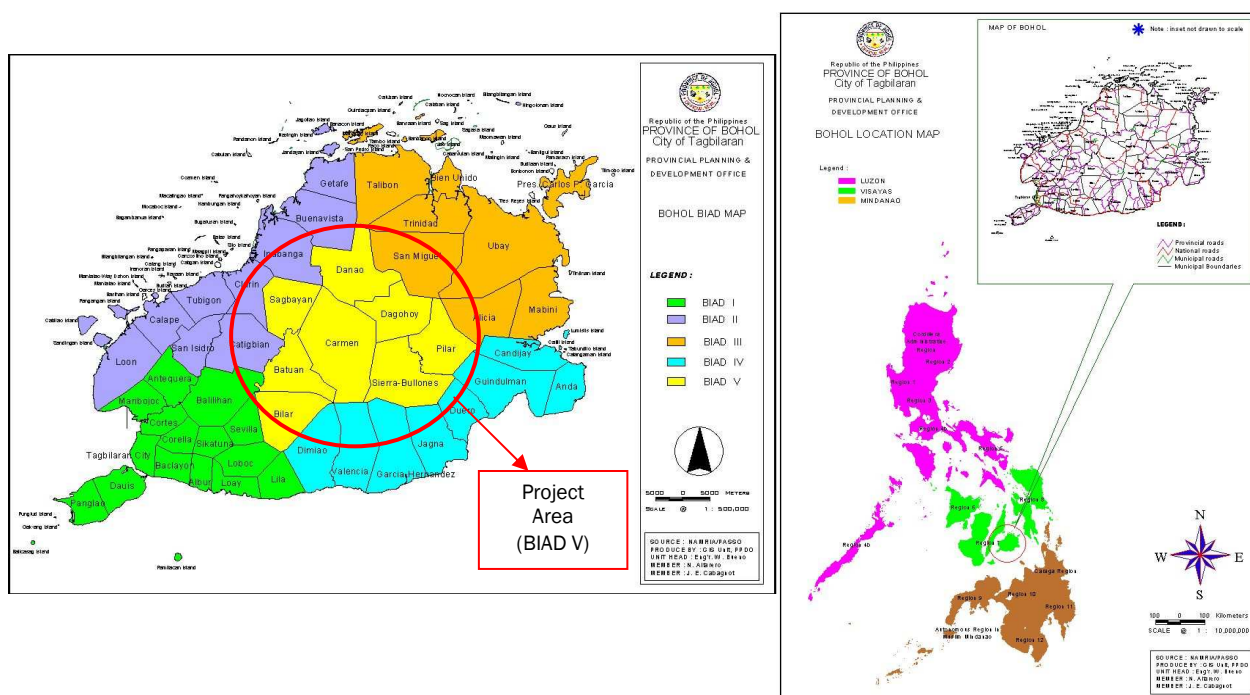
Comprehensive Project Profile

SAFE MOTHERHOOD AND CHILD HEALTH PROGRAM ESTABLISHMENT OF BIRTHING FACILITIES & MOBILE BIRTHING CLINICS

I. PROJECT SETTING

1.1 Geographic Location

The Bohol Integrated Area Development (BIAD) 5 comprises of eight (8) municipalities located in central Bohol, namely Batuan, Bilar, Carmen, Dagohoy, Danao, Pilar, Sagbayan and Sierra Bullones.



1.2 Land Area

BIAD 5 occupies a total land area of 91,719 hectares representing 23 percent of Bohol's total land area. Thirty (30) percent of this is classified as timberland area. Shown in Table 1 is the distribution of land area by type and by municipality of BIAD 5.

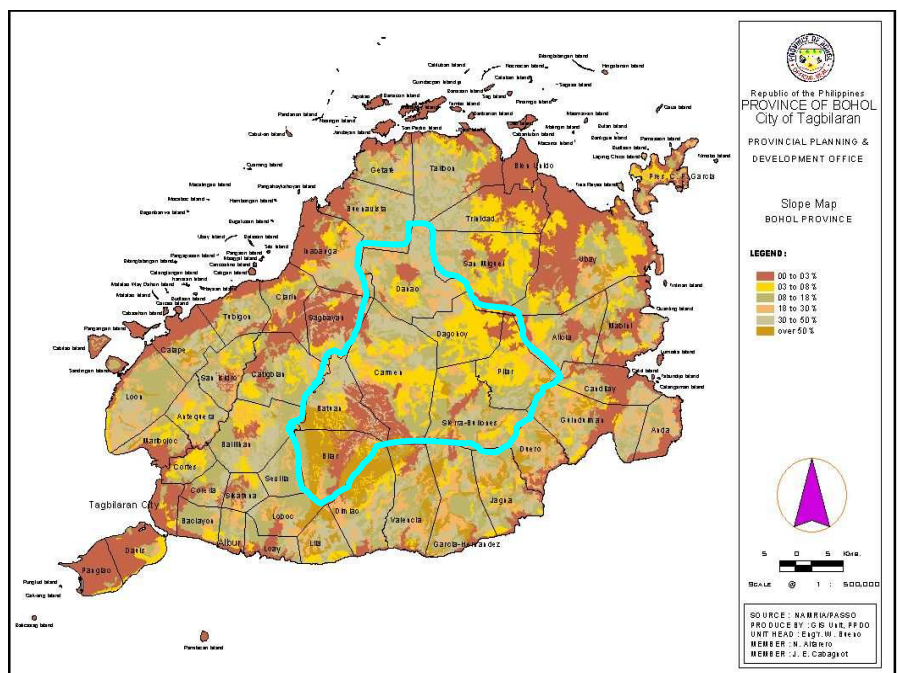
Table 1.01 Land Area by Type and by Municipality: BIAD 5

Location	Land Area (hectares)	Timberland (hectares)	Alienable & Disposable (A&D) Land Area (hectares)
Bohol Province	411,726	101,271	310,455
BIAD 5	91,719	30,205	61,514
Batuan	7,815	2,715	5,100
Bilar	13,315	5,125	8,190
Carmen	24,804	7,178	17,626
Dagohoy	9,101	2,400	6,701
Danao	9,786	3,146	6,640
Pilar	6,248	589	5,659
Sagbayan	9,675	4,940	4,735
Sierra Bullones	10,975	4,112	6,863

Source: DENR, 1999

1.3 Slope & Topography

The slope and topographic characteristics of BIAD 5 is best shown in the map. A large part of the area is characterized as steep hills and mountains with slope 30-50%.



1.3 Population

Historically, the population of the 8 municipalities of BIAD 5 has steadily increased from 89,607 in 1970 to 181,468 in 2007 as shown in the Table below. These municipalities are among the fastest growing areas of Bohol in terms of population growth with an average annual growth rate of 1.49 percent from 1995 to 2007. Records from NSO show that the municipality of Carmen in BIAD 5 had the biggest population size while the municipality of Dagohoy had the fastest growth rate at 2.31 percent among all municipalities of Bohol.

By 2015, the population of most of BIAD 5 municipalities is projected to double.

Table 1.03. Population Census & Annual Population Growth Rate by Municipality: 1970-2007

MUNICIPALITY	Census Year							Annual Population Growth Rate		
	1970 6-May	1975 1-May	1980 1-May	1990 1-May	1995 1-Sep	2000 1-May	2007 1-Aug	1995- 2000	2000- 2007	1995- 2007
Bohol	682,228	756,734	804,421	943,643	994,813	1,139,130	1,230,110	2.36	2.04	2.16
BIAD 5	89,607	104,331	114,165	143,124	151,125	172,226	181,468	2.77	0.68	1.49
Batuan	8,712	9,940	9,833	11,438	11,898	11,835	12,137	-0.11	0.35	0.17
Bilar	11,154	12,226	12,715	14,926	16,029	16,628	17,078	0.79	0.37	0.53
Carmen	19,571	23,580	26,359	34,573	36,797	40,713	43,153	2.19	0.81	1.35
Dagohoy	7,291	8,578	9,451	13,121	13,943	16,845	18,311	4.13	1.16	2.31
Danao	7,362	8,447	10,298	12,671	14,042	17,265	17,716	4.53	0.36	1.97
Pilar	10,888	13,928	14,902	19,930	21,141	25,095	27,276	3.74	1.16	2.16
Sagbayan	10,822	12,500	12,703	15,364	16,488	18,346	19,399	2.31	0.77	1.37
Sierra Bullones	13,807	15,132	17,904	21,101	20,787	25,499	26,398	4.47	0.48	2.02

Source: National Statistics Office

Table 1.04. Projected Population & Households, BIAD 5: 2008-2015

MUNICIPALITY	Projection									
	2008		2009		2010		2012		2015	
	Population	House-holds	Population	House-holds	Population	House-holds	Population	House-holds	Population	House-holds
Bohol Province	1,247,455	244,750	1,261,196	249,653	1,275,214	254,678	1,304,107	265,106	1,349,704	281,743
BIAD 5	84,027	36,659	185,369	37,386	186,723	38,127	189,466	39,654	193,670	42,062
Batuan	12,308	2,680	12,351	2,734	12,394	2,789	12,481	2,901	12,613	3,079
Bilar	17,319	3,381	17,383	3,436	17,447	3,493	17,577	3,609	17,772	3,790
Carmen	43,761	8,571	44,116	8,733	44,473	8,898	45,197	9,237	46,304	9,770
Dagohoy	18,569	3,629	18,785	3,702	19,002	3,776	19,446	3,930	20,131	4,171
Danao	17,966	3,597	18,030	3,686	18,095	3,777	18,226	3,966	18,423	4,268
Pilar	27,661	5,295	27,981	5,405	28,306	5,518	28,967	5,750	29,986	6,118
Sagbayan	19,673	4,292	19,824	4,374	19,977	4,458	20,285	4,630	20,758	4,901
Sierra Bullones	26,770	5,215	26,899	5,316	27,028	5,418	27,288	5,630	27,683	5,964

Source: National Statistics Office

1.4 Poverty Situation

Poverty incidence for all municipalities in BIAD 5 increased for families in 2006 compared to 2003 with largest increase reported in Dagohoy at 23%. Income shortfall of the poor and severity of poverty likewise increased between 2003 and 2006.

Table 1.05. BIAD 5 Poverty Statistics: 2003 & 2005

Municipality	Poverty Incidence			Poverty Gap			Severity of Poverty		
	2003	2005	Inc/Dec	2003	2005	Inc/Dec	2003	2005	Inc/Dec
BIAD 5, Average	37.43	52.08	14.65	11.32	17.19	5.87	4.7	7	2.3
Batuan	30.51	48.75	18.24	8.39	15.16	6.77	3.21	6.35	3.14
Bilar	23.64	39.87	16.23	6.05	11.91	5.86	2.22	0.49	-1.73
Carmen	39.84	54.63	14.79	11.88	18.12	6.24	4.86	7.97	3.11
Dagohoy	38.17	60.94	22.77	11.25	21.54	10.29	4.57	9.87	5.3
Danao	57.21	65.38	8.17	20.61	24.34	3.73	9.62	11.55	1.93
Pilar	45.5	57.36	11.86	14.2	19.31	5.11	6	8.56	2.56
Sagbayan	34.59	44.83	10.24	9.97	13.52	3.55	3.97	5.57	1.6
Sierra Bullones	29.95	44.85	14.9	8.17	13.63	5.46	3.16	5.66	2.5

Source: 2003 Intercensal Small Area Poverty Estimates/Nov 2005 Estimation of Local Poverty in the Philippines, National Statistical Coordination Board-World Bank

1.5 Functional Role of the BIAD

BIAD 5 is considered as the rice granary of the province with 28 percent of rice land in Bohol located in the area. It accounted for most of the rice production in Bohol.

Summary of Farm and Palay Areas (in hectares) of BIAD 5

Municipality	Palay Area	
	Hectarage	Percent Share
1 Batuan	1,602.00	3.05%
2 Bilar	685.00	1.30%
3 Carmen	3,576.83	6.81%
4 Dagohoy	2,551.00	4.85%
5 Danao	825.00	1.57%
6 Pilar	3,188.75	6.07%
7 Sagbayan	978.30	1.86%
8 Sierra Bullones	1,455.49	2.77%
BIAD 5, Total	14,862.37	28.28%
BOHOL	52,554.85	100%

II. PROJECT DESCRIPTION

2.1 Project Title

ESTABLISHMENT OF BARANGAY BIRTHING CLINICS AND MUNICIPAL MOBILE BIRTHING CLINICS IN THE 8 MUNICIPALITIES OF BIAD¹ 5

2.2 Project Proponents

BIAD 5 Municipalities, Bohol Province
(Municipal Governments of Batuan, Bilar, Carmen, Dagohoy, Danao, Pilar, Sagbayan and Sierra Bullones)

2.3 Project Type

- a) Capital forming - for the establishment of birthing clinics and procurement of Ambulance fully equipped to serve as Mobile Birthing Clinic
- b) Technical assistance - Setting-up/operationalization of birthing clinics

2.4 Project Components

The project includes three (3) components. These are:

a) Establishment of Mobile Birthing Clinic (MBC)

This involves the purchase of an ambulance-type vehicle that shall serve as the mobile birthing clinic. Said vehicle will be equipped with instruments and other tools and supplies needed for a safe childbirth compliant with the PhilHealth and Department of Health (DOH) standards. It will provide emergency obstetric care especially to far-flung communities to be backed-up by access to primary/referral-level facilities.

Each municipality shall have a Mobile Birthing Clinic which will be stationed at its Main Health Center. Maintenance of the MBC will come from the Municipal Government Unit with possible counterpart funds from their component barangays.

b) Expansion of Barangay Health Stations (BHS) as Birthing Clinics²

The existing 48 BHSs in BIAD 5 covering 8 municipalities in 121 barangays/villages will be enhanced to serve as birthing clinics according to PhilHealth accreditation and DOH standards.

The specific location and coverage of the birthing clinic are shown in Annex 1.

¹ See Annex 2 for BIAD description

² Birthing Clinic/Center is a facility where human births occur on a regular and on-going basis.

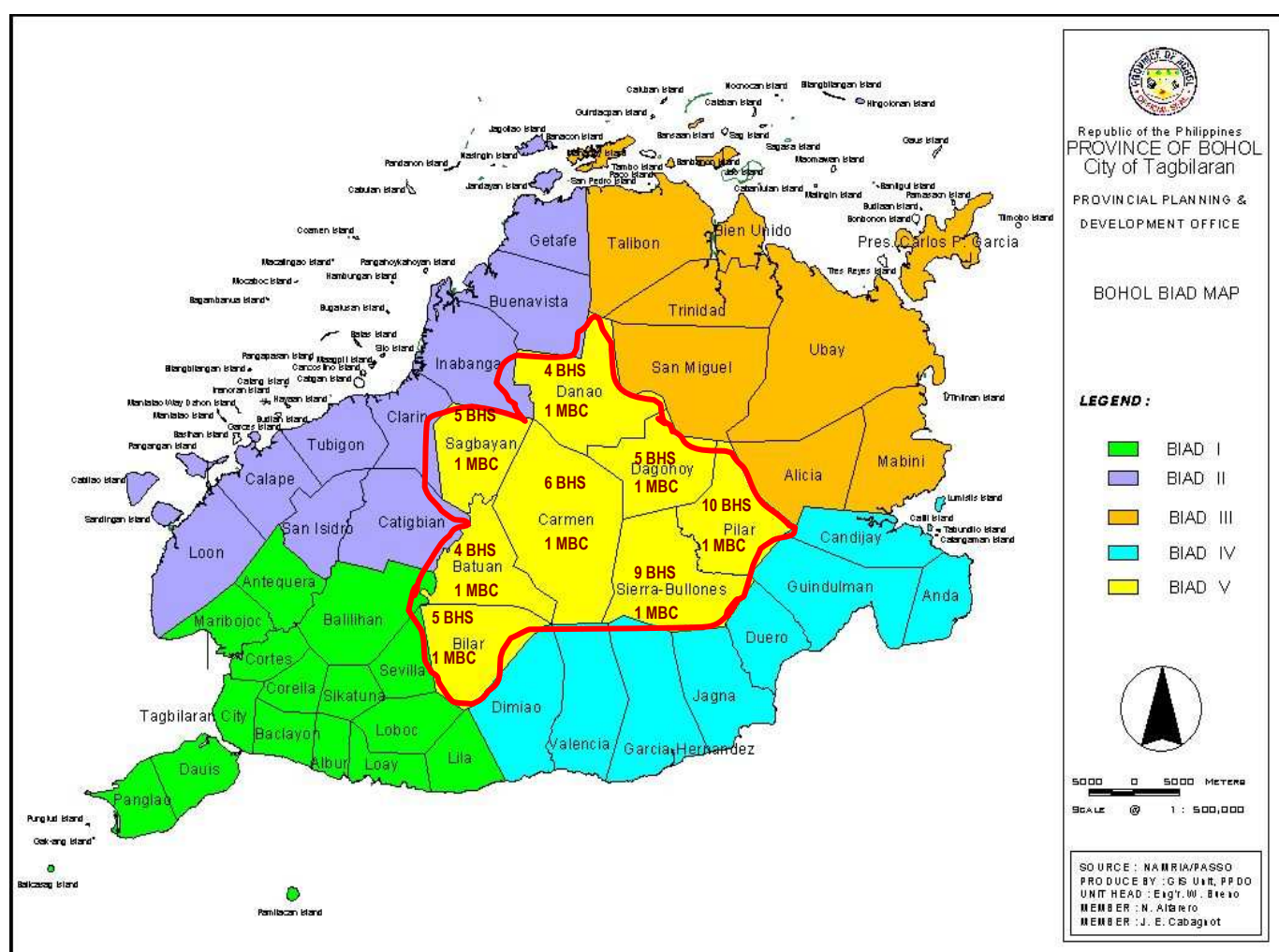
- c) Operationalization of Mobile Birth Clinics and RHUs/BHSs as Birth Clinics by the Municipal Government in compliance with PhilHealth accreditation and DOH standards that can sustain cost-effective delivery and equitable utilization by everyone in need. Such clinics may also be expanded to include new-born screening services that comply with the standards established by the National Institute of Health (NIH) of the Department of Health (DOH).

Legal Framework:

- > DOH Administrative Order No. 2007-0039
- > 1999 Joint World Health Organization (WHO)/UNFPA/UNICEF/World Bank Statement

Project Location:

The proposed project will be established in the municipalities of Batuan, Bilar, Carmen, Dagohoy, Danao, Pilar, Sagbayan and Sierra Bullones, comprising BIAD 5 of Bohol Province, in their respective Rural Health Units (RHUs) and Barangay Health Station (BHS) Zone. All of these municipalities are within the interior part of Bohol Province and within the Carmen Health District Zone.



II. PROJECT STATUS : Proposed Project

Status of Project Operation : Project Idea

Investment Programming : For national and foreign funding assistance with local equity/counterpart

III. PROJECT JUSTIFICATION

3.1 Project Background/Rationale

In 2007, data gathered for BIAD 5 shows that at least 74 pregnancies have resulted in still births or infant deaths in the first week of life due to pregnancy-related complications. At least one maternal death was reported in that same year.

The basic premise of the safe motherhood initiative is that childbirth must not carry the risk of death or disability for the woman and her infant. Deaths due to pregnancy and childbirth are both too high as statistics show that most of the maternal and infants deaths could have been prevented. A total of 1,254 pregnancies were classified at risk in 2007 for BIAD 5. Mothers are considered to be at risk if they become pregnant because

- they are either too young (less than 20 years old)
- too old (more than 35 years old)
- have more than four pregnancies
- have too close or unspaced pregnancies (less than 15 months)
- too sick, mostly anemic or underweight

With an average fertility rate of 3.7 children per woman, an estimated 500 thousand women in Bohol are expected to get pregnant every year. BIAD 5 accounted for 13% of livebirths in 2007.

In 16 February 2007, the Department of Health (DOH) issued an advisory on the guidelines on the role of traditional birth attendants (TBA) in the Safe Motherhood and Women's Health Program. The guidelines clearly define the skilled birth attendants to include physicians, nurses and midwives only. The guidelines define the role of the TBA in terms of supportive care during pre-natal, perinatal and post-partum of the mother, to wit:

- Assist in the formulation of birth plan for pregnant mothers.
- Guide/Identify/locate/report all pregnant mothers to the RHU.
- Act as a companion in the birthing clinic/hospital during labor and delivery of the mother.
- Assist the midwife in the preparation of the delivery room in the birthing clinic.
- Assist the midwife during labor watch.

- May run errands, when necessary.
- Assist mothers to initiate breastfeeding 30 minutes to one hour after delivery.
- To report to the midwife any untoward post-partum complication.

The World Health Organization (WHO) has strictly referred Trained Birth Attendant as traditional, independent of health system, non-formally trained and community-based providers of care. A joint 1999 World Health Organization (WHO)/UNFD/UNICEF/World Bank statement called on all countries to “ensure that all women and newborns have skilled care during pregnancy, childbirth and the immediate postnatal care. It is a joint statement that only considered the registered doctors, nurses and midwives as skilled birth attendants.

With this development, it is now a general policy of DOH to disallow home-deliveries and requires all deliveries to be undertaken inside the birthing clinic established in the Rural Health Units (RHUs), Barangay Health Stations (BHSs) and hospitals attended by skilled birth attendants. Presently, only the municipalities of Carmen and Batuan have one birthing facility inside the RHU among the 8 LGUs in BIAD 5.

According to the health statistics of the 8 LGUs within BIAD 5 (Tables 3.1, 3.2, and 3.3; Annex 2), the average annual number of deliveries for the last five (5) years, from 2003 to 2007, is about 3,753 attended by 72 health personnel. This shows that there are about 313 average monthly deliveries or an average of 4 deliveries per month being handled by its personnel or a total of 52 deliveries per year to be handled by each skilled health birth attendant that needs to be undertaken inside the birthing facility to ensure safe motherhood and child health. Certainly, this huge number of deliveries could not be accommodated in the lone district hospital located at the municipality of Carmen, which is about sixty (60) kilometers from Tagbilaran City.

Table 3.1: Comparative Livebirths By Sex, BIAD 5 : CY 2003-2005

Municipality	2003			2004			2005		
	Both Sexes	Male	Females	Both Sexes	Male	Females	Both Sexes	Male	Females
1 Batuan	271	133	138	293	157	136	270	146	124
2 Bilar	424	281	143	265	140	125	289	138	151
3. Carmen	863	429	434	978	540	438	1008	541	467
4. Dagohoy	442	252	190	238	131	107	455	236	219
5. Danao	381	189	192	406	222	184	394	213	181
6. Pilar	615	322	293	649	336	313	563	310	253
7. Sagbayan	445	230	215	476	259	217	423	213	210
8.S-Bullones	503	258	245	538	300	238	525	309	216
BIAD 5, Total	3,944	2,094	1,850	3,843	2,085	1,758	3,927	2,106	1,821

Source : Provincial Health Office, Dao District, Tagbilaran City

**Table 3.1 (continuation): Comparative Livebirths By Sex, BIAD 5 :
CY 2006-2007**

Municipality	2006			2007		
	Both Sexes	Male	Females	Both Sexes	Male	Females
1 Batuan	270	131	139	256	140	116
2 Bilar	284	165	119	270	150	120
3. Carmen	915	504	411	857	431	426
4. Dagohoy	409	206	203	413	217	196
5. Danao	324	171	153	356	194	162
6. Pilar	514	271	243	479	241	238
7. Sagbayan	406	230	176	425	211	214
8.S-Bullones	441	240	201	431	230	201
TOTAL	3,563	1,918	1,645	3,487	1,814	1,673

Source : Provincial Health Office, Dao District, Tagbilaran City

Table 3.2 : Health Manpower, BIAD 5 : CY 2003-2007

Municipality	Number of Selected Government Personnel											
	Doctors				Nurses				Midwives			
	2003	2004	2005	2006	2003	2004	2005	2006	2003	2004	2005	2006
1. Batuan	1	1	1	1	1	1	1	1	5	5	5	5
2. Bilar	1	1	1	1	1	1	1	1	5	5	6	5
3. Carmen	1	1	1	1	1	1	1	1	12	12	11	11
4. Dagohoy	1	1	1	1	1			1	5	6	5	5
5. Danao	1	1	1	1	2	1	2	2	3	4	4	4
6. Pilar	1	1	1	1	1	1	1	1	9	9	9	6
7. Sagbayan	1	1	1	1	1	1	1	1	5	5	5	5
8. S-Bullones	1	1	1	1	1	1	1	1	8	9	9	9
Total	8	8	8	8	9	8	8	9	52	55	54	50

Source : Provincial Health Office, Dao District, Tagbilaran City

Table 3.3 : Health Manpower, BIAD 5 : CY 2003-2007

Municipality	Number of Selected Government Personnel											
	Sanitary Inspector				Brgy. Health Worker				Trained Birth Attendants			
	2003	2004	2005	2006	2003	2004	2005	2006	2003	2004	2005	2006
1. Batuan	2	1	1		79	85	85	84	16	16	16	16
2. Bilar	1	1	1	1	134	133	130	130	18	12	14	14
3. Carmen	4	3	1		235	235	247	241	17	17	21	29
4. Dagohoy	1	1	1	1	111	133	132	140	16	16	14	13
5. Danao	1	1		1	109	102	111	136	6	18	16	8
6. Pilar	1	1	1		189	194	189	176	21	33		32
7. Sagbayan	2	2	2		149	167	167	159	8	8	8	8
8. S-Bullones	1	1	1	1	120	157	157	157	10	10	10	15
Total	13	11	8	4	1,126	1,206	1,218	1,223	112	130	99	135

Source : Provincial Health Office, Dao District, Tagbilaran City

Considering the location of the eight (8) municipalities at the interior part of the province, the nearest and farthest town is about 40 to 90 kilometers away from Tagbilaran City, respectively. At an average distance of sixty-five (65) kilometers, travel time will be ranging from one (1) hour (the nearest) to more than two (2) hours (the farthest) by any form of vehicle. It is mainly because of this that a Mobile Birthing Clinic is also proposed to provide quality maternal health services to far-flung areas of BIAD 5.

2. Project Linkages

The project will be handled in parallel with other programs and projects implemented in the LGU funded by various national and foreign institutions aimed at reducing the incidence of maternal death and child mortality, thus reducing the need for extension of health services in terms of medicines, health protection and prevention programs. It will also enhance health service capability and facilitate the implementation of other health-related projects.

The project complements the UN Millennium Development Goal as well as the national goal in the achievement of reducing maternal mortality.

3. Project Objectives

The Project hopes to draw attention to the dimensions and consequences of poor maternal health in the area and to mobilize action to address the high rates of death and disability caused by complications of pregnancy and childbirth. The goal is to reduce maternal death, still births and infant mortality. Specifically, the project has the following objectives:

- To improve the well-being of mothers through the provision of quality maternal health services
- To make childbirth easy and accessible; and
- To respond to the global and national health strategy that considers all pregnant women to be at risk for complications and therefore, needing easy access to both basic and comprehensive emergency obstetric care during childbirth.

With the project, it will provide the constituents of the 8 municipalities with high quality delivery care for pregnant women and newborn babies. It will help reduce maternal and newborn morbidity and mortality rate. On the other hand, it will give moral, social and technical support services during and after delivery as well as to the family of the pregnant mother.

4. Sectoral Objectives

The project will ensure and contribute to a more effective and efficient delivery of health services to the people specially by that of women and children. It will also enhance the capabilities of existing health facilities by bringing its services closer to the people even those that are living in the remote areas in every barangay and most importantly making available quality

maternal and child health services even in areas where a basic health structure is not available.

5. Regional and National Objectives

The project generally supports the maternal and child care program as well as the delivery of basic health services of the region and that of the national government in order to improve the existing living condition of the residents in the service area.

IV. PROJECT FINANCING

1. Funds Needed

Funds needed will be in the total amount of Forty-nine Million Nine Hundred Sixty-two Two Hundred Pesos (P 49,962,200.00) for BIAD 5.

2. Project Financing

Project Component (Direct Cost)	Quantity	Unit	Unit Cost	Total Amount	Funds Requested	LGU Counterpart
1. Mobile Birthing Clinic	8	Units	P 800,000	6,400,000	6,400,000	
Five Years Operation & Maintenance	8x5	Units	360,000	14,400,000	-	14,400,000
2. Birthing Clinic				12,362,200	2,762,200	9,600,000
a. Equipment, Instrument, Furnitures, Fixtures & clinic supplies						
- Oxygen Regulator	56	Units	3,800	212,800	212,800	
- Oxygen Mask w/Tubing	56	Set	65	3,640	3,640	
- Delivery Table	56	Set	5,000	280,000	280,000	
- Recovery Bed	56	Set	3800	212,800	212,800	
- Kelly Pad	112	Pcs.	1,000	112,000	112,000	
- Suction Machine	56	Unit	8,000	448,000	448,000	
- Oxygen w/ tank	112	Pcs.	7,500	840,000	840,000	
- Suction Catheter	112	Pcs.	25	2,800	2,800	
- French 12	112	Pcs.	20	2,240	2,240	
- Aluminum Pail, big	56	Pcs.	1,200	67,200	67,200	
- Perilite	56	Pcs.	600	33,600	33,600	
- Gooseneck lamp	112	Pcs.	500	56,000	56,000	
- Kelly Forcep, Straight, Big	224	Pcs.	110	24,640	24,640	
- Sutures w/ needle chronic 2-0	560	Pcs.	60	33,600	33,600	
- Surgical Scissor, straight, big	112	Pcs.	120	13,440	13,440	
- gloves	56	Boxes	250	14,000	14,000	
- OS, 4X4	560	Pcks,	150	84,000	84,000	
- Ambu bag	56	Pcs.	550	30,800	30,800	
- NGT French 8	280	Pcs.	22.00	6,160	6,160	
- Aluminum Basin Medium	56	Pcs.	300	16,800	16,800	
- Urinal, Aluminum	56	Pcs.	1,000	56,000	56,000	
- Straight Catheter, French 16	280	Pcs.	55	15,400	15,400	
- KY Jelly, 250 gms.	56	Tubes	300	16,800	16,800	
- Eye drops, gentamycin	112	Bots.	195	21,840	21,840	
- Vitamin K Ampule	280	Amp.	95	26,600	26,600	
- Methyl Ergometrin Maleate	280	Amp.	105	29,400	29,400	
- Facial Mask	56	Boxes	250	14,000	14,000	
- Leggings	112	Sets	550	61,600	61,600	
- Umbilical Cord	280	Pcs.	35	9,800	9,800	
- Tissue Forcep	112	Sets	60	6,720	6,720	
- Needle Holder	112	Sets	85	9,520	9,520	

Project Component (Direct Cost)	Quantity	Unit	Unit Cost	Total Amount	Funds Requested	LGU Counterpart
b. - Birthing Room	48	Rooms	200,000	9,600,000	-	9,600,000
2. Procurement of Ambulance	8	Units	700,000	5,600,000	5,600,000	
5 Years Operation & Maint.	8x5	Units	200,000	11,200,000		11,200,000
Grand Total				49,962,200	14,762,200	35,200,000
Percentage				100 %	29.54 %	70.45%

3. Funding Source

Funds to finance the project will be sourced out from external sources/grant and donor institutions in the amount of ₱14,762,200.00. As shown above, the 8 municipalities will provide a total amount of ₱35,200,000.00 as local counterpart to shoulder the cost of the operation and maintenance of both the mobile birthing clinic for a minimum of 5 years and the cost of the birthing room located inside the Rural Health Unit (RHU) and Zone Barangay Health Station (BHS).

4. Counterpart Funding

Each municipality of BIAD 5 shall provide a modest counterpart in form of cash and in kind proportionate to the number of units of birthing facilities established in their respective area of jurisdiction with possible counterparting from selected barangays. Administrative cost for personnel assigned in the birthing clinic and the repair and maintenance cost of the building where the birthing clinic is housed shall be an additional equity of barangays where the facility is located.

5. Financial Viability

Once the project will be completed and operational, all fees and service charges generated by the project through an ordinance shall accrue to a trust fund exclusively devoted to the operation, maintenance and other improvement of the birthing facility. In cases where the facility is an accredited Philhealth service provider, portion of the Philhealth Capitation Fund received by the municipality may be utilized to augment the trust fund. Whenever necessary, each municipality will appropriate local funds in their respective regular budget to ensure sustainability of services provided by the birthing facility.

V. PROJECT BENEFITS AND COSTS

1. Beneficiaries

Direct beneficiaries of the project will be the residents of the 8 BIAD 5 municipalities and some barangays of the adjacent municipalities in other BIAD areas.

2. Social Benefits

The project will provide the local residents with constant convenient access to safe maternal and child health care that will greatly enhance the general health condition and well-being of every household in the respective locality.

3. Economic Benefits

The project will generate substantial savings on every household at reproductive age in terms of maternal and child health-related expenses. Such savings maybe utilized to venture into small-scale livelihood and income-generating enterprise as an alternative source of income.

4. Social Costs

The project will not create any disturbance during the installation period because all equipment, instruments, furnitures, fixtures and clinical supplies shall only be put in-place to an existing structure of the RHUs and BHSs.

5. Economic Costs

The project will not destruct any natural resources existing in the area of location nor does it create any harmful effects on the source of existing livelihood activities of the community.

IV. PROJECT IMPLEMENTATION

1. Responsible Agencies

a. 8 Municipal LGUs of BIAD 5

The 8 member municipal LGUs of BIAD 5 will be responsible in the procurement of all project components allocated to their respective municipalities. Each Rural Health Unit shall directly assist in the pre-implementation and implementation phases of the project.

b. Bohol Provincial Health Office

The Provincial Health Office shall be responsible for the technical and administrative supervision of the project through the Office of the Health District Zone.

c. PhilHealth

The PhilHealth shall assist the LGUs in the accreditation of the facilities.

2. Implementation Schedule

Activities	Month 1	Month 2	Month 3	Month 4
1. Procurement of Mobile Birthing Clinic/ Ambulance				
2. Procurement of equipment, Instruments, Furnitures, Fixtures & Clinic supplies				
3. Installation of Birthing Clinic				

3. Administrative Feasibility

Each LGU, through the direct supervision of the Municipal Health Officer and constant coordination with Carmen Health District, shall oversee/monitor the financial and physical operation of the project during implementation period until its completion and operation.

4. Legal & Political Feasibility

The project has no legal obstruction as to its completion and is not expected to generate any political opposition.

5. Environmental Clearance.

Clearance from DENR is not necessary for this type of project.

6. Social Acceptability

The proposed project is not expected to generate any opposition from the community.

CONTACT DETAILS:

ENGR. JOSEPH R. ANANIA
BIAD 5 Chairperson

Cell #: (+63) 0920-510-4125
Office Telefax #: (+63) 038-523-2026

Annex 1. Location & Coverage of Birthing Clinics Per Municipality

Municipality/Location of Birthing Clinics	Number of Barangays Covered
1 Batuan 1.1. Rosariohan BHS 1.2. Sta. Cruz BHS 1.3. Cantigdas BHS 1.4. Quezon BHS	<u>11</u> 3 3 3 2
2. Bilar 2.1. Bugang Sur 2.2. Cansumbol 2.3. Owac 2.4. Poblacion 2.5. Villa Aurora	<u>19</u> 4 4 4 4 3
3. Carmen 3.1. Buenavista BHS 3.2. Bicao BHS 3.3. Buenos Aires BHS 3.4. La Victoria BHS 3.5. Montevideo BHS 3.6. Nueva Vida Norte BHS	<u>16</u> 2 2 3 3 3 3
4. Dagohoy 4.1. San Vicente BHS 4.2. San Miguel BHS 4.3. Malitbog BHS 4.4. Can-oling BHS 4.5. Poblacion Main RHU	<u>15</u> 3 3 4 3 2
5. Danao 5.1. Poblacion Main RHU 5.2. Hibale BHS 5.3. Magtangtang BHS 5.4. Cantubod BHS	<u>17</u> 5 4 4 4
6. Pilar 6.1. Poblacion Main BHS 6.2. Bagumbayan BHS 6.3. Catagdaan BHS 6.4. Del Pilar BHS 6.5. Estaca BHS 6.6. Ilaud BHS 6.7. Lumbay BHS 6.8. Lundag BHS (Eskaya Tribe) 6.9. San Isidro BHS 6.10. San Vicente BHS	<u>21</u> 2 2 2 3 2 2 3 1 2 2 2
7. Sagbayan 7.1. Poblacion MHC 7.2. Sta. Cruz BHS 7.3. San Isidro BHS 7.4. Ubojan BHS 7.5. Canmaya Diot BHS	<u>24</u> 2 6 6 5 5
8. Sierra Bullones 8.1. Poblacion Main RHU 8.2. Abachanan BHS 8.3. Bugsoc BHS 8.4. Danicop BHS 8.5. Dusita BHS 8.6. Matin-ao BHS 8.7. Salvador BHS 8.8. San Juan BHS 8.9. Villa Garcia BHS	<u>22</u> 1 1 3 3 2 3 3 2 4
BIAD 5, Total = 48	145

Annex 2

BIAD 5 NATALITY REPORT: Year 2007**Bohol Province**

Municipalities	2007 Population	No. of Livebirths			Weight at Birth			Type of Pregnancy			
		Male	Female	Total	2,500 gms.	Less than 2,500 gms	Not Known	Normal	Risk	Not Known	Total
BIAD 5, Total	181,468	1,524	1,437	2,961	2,741	150	70	2,156	1,254	70	3,480
Batuan	12,137	140	116	256	245	11		132	123		255
Bilar	17,078	150	120	270	257	3	10	230	38		268
Carmen	43,153	431	426	857	805	38	14	544	285	28	857
Dagohoy	18,311	217	196	413	406	7		203	210		413
Danao	17,716	194	162	356	350	6		316	37	3	356
Pilar	27,276	241	238	479	369	66	44	256	203	20	479
Sagbayan	19,399	211	214	425	384	31	10	269	146	10	425
Sierra Bullones	26,398	230	201	431	427	2	2	206	212	9	427

Source: Provincial Health Office, 2007

BIAD 5 MORTALITY REPORT: Year 2007**Bohol Province**

Municipalities	Number of Deaths, All Ages, All types			Number of Deaths due to				
	Male	Females	Total	Infant	Maternal	Neonatal due to tetanus	Neo-natal	Still-births
BIAD 5, Total	426	308	734	57	1	0	0	17
Batuan	36	34	70	0	0	0	0	0
Bilar	49	20	69	11	0	0	0	3
Carmen	114	88	202	21	0	0	0	7
Dagohoy	40	33	73	6	0	0	0	2
Danao	27	21	48	4	1	0	0	0
Pilar	50	29	79	6	0	0	0	3
Sagbayan	38	31	69	2	0	0	0	0
S. Bullones	72	52	124	7	0	0	0	2

Source: Provincial Health Office, 2007

Government/Public Health orkers per Municipality: BIAD 5

Municipalities	2007 Population	Number Brgys	Number BHS	Number H.H.	Gov't/Public Health Workers in the Municipality		
					Doctors	Nurses	Midwives
BIAD 5, Total	181,468	162	63	37,065	8	12	58
Batuan	12,137	15	5	2,287	1	1	5
Bilar	17,078	19	4	3,382	1	1	5
Carmen	43,153	29	12	8,614	1	3	13
Dagohoy	18,311	15	15	3,763	1	2	6
Danao	17,716	17	4	4,045	1	1	4
Pilar	27,276	21	10	5,563	1	1	10
Sagbayan	19,399	24	4	3,919	1	1	5
S.Bullones	26,398	22	9	5,492	1	2	10

Brgys = Barangays/Villages

BHS = Barangay Health Station

HH= Household