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## Institutionalizing Wellness Linkage Database in the DILG-10 Regional Office: An Approach to Public Sector Innovation on Sustaining Health and Wellness Program

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### **Abstract:**

*This comprehensive study delves into the intricacies of the Health and Wellness Program's implementation within DILG-10, with a particular focus on service delivery, educational initiatives, and the accessibility of healthcare services for employees. Through a detailed survey involving 51 participants, the data uncovered not only revealed positive engagement but also highlighted the program's effectiveness in bolstering employee well-being. However, the study also identifies crucial gaps that present opportunities for program refinement and expansion, such as introducing on-site gardening and broadening the scope of health-related services. The study's innovative methodology, exemplified by the refined DILG Linkage Plan, underscores a firm commitment to sustainability and strategic alignment with the organization's overarching objectives. This forward-thinking approach not only sheds light on the current state of health and wellness endeavors within DILG Region 10 but also charts a clear path for ongoing improvement, innovation, and alignment with organizational goals. By harnessing the insights garnered and implementing the proposed recommendations, DILG Region 10 is well-positioned to cultivate a culture of wellness, resilience, and peak performance among its workforce, thereby making substantial contributions to organizational success and fostering high levels of employee satisfaction.*

**Keywords:** Health, wellness, public sector innovation

### **1. Introduction**

Good health and well-being, a crucial component of the Sustainable Development Goals, is a comprehensive roadmap for nations worldwide. One of its targets, to reduce premature mortality from non-communicable diseases by one-third through prevention and treatment and promote mental health and well-being by 2030, underscores its significance. Despite efforts, the Vital Statistics Report from the Philippine Statistics Authority (April 2022) indicates that the mortality rate attributed to cardiovascular disease, cancer, diabetes, or chronic respiratory disease remained at 4.6 in 2020, unchanged from the baseline rate in 2016.

To advance toward this goal, the Philippines has enacted various laws and policies, particularly in the public sector. The Civil Service Commission was tasked with developing a policy on Employee Wellness Programs and integrating them into the Program to Institutionalize Meritocracy and Excellence in Human Resource Management (PRIME-HRM), as outlined in CSC Memorandum Circular No. 3 series of 2012. Additionally, Executive Order No. 605, approved on February 23, 2007, institutionalizes Quality Management Systems in Government, aligning with the ISO 9000 series to ensure consistent product and service quality through robust processes.

The Department of the Interior and Local Government, a key national government agency, is committed to effectively implementing its services while upholding policies that safeguard employees' welfare. This dedication reflects a broader organizational commitment to enhancing public governance and employee well-being in alignment with national and global development goals.

#### **1.1. Background of the Study**

The Human Resource Management Section (HRMS) of the Department of the Interior and Local Government – 10 (DILG-10) has been actively advocating for employees' welfare by overseeing their benefits, including Loyalty Pay, Clothing Allowance, Sports and Culture Allowance, Personal Economic Relief Allowance (PERA), Collective Negotiation Agreement (CNA) Incentive, and 13th and 14th-month bonuses. Moreover, they ensure that all employees are enrolled in

essential programs such as PAG-IBIG, PhilHealth, and GSIS/SSS, providing a safety net for their financial and healthcare needs.

Among the welfare benefits provided is the Health and Wellness program, encompassing activities like Sports Day (scheduled every Tuesday, Thursday, and Friday) and a Sports festival held annually in December. Unfortunately, these activities faced disruptions, particularly due to the challenges posed by the Coronavirus Disease-19 (COVID-19) pandemic starting in 2020. This unprecedented situation led to the suspension of several wellness initiatives due to personnel constraints and pandemic-related restrictions.

Prior to the pandemic's onset, HRMS successfully organized an Annual Physical Examination (APE) in 2019, originally slated as part of the Health and Wellness agenda. However, the actual execution took place from January to March 2020, primarily benefiting organic employees covered by their CNA benefits. Subsequently, no follow-up implementations were scheduled, primarily due to the escalating COVID-19 crisis.

Of the 223 organic employees, 200 personnel underwent the APE, accounting for 89.69% of the total organic workforce. The examination included blood chemistry analysis, revealing concerning results: 26.50% exhibited high fasting blood sugar levels, signaling potential risks for Diabetes Mellitus; 54% had elevated cholesterol levels, and 42.5% showed high triglyceride levels, indicating potential risks for Cardiovascular Disease; 53% displayed high uric acid levels, posing risks for Arthritis or Gout problems; 31.5% exhibited elevated SGPT/ALT levels, while 15% had elevated SGOT/AST levels, highlighting potential liver health issues among the personnel. These findings underscore the importance of ongoing wellness initiatives and healthcare interventions to address employees' health concerns effectively.

In 2020, the emergence of COVID-19 as a global pandemic, originating in Wuhan, China, and subsequently spreading to the Philippines and beyond, brought unprecedented challenges. Despite being a relatively new disease with limited available data, studies have shown that comorbidities significantly increase the risk of infection. Vulnerable populations, particularly the elderly with underlying chronic conditions like diabetes, cardiovascular diseases, or respiratory ailments, not only face a higher likelihood of severe illness but also an elevated risk of mortality if infected (Sanyaolu et al., 2020).

During the pandemic, the Human Resource Management Section (HRMS) conducted a comprehensive Health Assessment survey, revealing concerning health trends among employees. The survey disclosed that 39 respondents had Hypertension and Type II Diabetes Mellitus, eight suffered from Asthma, three had Allergic Rhinitis, and some reported Fatty Liver conditions. These findings underscore the urgency of prioritizing both the physical and mental well-being of employees to mitigate disease risk factors and minimize the adverse impacts of COVID-19 on individuals with pre-existing health conditions.

On September 9, 2020, the DILG Central Office issued DILG Circular No. 2020-23, introducing the DILG Mental Health Program (MHP): *Malusog na Kaisipan, Yaman ng Kagawaran*. Section 5.3 highlights the imperative to establish institutional networks that offer support mechanisms for personnel dealing with mental health issues or those at risk of developing mental health conditions. However, to date, DILG-10 has not established such networks or links.

These networks typically comprise professionals well-versed in physiological and psychological health matters. According to the Workplace Health Model advocated by the Centers for Disease Control and Prevention, identifying dedicated resources such as partners or vendors is crucial during the Planning and Management phase. These resources play a pivotal role in the Implementation phase, facilitating education, counseling, and access to healthcare professionals.

To bolster the ongoing Health and Wellness Program at the DILG Regional Office 10, it is imperative to strengthen Wellness Networks and Linkages. Enhancing the accessibility of healthcare professionals or clinics will encourage employees to proactively seek professional assistance when needed, fostering a culture of holistic well-being within the organization.

## *1.2. Framework of the Study*

The study is anchored on the theories, concepts, and legal mandates that provide logical connections among key elements of the theory and constructs directly related to public sector innovation in institutionalizing linkages or networks to promote and strengthen the implementation of the Health and Wellness Program in DILG Regional Office 10 as operationalized in the study.

### 1.2.1. Construct/Concept 1: Workplace Health Model

The Workplace Health Model of the Centers for Disease Control and Prevention comprises four (4) phases: Assessment, Planning Management, Implementation, and Evaluation. In this model, the CDC emphasized the importance of a coordinated approach to workplace health promotion, which consists of a planned, organized, and comprehensive set of programs, policies, benefits, and environmental support to effectively meet the health and safety needs of all employees (CDC, 2016).

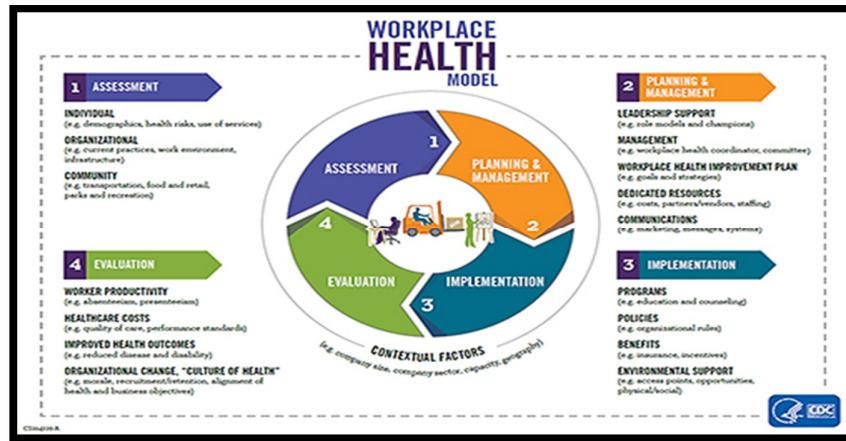


Figure 1: Workplace Health Model

The Assessment phase involves the determination of individual-level factors (such as health issues, lifestyle choices, and work environment) and organizational-level factors (such as culture, policies, and practices) that will play an important role in determining appropriate programs specific to the needs of the organization and the individual.

The Planning phase involves the analysis of the assessment conducted and the establishment of a basic governance structure to provide strategic direction and implement and manage health promotion activities. Planning is an important phase in the model because this is where appropriate programs are identified, together with the necessary resources that will be needed to implement the health program. Resources in this phase include financial resources/funding requirements, community partners/ linkages, supplies and other expenses necessary throughout all stages, and incentives to encourage employees' participation. Developing a communication plan and identifying the monitoring and evaluation mechanism to determine the program's success is also vital in this stage.

Next is the implementation of programs identified in the Planning stage. This includes health-related programs, policies, health benefits, environmental support, and other health strategies identified.

The last phase is Evaluation, which is essential to determining the outcome, effectiveness, and satisfaction of employees from the programs implemented. This stage also allows management to assess the strengths, weaknesses, and improvements needed for the program.

#### 1.2.2. Construct/Concept 2: The 1987 Philippine Constitution

Section 15 of the 1987 Philippine Constitution states, "The State shall protect and promote the right to health of the people and instill health consciousness among them."

#### 1.2.3. Construct/Concept 3: Health and Wellness

Health, as defined by the World Health Organization (1948), is the state of complete well-being of the physical, mental and social aspects of an individual, and not just the absence of disease or illness. Meanwhile, wellness is the act of continuously seeking holistic balance in all areas of an individual's life to achieve an improved state of health and well-being.

#### 1.2.4. Construct/Concept 4: Human Resource and Human Resource Management

People or human capital are the heart of any successful organization. Human capital drives every facet of an organization's operations, from technology and product design to distribution networks and service delivery to clients or customers (Chenoweth, 2011).

Moreover, human resources is the backbone of an organization. Hence, once an employee's health is compromised, wherein that employee will not be able to function optimally, especially with regard to immune response that is caused by an underlying disease, harmful environmental exposure, or the side effects of a course of treatment, there are repercussions to the organization's performance and resources (Evans & Price, 2020). This includes:

- Poor health leads to minimal productivity, wherein productivity is the measure of economic performance that shows the efficient conversion of inputs into outputs;
- Poor client support, which leads to poor client satisfaction;
- Poor health can result in a poor reputation due to the rude behavior of stressed employees;
- Wastage of time and resources; and
- Delayed project/program/ activity implementation due to absenteeism.

Further, Human Resource Management plays a significant role in dealing with issues related to people, such as compensation, hiring, performance management, organizational development, safety, wellness, benefits, employee motivation, communication, administration, and training (Ahammad, 2017).

### 1.2.5. Construct/Concept 5: Civil Service Commission Policies on Health and Wellness

The Civil Service Commission (CSC), the agency that formulates, prescribes and promulgates policies and standards for the Civil Service, released CSC Memorandum Circular No. 38 series of 1992 on the Physical and Mental Fitness Program for Government Personnel. This policy authorized agencies to conduct health awareness programs for one (1) hour each week and wellness and fitness programs for twenty (20) minutes daily. This policy aims to attain long-term health through exercise and related physical fitness activities.

This was later revised and reiterated through CSC Memorandum Circular No. 06 series of 1995, The Great Filipino Workout, and CSC Memorandum Circular No. 08 series of 2011 Reiteration of the Physical Fitness Program "Great Filipino Workout," respectively.

CSC Resolution No. 1200241, dated February 1, 2012, approved the implementation of the Program to Institutionalize Meritocracy and Excellence in Human Resource Management (PRIME-HRM). This program aims to establish meritocracy and excellence in public service human resource management through a program of reward, recognition, empowerment, and continuous development. Employee Health and Wellness are a component of the Comprehensive HRM Assistance, Review, and Monitoring (CHARM) to determine the readiness of agencies for Level II-Accredited Status.

### 1.2.6. Construct/Concept 6: Workplace Health Program

Abdullah & Lee (2012) found that there is a significant difference in absenteeism between employees who have attended wellness programs and those who have not attended wellness programs. Employees who have attended said that programs have lower absenteeism (mean=1.7249) compared to employees who have not attended (mean=2.0054). A Wellness Program is influential on an employee's job satisfaction, stress, and absenteeism. It has positive impacts not only on the employees' well-being but also on the organization's well-being.

In an article by Berry L. et al. (2010), the hard return of Employee Wellness Programs includes lower costs of annual healthcare claims, greater productivity of employees, and higher morale.

### 1.2.7. Construct/Concept 7: Linkages and Partnership

Community linkages (CDC, 2016) are partnerships with different organizations present in the community to offer health-related programs and services to the employees when the employer has no technical capabilities to provide support for the employees' health needs.

There are various benefits from partnering, which include:

- Widening resources by merging talent, expertise and resources,
- Lessening the duplication of efforts,
- Producing broad-based support,
- Minimizing health-related costs,
- Improving health status, and
- Creating more ways to reach audiences.

To have a successful and sustainable partnership, the organizations must have mutual understanding, secure trust, and clear goals, find champions, share data, identify contributions, establish mutual benefit, and guarantee productivity (NBCH, n.d.).

### 1.2.8. Construct/Concept 8: Interoperability

Interoperability is defined (GDHP, n.d.) as "the ability of a system or product to transfer meaning of information within and between systems or products without special effort on the part of the user. It is made possible by the implementation of standards."

### 1.2.9. Construct/Concept 9: Sustainability through AmBisyon Natin 2040

Executive Order No. 5 was approved on October 11, 2016. President Rodrigo Roa Duterte approved the adoption of AmBisyon Natin 2040 as a twenty-five-year long-term vision for the Philippines, which is "By 2040, the Philippines is a prosperous middle-class society where no one is poor. People live long and healthy lives and are smart and innovative. The country is a high-trust society where families thrive in vibrant, culturally diverse, and resilient communities."

The Sustainable Development Goals (SDGs) paved the way in crafting the Philippines' long-term vision through the AmBisyon Natin 2040. The latter is consistent with the core principles of the SDGs, where long-term planning is required to ensure that the present development will not be at the expense of future generations. This is a requirement of the Filipino AmBisyon of matatag (strongly rooted), maginhawa (comfortable), and panatag (secure).

### 1.2.10. Construct/Concept 10: Public Sector Innovation

Republic Act No. 11293, known as the "Philippine Innovation Act," was approved on April 17, 2019. This Act recognizes the role of the State in fostering innovation as an essential component of national development and sustainable economic growth.

Section 2 (f) of this Act states, "The business sector, academe, scientific community and research institutions play a crucial role in driving economic growth through innovation. As such, the government will work and cooperate with these sectors and encourage the innovative efforts of businesses, MSMEs, academe, and the scientific community. Public sector innovation plays a key economic role whereby an efficient public sector can achieve more private sector growth. To this

end, the State shall promote, integrate and strengthen policies that engage with innovative businesses and entrepreneurs on collaboration efforts to improve productivity, good governance and efficient delivery of public services."

### 1.2.11. Construct/ Concept 11: The DILG Outcome Framework

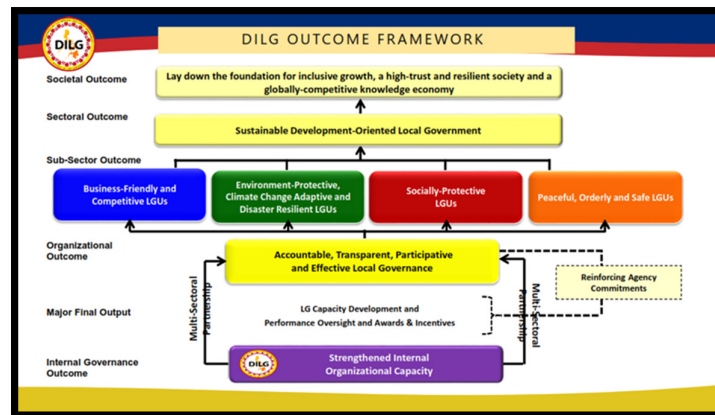


Figure 2: DILG Outcome Framework

The DILG-Local Government, Sector Outcome Framework, highlights the purpose of the Department based on the mandate, which is general supervision over local government units (LGUs), have meaning and relevance in the overall design of things in society, and contribute to the attainment of national goals and objectives. The said framework has five (5) outcomes:

- Societal outcomes through Inclusive Growth and Poverty Reduction,
- Sectoral outcomes through Sustainable Development-Oriented Local Government,
- Sub-sectoral outcomes through Business-friendly and Competitive LGUs, Environment-Protective, Climate Change Adaptive and Disaster Resilient LGUs and Socially-Protective and safe LGUs,
- Organizational outcomes through Accountable, Transparent, Participative and Effective Local Governance and
- Internal Governance outcomes through Strengthened Internal Organizational Capacity.

For the Internal Governance Outcome, the Department aims to enhance competencies, structure and systems for effective and efficient service delivery. To ensure that the Department can effectively carry out its mandate, this outcome ensures that the internal systems and processes are improved, build new and/or strengthen existing partnerships to address the Department's own deficiencies in the implementation and completion of programs and projects, and build and strengthen its own human resource capabilities to deliver the mandate of the Department.

### 1.2.12. Construct/Concept 12: Quality Management System

To ensure that the Internal Governance Outcome is effectively and efficiently implemented, the DILG established its initial Quality Management System based on ISO 9001:2008 for the Central Office, which was certified in August 2016, and the application was later extended to all of the Regional Offices where each Regional Office would secure a separate certification from the Central Office. In 2021, the Department implemented a National Quality Management System which aims to integrate and standardize the processes at the Central, Regional and Field Office in compliance with AO25 issued Memorandum Circular No. 2021-01 for the grant of the Performance-Based Bonus for FY 2021 under Process Results. The current standard now is based on ISO 9001:2015.

One of the clauses of this standard is the Clause No. 7 Support. The DILG's top management ensures that necessary resources are provided for the development, effective implementation, maintenance and continual improvement of the QMS processes. Under Clause 7.1.4 Environment for the operation of processes, DILG identifies, provides and maintains the suitable environment needed for the operation of its processes and to achieve conformity of products and services. A suitable environment includes programs and activities dealing with the combination of human and physical factors (social, psychological and physical). One of which is the Employee Health and Welfare Program.

### 1.3. Objectives of the Study

This study aimed to determine the extent of implementation of the Health and Wellness Program in the DILG-10 in the areas of provision of services, commodities and products, education, and counselling sessions for DILG-10 employees in terms of the following: accessibility to health care services, commodities, and products in hospitals, clinics, laboratories, pharmacies, gyms/ fitness centers, and health shops; training on the prevention of common workplace-related illness and non-communicable diseases; training on other health-related topics; and counselling/ consultation sessions concerning nutrition, physical and mental condition.

Moreover, it attempted to develop a public sector innovation designed to strengthen the implementation of the Health and Wellness Program in the DILG-10, with corresponding policy recommendations to ensure the sustainability of the innovation.

## 2. Literature Review

This section provides an overview of the related literature, studies and research relevant to the conduct of this study.

### 2.1. Workplace Health and Wellness Program

In a study conducted by Song and Baicker (2019) on the effect of a Workplace Wellness Program on Employee Health and Economic Outcomes, among the 32,974 employees, 36.2% to 44.6% of the employees were able to participate in surveys and screenings at intervention sites, and 34.4% to 43.0% at primary control sites. It was found that among employees in the program, there was a significantly greater rate of positive self-reported health behaviours than among employees who were not exposed.

In another study on the Well-being Diagnostic Survey organized by Arkhipova et al. (2021), 122 companies in the Philippines participated in this study between October and November 2020. The aim of the survey was to better understand the approaches an organization takes to workplace well-being. The result of the survey showed that most of the employers recognized the importance of well-being programs as a differentiator to compete for talent, especially during the pandemic, where stress has become more severe compared to five (5) years ago. Employers are considering taking a holistic approach to implementing this program over the next three (3) years.

### 2.2. Public-Private Partnerships

In an article by Teddi Johnson (2009), partnerships between public health and private sectors gained impressive results. In 2003, the Capital Metropolitan Transportation Authority experienced increased healthcare costs that may have resulted in unhealthy practices of bus drivers, which may have made it tough for them to meet the new health standards to be imposed on them. To address this, the Capital Metropolitan Transportation Authority, in coordination with Austin-Travis County Health and Human Services Department, adopted the steps on public-private partnerships by the Centers for Disease Control and Prevention to promote health and wellness in communities to prevent emerging chronic diseases.

They contracted with Health and Lifestyle Corporate Wellness, a private company based in Austin, to conduct the worksite wellness program. This enabled the Health Department and the transportation group to gain expertise and resources that were not available at the time. This partnership increased engagement in its employees' health because the much-needed services and screenings were provided to them.

In the Philippines during the Aquino Administration, Administrative Order 2010-0036 was released. A public-private partnership is defined as "a cooperative venture between the public and private sectors, built on the expertise of each partner that best meets clearly defined public needs through the appropriate allocation of resources, risks, and rewards. This partnership may range from healthcare provision to logistics management, information and communication technology to capacity building of health providers."

In an article by the United States Agency International Development (USAID) entitled "Designing Public-Private Partnerships in Health," there are three (3) broad types of public-private engagement:

- Public Private Interaction wherein the type of engagement is in the exchange of information and guidance specifically on government policies;
- Public-Private Dialogue wherein the engagement is in the cooperation and negotiation of issues and policies that can affect the private sector, and;
- Public-Private Partnership, wherein there is a formal agreement between the two (2) sectors and clearly defined roles and responsibilities between parties (Barnes, 2011).

The Department of Health (DOH) started implementing the program on public-private partnerships in 2019. This partnership as declared by Health Undersecretary Lilibeth David would play an important role in the implementation of the Universal Health Care Act which would provide more opportunities for further collaboration with the private sector.

The objectives of this program are:

- To develop and integrate the overall PPP efforts and incentives, which are aligned with both departmental goals and expected health outcomes,
- To promote and provide a focused approach that harmonizes existing PPP applicable legal and administrative mandates as well as internal strategies and procedures,
- To prioritize PPPs that meet national and local government objectives of adequately addressing the health service needs of the poor,
- To foster a culture of transparency, fairness and robust competition, and
- 5) To continually assess the collective experiences of PPPs in the health sector to be able to adapt public policies and approaches to new developments and needs to sustain accessibility to quality healthcare.

On December 5, 2023, Republic Act No. 11966 Public-Private Partnership (PPP) Code of the Philippines was promulgated. This Act is more about public-private partnerships in infrastructure or development projects between an Implementing Agency and a Private Partner, where the latter will finance, design, construct, operate, and maintain, or any combination.

### 2.3. Sustainable Development Goals (SDGs)

There are seventeen (17) SDGs which are (1) No Poverty, (2) Zero Hunger, (3) Good Health and Well-being, (4) Quality Education, (5) Gender Equality, (6) Clean Water and Sanitation, (7) Affordable and Clean Energy, (8) Decent Work and Economic Growth, (9) Industry, Innovation and Infrastructure, (10) Reduced Inequalities, (11) Sustainable Cities and Communities, (12) Responsible Consumption and Production, (13) Climate Action, (14) Life Below Water, (15) Life on

Land, (16) Peace, Justice and Strong Institutions, and (17) Partnership for the Goals. This capstone project will focus on SDG No. 3 specifically Target No. 3.4 wherein by 2030, reduce by one-third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being.

The Philippine Statistics Authority (PSA) submitted the updated statistics for this goal on April 4, 2022. For Target 3.4., the overall mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease is maintained with a rate of 4.60 from the 2016 and 2020 data. The mortality rate attributed to cardiovascular disease increased from 2.70 to 2.80, and the 2030 target rate for this indicator decreased to 1.80. The mortality rate attributed to cancer decreased from 1.10 to 1.00, and the 2030 target rate for this indicator decreased to 0.67. The mortality rate attributed to diabetes is maintained at a rate of 0.60, and the 2030 target rate for this indicator is decreased to 0.40. The mortality rate attributed to chronic respiratory disease decreased from 0.30 to 0.20, and the 2030 target rate for this indicator decreased to 0.20.

### 3. Methodology

In the completion of this study, the proponent utilized various data, materials, and participation from the different key players of this innovation. To acquire these, the Innovation Design and Innovation Approach are stipulated in this section.

#### 3.1. Public Sector Innovation Design

One of the aims of the Sustainable Development Goals is to ensure healthy lives and promote well-being for all at all ages. By 2030, it aims to reduce one-third of premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being. This capstone project aims to contribute to the attainment of this goal.

To attain this, the study attempted to build wellness linkages with national government agencies, healthcare providers, clinics, pharmacies, gyms/ fitness center, laboratories, and lifestyle experts within Cagayan de Oro City to strengthen the implementation of the Health and Wellness Program of the Department of the Interior and Local Government Region 10. This is to build and forge strong health linkages/ partnerships that will encourage the DILG Regional Office 10 employees to easily seek medical and professional help whenever there is a need.

At the end of this study, the proponent was able to create a DILG Region 10 Linkage Plan, a Pledge of Support and Commitment from Top Management to implement the project, and a Policy Brief.

#### 3.2. Innovation Design & Innovation Design Description

With the aim to institutionalize Wellness Linkages with national government agencies and the private health sector, the beneficiary for this capstone project is the Management and Employees of the Department of the Interior and Local Government Regional Office-10 located in Km. 3 Masterson Avenue, Upper Carmen, Cagayan de Oro City. The organizations or companies from the private health sector will also benefit from this capstone project, as mentioned in the Significance of the Study.

Below is the Innovation Diagram:

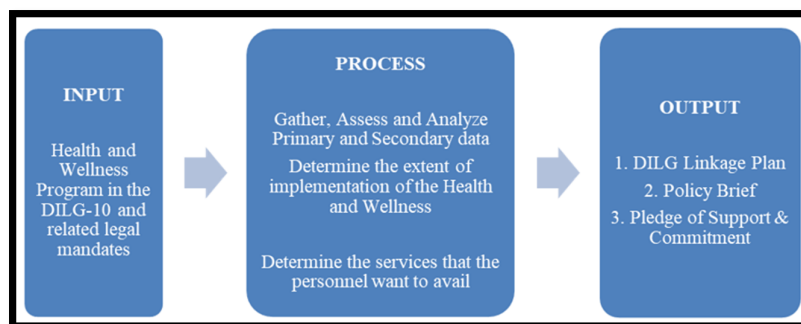


Figure 3: Innovation Diagram of the Study

#### 3.3. Data Requirements

The primary data needed is the result of the survey that the proponent conducted to determine and identify the extent of implementation of the Health and Wellness Program of DILG Region 10 and the health services needed by the employees of the DILG Regional Office 10. Meanwhile, the secondary data needed are the organization's policies on Employee Health and Wellness, previously conducted health-related training and existing Memorandum of Agreement/ Understanding (MOA/U) from other agencies related to the health and availability of Health Maintenance Organization (HMO).

#### 3.4. Technical Specifications

To identify the project flow and the technical aspects/ elements of the innovation, below is the Innovation Design Process Flowchart:

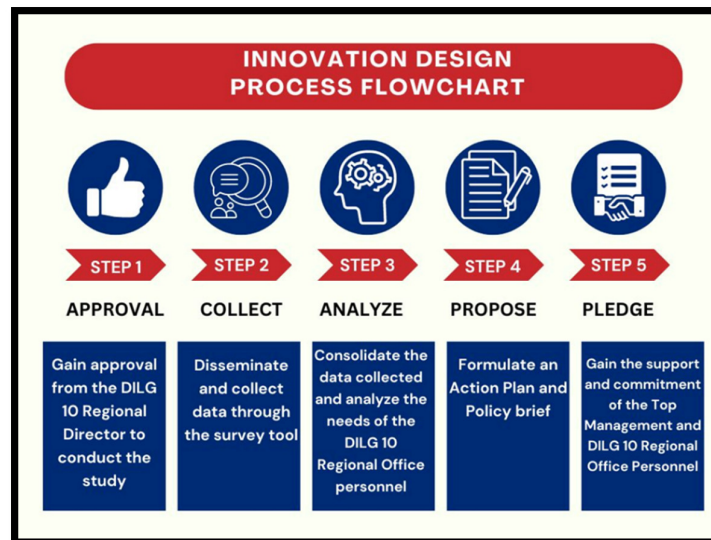


Figure 4: Innovation Design Process Flowchart

### 3.5. Setting/Site of the Study

The study was conducted at the Department of the Interior and Local Government Regional Office 10 (DILG Region 10), Cagayan de Oro City. Although the DILG is not mandated to protect the health of the citizenry, DILG is conferred with the PRIME-HRM Bronze Award Maturity Level II pursuant to CSC Resolution No. 2100153 series of 2021. Hence, there is a need to strengthen the Health and Wellness Program of DILG Region 10 to maintain its current status and, later on, be conferred with Level III and Level IV. Employee Wellness Program is also one of the PRIME-HRM's indicators.

Most of the national government agencies in Region 10 are located in this city, including the Department of Health Regional Office 10 (Northern Mindanao Center for Health Development) and the Department of Agriculture Regional Office 10. In addition, Tertiary/ Level 3 hospitals in Region 10 are also located in the city, which includes Northern Mindanao Medical Center, Polymedic Medical Plaza, Cagayan University Medical Center, and Maria Reyna-Xavier University Hospital Inc. There are also various fitness centers, clinics and laboratories, pharmacies, and health shops located at Cagayan de Oro City.

### 3.6. Participants of the Study

The survey data was collected from the 100 personnel in the Regional Office, which is composed of Technical and Administrative Officers and Staff. These served as baseline data before expanding the implementation to the Field Operating Units (Provincial, Highly Urbanized City, Municipality and Component City Offices).

### 3.7. Data Gathering Procedure

Before the data collection, permission from the DILG Region 10 Regional Director was secured, and then the survey to determine the health services needed by the DILG Region 10 employees was conducted, and relevant records from the agency for the secondary data were accessed. The survey data were both quantitative and qualitative in nature.

In the gathering of data, the strict implementation of research ethics protocols was observed. This means that the participants' free and prior informed consent was secured.

## 4. Results and Discussion

### 4.1. Profile of Participants

Out of the 51 respondents, 59.90% identified as women, 41.20% as men, and 2.0% preferred not to disclose their gender. The data indicates a higher representation of female respondents compared to male respondents.

Regarding age demographics, 41.20% of respondents fall within the 25-34 age bracket, while only 7.80% are aged 55-64.

Marital status reveals that 50.98% of respondents are married, with 3.92% separated. Interestingly, the number of single respondents is nearly equal to that of the married respondents.

Moreover, 92.20% of respondents reported no disabilities, whereas 7.8% identified as persons with disabilities. This reflects the institution's commitment to inclusivity, supporting personnel with disabilities in fulfilling their roles effectively.

Religiously, 82.35% of respondents are Catholics, while 17.65% follow other faiths. The institution adheres to a policy of Equal Employment Opportunity, welcoming individuals of all religious backgrounds without discrimination.

In terms of family size, 60.78% of respondents have no children, with only 3.92% reporting four or more children among the 51 surveyed individuals.



In terms of the participants' health status, 50.98% of respondents reported being free from current illnesses. However, prevalent conditions among the respondents include Asthma (28%), Hypertension (7.84%), Arthritis (7.84%), Polycystic Ovary Syndrome (5.88%), and Diabetes Mellitus Type 1/2 (5.88%). Given that half of the respondents are currently healthy, maintaining a high number of healthy personnel is crucial in achieving Sustainable Development Goal (SDG) No. 3.4, which focuses on preventing non-communicable diseases.

Additionally, 27.5% of respondents require maintenance medications, while the majority (72.50%) do not.

Among the 51 respondents, only 8 individuals (15.7%) have undergone surgery in the past five (5) years, indicating that the majority have not required surgical interventions during this period.

Further analysis reveals that 72.50% of respondents do not have any allergies, while 27.5% report existing allergies. Allergies can pose potential challenges, emphasizing the importance of taking appropriate measures, such as confirming food allergies before conducting activities and ensuring the availability of antihistamines in the office and during events.

#### *4.2. Extent of Implementation of Health and Wellness Program and Its Effectiveness*

All respondents (100%) are well-informed about the ongoing Health and Wellness activities conducted by DILG Region 10. This awareness indicates a positive engagement with the organization's initiatives related to employee well-being.

Regarding participation frequency in the Health and Wellness Program activities, a notable 35.29% of respondents reported frequent engagement, highlighting a significant interest and involvement in these initiatives. However, it is noteworthy that a small proportion, represented by only one personnel (1.96%), have never participated in any of these activities, suggesting potential areas for outreach or improvement in engagement strategies.

The survey data also provided insights into the perceived effectiveness of various Health and Wellness Program activities. Notably, respondents identified 29 activities as highly effective, with key areas including mental wellness activities, sports activities, availability of medicines and medical equipment, first aid kits, flexible work schedules, workplace gym facilities, team-building activities, recollection sessions, provision of shuttle services, breastfeeding and childcare facilities, and zumba sessions. These findings underscore the diverse range of initiatives that resonate positively with the participants and contribute to their overall well-being.

However, certain programs were identified as needing improvement or further attention. For instance, on-site gardening was mentioned by respondents as an area requiring enhancement, indicating a potential opportunity to enhance green initiatives within the Health and Wellness Program.

Additionally, the survey revealed programs that participants perceived as currently not implemented but could be beneficial. These include the Annual Physical Exam, Smoking Cessation Programs, Financial Wellness Programs, Flu and Pneumonia Shots, Health Fairs, Wellness Challenges, Wellness Newsletter, Nutrition Education, Games Room, Massage Chairs, Provision of Healthy Food, Community Service initiatives, Health Consultations, Support Groups, Seminar on Disease Prevention, and First Aid Training. Exploring the feasibility and interest in implementing these programs could further enrich the Health and Wellness offerings for DILG Region 10 employees.

On a rating scale of 1 to 5, where 1 signifies the lowest and 5 signifies the highest effectiveness, 41.18% of respondents rated the overall effectiveness of the DILG Region 10 Health and Wellness Program at 4, indicating a generally positive perception of how well the program addresses their health concerns.

Moreover, it is notable that a significant majority of respondents (76.50%) are not aware of any available list or database of health professionals, institutions, or services within the office. Enhancing awareness and access to such resources could further support employees in addressing their health needs and accessing relevant healthcare services effectively.

#### *4.3. Innovation Solution Approach*

To achieve the innovation design, a five-step process was implemented as follows:

##### 4.3.1. Approval

In this crucial stage of the research process, securing the approval of the Department of the Interior and Local Government (DILG) 10 Regional Director was a significant milestone. The groundwork for this approval began with a comprehensive presentation of the proposed online survey during the Management Committee (ManCom) Meeting held on January 29-30, 2024. This meeting served as a platform to showcase the strategic initiatives planned by the Human Resource Management Section (HRMS) for the year 2024.

The ManCom Meeting was a high-level gathering that included key decision-makers within the DILG Region 10, such as the Regional Director, Assistant Regional Director, Provincial and City Directors, Cluster Heads, Program Managers, and Division/Section/Unit Chiefs from the Regional Office. The presentation highlighted the importance of the online survey as a pivotal component of HRMS activities for the year, emphasizing its role in gathering critical insights and data for informed decision-making and strategic planning.

Following the presentation, extensive discussions and deliberations took place, focusing on the methodology, objectives, and anticipated outcomes of the proposed survey. The active participation and engagement of the ManCom members ensured a thorough understanding of the survey's significance in addressing key HRMS priorities and aligning with the broader organizational goals of the DILG Region 10.

After thorough consideration and review, the DILG 10 Regional Director officially endorsed and approved the conduct of the study, recognizing its value in enhancing HRMS strategies and fostering a data-driven approach to human

resource management within the organization. This approval marked a critical step forward in the research process, paving the way for the implementation and execution of the online survey as a vital tool in assessing and improving HRMS effectiveness and performance.

#### 4.3.2. Collect

To ensure a comprehensive understanding of the participants' experiences and perspectives, a survey tool was meticulously crafted to gather both quantitative data and qualitative insights. This tool, administered through Google Forms, facilitated data collection from March 12-14, 2024. However, a notable challenge arose as not all employees possessed the smartphones or laptops necessary for accessing the online survey, particularly among drivers and utility workers in the Office.

To address this digital divide, the research proponent proactively engaged these employees, explaining the survey's purpose and significance. Providing tablets for their convenience, the proponent remained available to address any queries, especially given the survey's English language format. This inclusive approach aimed to ensure equitable participation and representation across all roles within the organization.

One strategic decision made during survey design was the omission of personal identifiers such as names, positions, stations, and email addresses. This intentional choice aimed to foster candid responses, alleviating concerns about potential repercussions or misuse of data. While this approach encouraged honest feedback, it also posed a challenge in tracking participants who encountered barriers to survey completion.

As a result, the survey captured responses from 51 out of 100 personnel, reflecting a partial but valuable snapshot of employee perceptions and experiences. Moving forward, strategies for enhancing accessibility and participation among all staff categories will be explored, balancing anonymity with the need for comprehensive data collection.

#### 4.3.3. Analyze

The collected data underwent a rigorous process of processing and analysis, integrating quantitative and qualitative methodologies to glean multifaceted insights aligned with the study's objectives. Quantitative analysis delved into numerical data, employing statistical tools to uncover patterns, trends, and correlations within the dataset. This approach provided a structured understanding of measurable variables, such as frequencies, percentages, and averages, illuminating the prevalence and distribution of key factors under investigation.

Simultaneously, qualitative analysis delved into the rich narratives and perspectives expressed by participants, delving deeper into the nuances, contexts, and meanings embedded within their responses. This qualitative exploration utilized thematic analysis, content analysis, and narrative inquiry techniques to unearth themes, emergent patterns, and contextual insights. By immersing in participants' voices, experiences, and perceptions, the qualitative analysis enriched the understanding of underlying motivations, beliefs, and attitudes shaping their perspectives.

The analyses were intricately tailored to the study's objectives, ensuring that each analytical approach contributed meaningfully to the overarching research goals. Quantitative analysis provided robust statistical evidence and quantifiable insights, while qualitative analysis offered depth, context, and a human-centric lens to the findings. This integrated analysis framework facilitated a comprehensive and nuanced interpretation of the data, enabling the synthesis of quantitative rigor with qualitative richness to generate actionable recommendations and insights aligned with the study's aims and objectives.

#### 4.3.4. Propose

After conducting a thorough needs assessment among the respondents and identifying critical gaps, an actionable plan centered on the DILG Linkage Plan was meticulously crafted. This plan culminated in the development of a comprehensive policy brief, poised for presentation to the esteemed DILG Regional Office 10 Top Management. However, amidst this strategic planning process, several challenges emerged, notably in pinpointing priority programs that resonate both with the organization's objectives and the personnel's needs.

A major hurdle encountered during the proposal development phase was the intricate task of identifying viable funding sources and determining the corresponding funding requirements. Given the stringent guidelines governing resource allocation, operating within the framework of the General Appropriations Act as a National Government Agency posed additional complexities. Compounded by the fact that the DILG does not generate income independently, navigating the landscape of funding procurement for the identified Health and Wellness Programs proved daunting.

Within the ambit of the DILG Linkage Plan, two pivotal recommendations surfaced, each poised to drive impactful change within the organization:

- *Project Alayon*: Standing for Alliance and Linking Associations: Yielding Health Outcomes through Networking, this initiative underscores the collaborative ethos essential for fostering health outcomes across associations within the DILG framework.
- *Institutionalization through Policy*: This recommendation advocates for the formal integration of health and wellness frameworks into DILG Region 10's policy landscape. The proposed policy outline includes key components such as a robust Health and Wellness Framework, delineation of funding mechanisms, strategic programs encompassing Work Environment enhancement, Emergency Preparedness protocols, One-Stop Wellness Network (Project Alayon), dedicated Wellness Hour initiatives, Annual Physical Examination protocols, Wellness Challenges, and a detailed Action Plan for implementation.

By strategically aligning these recommendations with the organization's overarching goals and operational realities, the proposed action plan aims to catalyze a holistic approach towards enhancing employee well-being, fostering a wellness culture, and, ultimately, optimizing organizational performance within the DILG Region 10 framework.

#### 4.4. Pledge

The DILG Linkage Plan underwent revisions in line with the recommendations put forth by the Top Management. Furthermore, the signing of the Pledge of Support and Commitment by the Top Management marked a significant milestone, symbolizing their unwavering dedication to delivering a top-tier Health and Wellness Program tailored specifically for the personnel of DILG Region 10.

### 5. Conclusions

Based on the extensive analysis and findings from this study, several key conclusions can be drawn regarding the implementation and effectiveness of the Health and Wellness Program in DILG Region 10 and the innovative solutions proposed to enhance its sustainability and impact.

Firstly, the study revealed a comprehensive profile of the participants, highlighting demographic trends, health statuses, and engagement levels with existing Health and Wellness Program initiatives. The majority of respondents displayed a positive awareness of ongoing activities and demonstrated varying degrees of participation, indicating a generally engaged workforce keen on wellness initiatives.

Secondly, the study underscored the effectiveness of numerous Health and Wellness Program activities, as perceived by the participants. These activities, spanning mental wellness, physical fitness, access to healthcare services, and educational sessions, garnered high levels of satisfaction and were deemed instrumental in promoting employee well-being.

However, gaps and areas for improvement were also identified, particularly in enhancing certain programs such as on-site gardening and expanding offerings like annual physical exams, smoking cessation programs, and financial wellness initiatives. These insights point towards strategic opportunities to further enrich the Health and Wellness Program's offerings and address evolving employee needs comprehensively.

Moreover, the innovative solution approach outlined in this study, encompassing meticulous approval processes, data collection strategies, rigorous analysis methodologies, and strategic proposal development, culminated in a refined DILG Linkage Plan. The revisions made in response to Top Management recommendations, coupled with the symbolic commitment reflected in the signing of the Pledge of Support and Commitment, signify a concerted effort to elevate the Health and Wellness Program to new heights of effectiveness and sustainability.

In conclusion, this study not only sheds light on the current landscape of health and wellness initiatives within DILG Region 10 but also sets a roadmap for continuous improvement, innovation, and strategic alignment with organizational goals. By leveraging the insights gained and implementing the proposed recommendations, DILG Region 10 is poised to foster a culture of wellness, resilience, and optimal performance among its personnel, contributing significantly to organizational success and employee satisfaction.

### 6. Recommendations

Based on the conclusions drawn from the study on the Health and Wellness Program in DILG Region 10, here are five recommendations:

- There is a need to expand the Health and Wellness Program to include initiatives such as on-site gardening, annual physical exams, smoking cessation programs, and financial wellness initiatives. These additions will address identified gaps and provide a more comprehensive suite of services to support employee well-being.
- It is also imperative to develop strategies to enhance accessibility to Health and Wellness Program activities, especially for employees who may face barriers such as digital access or time constraints. Consider alternative formats or scheduling options to ensure inclusivity and participation across all staff categories.
- This study further recommends that the DILG-10 implement targeted awareness campaigns to highlight the benefits and importance of Health and Wellness Program activities. This includes raising awareness about available resources, educating employees on preventive health measures, and promoting a culture of well-being throughout the organization.
- Moreover, there is a need to conduct regular evaluations and feedback mechanisms to assess the effectiveness of Health and Wellness Program initiatives. Use data-driven insights to continuously improve and tailor programs to meet evolving employee needs and preferences.
- Lastly, it is important to maintain and reinforce the commitment demonstrated by Top Management through continuous support, resource allocation, and integration of Health and Wellness Program objectives into organizational strategies and policies. Foster a culture that prioritizes employee well-being as a fundamental pillar of organizational success.

Implementing these recommendations will not only address identified gaps and enhance program effectiveness but also foster a positive work environment, improve employee satisfaction, and contribute to overall organizational success in DILG Region 10.

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