

Analyzing Scheduling Practices in Paranaque Private Medical Hospitals: A Study of Administrative Productivity Outcomes Across Peak and Off-Peak Service Periods

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Abstract- Efficient scheduling practices are essential to the effective operation of healthcare organizations because they influence patient flow, staff workload, service quality, and overall administrative productivity. This study examined the relationship between scheduling practices and administrative productivity in selected private medical hospitals in Parañaque City during peak and off-peak service periods. The study was anchored on Frederick W. Taylor's Scientific Management Theory and Henri Fayol's Administrative Management Theory, which emphasize efficiency, systematic work processes, and effective organizational management.

A quantitative descriptive-correlational research design was employed to collect data from administrative and healthcare personnel working in selected private medical hospitals. The study evaluated appointment systems, time allocation, and the management of walk-in patients, as well as their effects on task completion, patient waiting time, staff workload, and workplace efficiency. Data were analyzed using appropriate descriptive and inferential statistical techniques to determine the relationship between scheduling practices and administrative productivity.

The findings are expected to provide practical recommendations for improving scheduling systems, reducing patient waiting time, enhancing staff productivity, and strengthening healthcare service delivery. The study also contributes to the existing body of knowledge by providing localized evidence on scheduling practices in private medical hospitals in Parañaque City, particularly during peak and off-peak service periods.

Keywords: Scheduling Practices, Administrative Productivity, Private Medical Hospitals, Peak Service Periods, Off-Peak Service Periods, Healthcare Management, Patient Waiting Time, Workplace Efficiency

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INTRODUCTION

Efficient scheduling is a fundamental component of healthcare management because it directly influences patient flow, resource utilization, service quality, and administrative productivity. In private medical hospitals, effective scheduling systems facilitate the timely delivery of healthcare services by coordinating patient appointments, allocating staff resources, minimizing waiting times, and improving workflow efficiency. As healthcare institutions continue to experience increasing patient demand, particularly during peak service periods, the need for well-structured scheduling practices has become increasingly important.

Recent studies have emphasized the significant role of scheduling systems in improving healthcare operations. Gupta and Denton (2022) reported that structured appointment scheduling reduces patient waiting times and enhances service efficiency through better management of patient arrivals. Likewise, Zhang et al. (2023) found that digital scheduling technologies, including online appointment systems and automated reminders, significantly decrease patient no-show rates while improving clinic productivity. Similarly, Lee and Park (2024) concluded that automated scheduling systems reduce administrative workload by minimizing manual processes, thereby increasing operational efficiency.

In addition to fully digital systems, hybrid scheduling approaches have also demonstrated effectiveness, particularly among small and medium-sized healthcare facilities. Santos (2023) explained that combining manual and digital scheduling methods provides greater flexibility for healthcare organizations that are gradually adopting technological innovations. Likewise, Ramirez et al. (2025) emphasized that effective scheduling systems maximize administrative productivity by improving appointment coordination and workforce management.

Patient volume also plays a crucial role in healthcare operations. Brown et al. (2021) observed that fluctuations in patient arrivals during peak and off-peak periods significantly influence hospital efficiency. Peak periods often result in overcrowding, longer waiting times, and increased staff workload, whereas off-peak periods may lead to underutilization of available resources. Similarly, Chen and Huang (2022) reported that scheduling systems that fail to adjust to changing patient demand contribute to inefficient resource allocation and reduced organizational performance.

Administrative productivity has likewise become an important indicator of healthcare performance. Wilson et al. (2023) identified time efficiency, task completion, workload distribution, and appointment management as key indicators of administrative productivity. Their findings revealed that effective scheduling systems improve staff productivity by reducing idle time and streamlining workflow processes. Likewise, Kim and Lopez (2024) concluded that efficient scheduling enhances employee coordination, resulting in improved organizational performance and better service quality.

Despite these developments, important research gaps remain. Most previous studies have focused on large hospitals or healthcare institutions, while relatively few have examined scheduling practices in private medical hospitals operating within local communities. Furthermore, limited research has investigated how scheduling practices influence administrative productivity during both peak and off-peak service periods. Existing studies primarily describe variations in patient volume but provide limited evidence regarding how scheduling strategies affect operational performance under different service conditions.

Another significant gap is the limited availability of localized studies conducted in Parañaque City. Differences in patient demand, healthcare resources, organizational practices, and technological adoption may influence the effectiveness of scheduling systems across healthcare institutions. Consequently, findings from international and national studies cannot always be directly applied to private medical hospitals operating within the local context.

This study addresses these gaps by examining the scheduling practices implemented in selected private medical hospitals in Parañaque City and determining their relationship with administrative productivity during peak and off-peak service periods. Specifically, the study investigates appointment scheduling systems, time allocation, and the management of walk-in patients, together with their effects on task completion, patient waiting time, staff workload, and workplace efficiency.

The findings of this study are expected to provide evidence-based recommendations for hospital administrators, healthcare professionals, and policymakers in improving scheduling systems and administrative operations. Furthermore, the study contributes to the growing body of healthcare management literature by providing localized empirical evidence that may serve as a basis for future research and institutional policy development.

STATEMENT OF THE PROBLEM

This study aims to analyze scheduling practices and their effect on administrative productivity in private medical offices in Parañaque City.

Specifically, it seeks to answer the following questions:

1. Respondent Profile

- 1.1 Age
- 1.2 Gender
- 1.3 Hospital Name
- 1.4 Years of experience

2. How Scheduling Practices in Private Medical Offices Works?

2.1 Appointment System

- 2.1.1 The clinic uses a digital appointment system for scheduling patients.
- 2.1.2 The current appointment system improves scheduling efficiency.
- 2.1.3 The appointment system minimizes scheduling errors.

2.2 Time Allocation per Patient

- 2.2.1 Sufficient time is allocated for each patient consultation.
- 2.2.2 Time allocation per patient is consistently followed.
- 2.2.3 The allotted time helps maintain a smooth workflow.

2.3 Handling of Walk-in Patients

- 2.3.1 Walk-in patients are managed efficiently alongside scheduled Patients.
- 2.3.2 The clinic has clear policies for handling walk-in patients.
- 2.3.3 Accommodating walk-ins does not disrupt scheduled appointments.

3. How does Administrative Productivity affect the following? (Peak and Off-Peak Periods)

3.1 Task Completion Time

- 3.1.1 Administrative tasks are completed promptly during peak hours.
- 3.1.2 Administrative tasks are completed promptly during off-peak hours.

3.2 Patient Waiting Time

- 3.2.1 Patient waiting time is minimized during peak hours.
- 3.2.2 Patient waiting time is minimized during off-peak hours.

3.3 Staff Workload Efficiency

- 3.3.1 Staff can efficiently manage workload during peak hours.
- 3.3.2 Staff can efficiently manage workload during off-peak hours

3.4 Number of Patients Served per Hour

- 3.4.1 The clinic can handle a high number of patients per hour during peak Periods.
- 3.4.2 The clinic maintains a steady patient flow during off-peak periods.

4. How do Scheduling Practices impact Workplace Efficiency?

4.1 Staff Attitude

- 4.1.1 Effective scheduling improves staff morale.
- 4.1.2 Staff maintain a positive attitude despite scheduling demands.

4.2 Workplace Ethics

- 4.2.1 Scheduling practices promote fairness among patients.
- 4.2.2 Staff follow ethical standards when managing schedules.

4.3 Work-related Stress

- 4.3.1 Poor scheduling increases staff stress levels.
- 4.3.2 Efficient scheduling reduces workplace stress.

5. How does Productivity compare during Peak and Off-Peak Hours?

- 5.1.1 There is a noticeable difference in productivity between peak and off-peak Hours.
- 5.1.2 Productivity is significantly higher during off-peak hours than peak hours.
- 5.1.3 Scheduling practices affect productivity differently during peak and off-peak Periods.

OBJECTIVES

General Objective:

To analyze scheduling practices and their impact on administrative productivity in private medical offices in Paranaque City.

Specific Objective:

1. To seek private hospitals in Paranaque City.
2. To identify current scheduling practices used in private medical offices.
3. To identify the effects of scheduling practices on workplace efficiency.
4. To compare productivity levels during peak and off-peak hours.
5. To propose recommendations for improving scheduling systems.

SIGNIFICANCE OF THE STUDY

This study has significance for different stakeholders of the health sector of Parañaque. In looking into the practices of private medical offices based on their scheduling and their impact on productivity during peak and off-peak hours, this research provides valuable information to the

- **Medical Staff** – to reduce workload stress and improve performance
- **Local Private Health Care Association** – results can guide industry-wide efforts to improve service quality and operational standards for small and medium private medical offices
- **Patients** – to experience shorter waiting times and better service
- **Future Researchers** – to provide a basis for further studies in medical offices

SCOPE AND LIMITATIONS

This study seeks to analyze the scheduling methods and their effect on the productivity at some private medical hospitals in Parañaque City. In particular, the effect of various types of scheduling, such as appointment scheduling, time given to each patient, queue management, and walk-in clients, is studied for productivity during peak and off-peak hours. The respondents also include the administration personnel and the healthcare workers. There are also quantitative measures of productivity such as the waiting time of patients, the efficiency of task completion, and the distribution of workload. It also analyzes the creation and implementation of scheduling protocols in the various specialized areas of the selected medical offices. This research will investigate the different consequences of manual and computerized scheduling systems. The study will also examine the impact of external circumstances, such as holidays and load shifting, on existing scheduling systems.

LIMITATIONS

This study is limited to only several medical hospitals in Parañaque City; however, public health care offices or clinics in other places may have distinct scheduling patterns and conditions. The study is based on personal perceptions or responses supplied by the respondents, which may be influenced by their perspectives or biases. Another reason is that administrative productivity is based on only some indications or parameters but not comprehensive in nature. Time constraints, availability of respondents, and data availability may also affect the research. Not all private medical offices in the city participated, so the researchers' observations may not reflect how all practices work—some declined to participate, which helps shape the image they built. The technology setup was diverse in each office, from simple manual systems to more complex ones. The researchers could not fully control for these variables; thus, they may have altered the impact of scheduling on productivity. Researchers could only collect data over a brief time; therefore, they are unsure about the long-term impact of the scheduling on production levels. The researchers were only able to collect data over a limited period of time, so they cannot say exactly what the long-term consequences of the scheduling were on the production level.

DEFINITION OF TERMS

For clarity and consistency, the following terms are defined as used in this study;

BMC – Bone Medical Content IPO - Input-Process-Output Lab - Laboratory

DLSUMC - De La Salle University Medical Center

ASP - Appointment Scheduling Problem

FP - For-profit

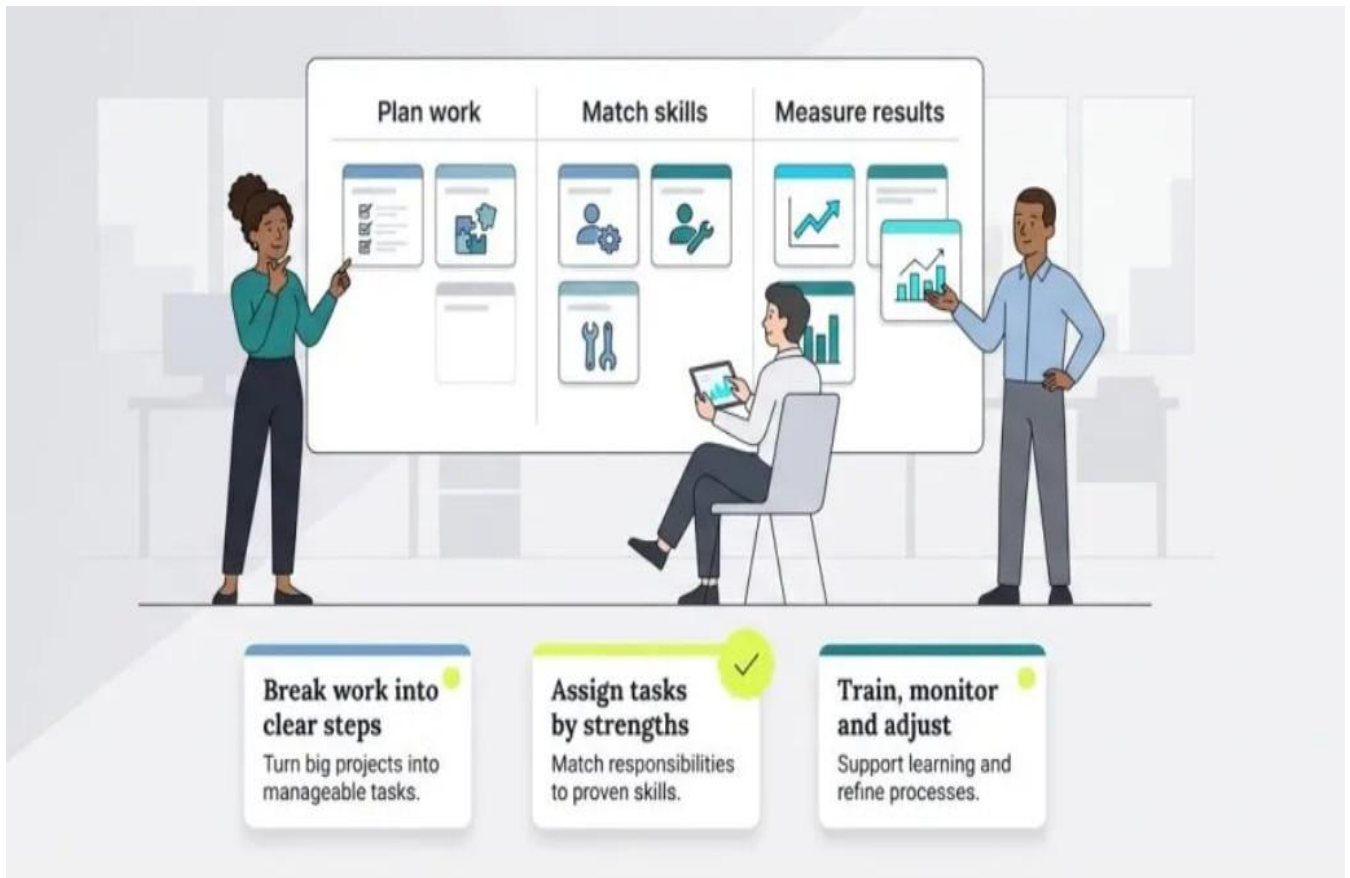
NFP – Not-for-profit

IEEE - Institute of Electrical and Electronics Engineers

AS - Appointment Scheduling PMH- Private medical Hospital DSP- Digital Scheduling Practices

PSMT- Principles of Scientific Management Theory

THEORETICAL FRAMEWORK



This study is anchored on Frederick W. Taylor's Scientific Management Theory and Henri Fayol's Administrative Management Theory, both of which emphasize efficiency, systematic work processes, and effective organizational management. These theories provide the conceptual foundation for examining how scheduling practices influence administrative productivity in private medical hospitals.

Frederick W. Taylor's Scientific Management Theory emphasizes the application of scientific methods to improve organizational efficiency by analyzing work processes, standardizing procedures, and optimizing the use of available resources. Taylor argued that productivity can be enhanced by identifying the most efficient way to perform tasks, minimizing unnecessary activities, and ensuring that work is systematically organized. In the context of this study, effective scheduling practices—such as appointment management, appropriate time allocation, and efficient handling of walk-in patients—represent standardized administrative processes that can improve workflow, reduce patient waiting time, and increase staff productivity.

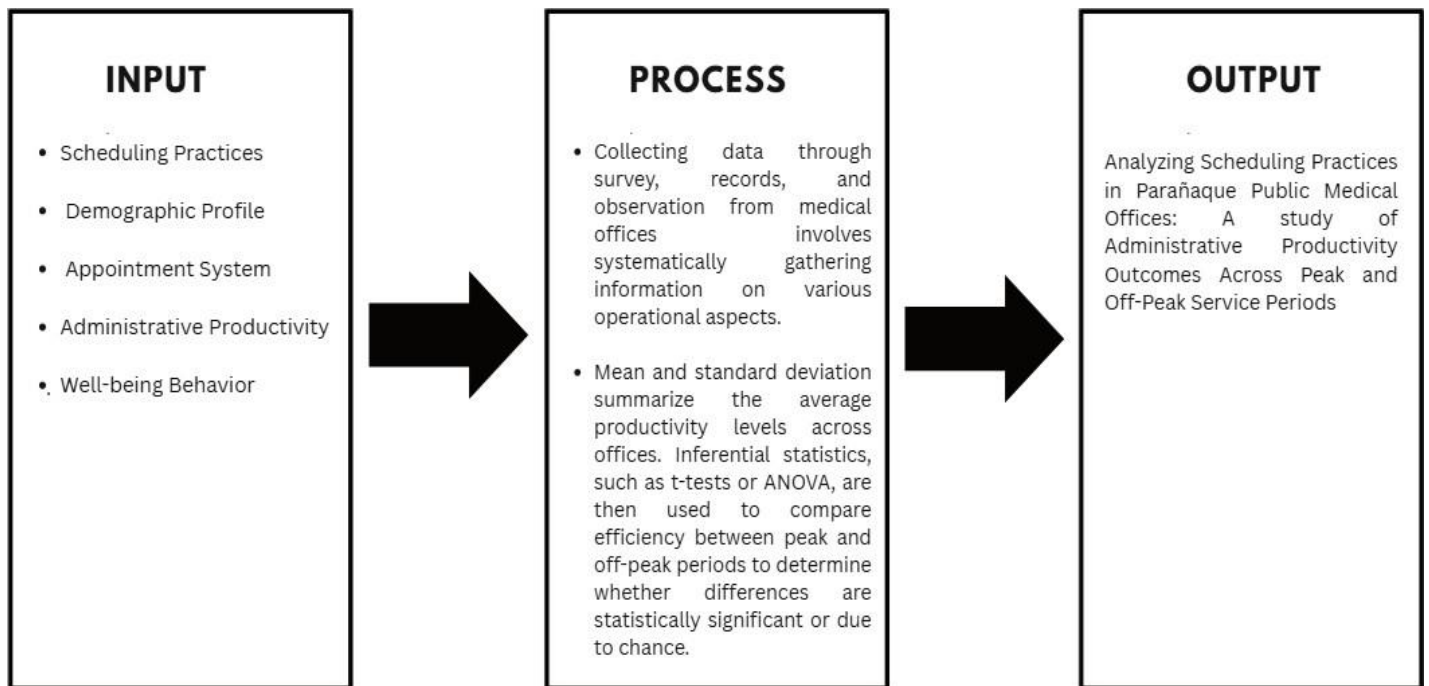
Henri Fayol's Administrative Management Theory complements Taylor's perspective by emphasizing the managerial functions of planning, organizing, coordinating, directing, and controlling organizational activities. Fayol maintained that effective management depends on careful planning and proper coordination of human and material resources to achieve organizational objectives. Within private medical hospitals, scheduling serves as an important administrative function that requires careful planning and coordination to ensure the efficient delivery of healthcare services during both peak and off-peak service periods.

The integration of these theories provides a comprehensive framework for understanding the relationship between scheduling practices and administrative productivity. Taylor's theory explains how standardized scheduling procedures contribute to operational efficiency, while Fayol's theory highlights the importance of effective managerial planning and

coordination in implementing these procedures. Together, these theories support the assumption that well-designed scheduling practices can improve administrative productivity by enhancing workflow efficiency, optimizing staff workload, reducing patient waiting time, and promoting better healthcare service delivery.

Accordingly, this study adopts these theoretical perspectives to examine how scheduling practices influence administrative productivity in selected private medical hospitals in Parañaque City during peak and off-peak service periods.

CONCEPTUAL FRAMEWORK



The conceptual framework that served as the basis for this study was the input-process-output (IPO) model, which attempts to explain how these variables are related and how they produce health care worker well-being in the chosen private hospitals in Parañaque City. Time table procedures, demographic profile, appointment system, administrative productivity, and well-being were included as variables indicative of the characteristics that could directly or indirectly affect well-being. The perceived performance is a set of patient satisfaction questionnaires developed by Hays and Marshall (1994). The researcher will investigate the degree of the client's anticipation and their impression of the execution of the medical personnel to define the sort of disconfirmation and ultimately determine their level of satisfaction.

HYPOTHESIS

H₀ (Null Hypothesis):

There is no significant relationship between scheduling practices and administrative productivity across peak and off-peak periods.

H₁ (Alternative Hypothesis):

There is a significant relationship between scheduling practices and administrative productivity across peak and off-peak periods.

REVIEW RELATED LITERATURE

Frederick W. Taylor & Principles of Scientific Management Theory

The theory forms the basic basis for the relationship between the work process and the efficiency of increasing the productivity of the administration, especially in the private medical clinic. According to Taylor's Principles of Scientific Management (Peek, 2026), we should scientifically analyze work processes and optimize their efficiency and productivity. Not only should the work processes be studied, but they should also be scientifically improved and polished.

Instead of relying on outdated techniques, we should identify the "one best way" to perform tasks. Private medical clinics in Paranaque City can also apply this idea to their appointment scheduling practices.

The study is based on the management theories of Henri Fayol and Frederick Winslow Taylor, which provide complementary viewpoints on organizational efficiency and production. It stresses the function of top management and the overall administration of the company. This framework is founded on essential managerial responsibilities such as planning, organizing, commanding, coordinating, and controlling. These functions are also very important in planning and controlling organizational operations such as scheduling practices in medical offices. This theory is employed in this study to understand how scheduling systems are created, implemented, and managed to ensure smooth operations across peak and off-peak service periods.

It merges the two theories, viewing scheduling practices as an administrative function (Fayol) and studying its impact on production outcomes (Taylor). Specifically, the theory of Fayol is the base for the analysis on how scheduling is managed in private medical offices, and the theory of Taylor is the base for the analysis on the effectiveness of these scheduling practices in increasing the administrative productivity during peak and off-peak periods. It is a process of standardization—under Taylor's idea, the assignments are broken down into sub-tasks. Managers that believe in Taylor's idea should divide huge jobs into several smaller assignments rather than giving an individual the complete project. The subtasks are to make the process more organized and efficient. They will have numerous employees working on one assignment, and each individual will take care of their portion.

Scheduling Practices: The "standard process" for setting up appointments and managing daily work. In Taylor's view, this approach supports the argument that scheduling should not be arbitrary or the result of "one person" but should be based on a clear, systematic procedure. Admin labor at a medical office requires multiple processes (checking patient records, encoding data, fielding calls, and billing). Taylor advises breaking major jobs into smaller pieces so they will be easier and faster to complete. This approach directly measures productivity results. Simplifying duties leads to more efficient work completion. You distribute the job right among people so the office can better handle varying volumes." Work flows fast; everyone knows their task during peak periods. As a result, there is no wasted time. Tasks are kept organised at off-peak times so personnel are still productive.

Supporting Theory

Healthcare Scheduling in Optimization context: a review

This work, Healthcare Scheduling in an Optimization Context: A Review, relates to patient admission scheduling, nurse scheduling, operation room scheduling, surgery scheduling, and other concerns. The work provides a comprehensive survey of healthcare scheduling with a focus on recent studies. The progress of healthcare scheduling research is crucial to save costs, improve patient flow, provide timely treatment, and maximize the utilization of the hospital resources.

In recent decades, healthcare scheduling systems based on metaheuristics to automate the optimum resource management search in hospitals have gained popularity. However, the presented results are fragmented because each particular problem was dealt with separately, and there were a number of versions of the problem specification and distinct data sets for each of these problems available. The most common concerns in the literature are therefore reviewed in this study, focusing on the most recent healthcare scheduling challenges, with an emphasis on patient admission scheduling, nurse scheduling, and operating room scheduling. Moreover, this study intends to help scholars to identify new patterns for future directions and reveal some of the developments from the most recent studies (Abdalkareem et al., 2021). The theory suggests efficient work organization with special emphasis on efficiency, standardization, and problem-solving. In this study, we address the problems of optimal admission and nurse scheduling and effective use of operating rooms.

Moreover, the use of metaheuristics for healthcare scheduling is consistent with the principle of Taylor to substitute unscientific decisions based on intuition with scientific conclusions based on objective data. The report also aims to consolidate the fragmented literature on scheduling challenges and their solutions. The ideas mentioned in the study are worth noticing since they mirror the key principles of scientific management theory.

Technology and Access to Healthcare with Different Scheduling System: A Scoping Review

Lucas Manarte, in his study, emphasizes the role of scheduling systems in managing patient flow and lowering waiting times. He evaluates different research on online scheduling systems and technology in healthcare and notes that technology has a substantial effect on keeping order, especially with the use of online consultations, which are now very widespread in health services. It talks about how alternative approaches to scheduling appointments affect day-to-day operations; that is what we are exploring in Parañaque. The article discusses the growing global trend of online booking and examines the positives and downsides of using technology for making appointments. It states that online technologies can improve healthcare more easily and quickly, but it also brings problems such as the digital divide, privacy issues, and costs of implementation. This trend is consistent with the study's focus on scheduling and operational methods of private hospitals. "Proper methods and technology help avoid delays and confusions," argues Manarte. This topic is intimately connected with the quality and speed of the work of the administrative personnel when they are guided by a specified planning procedure. The article doesn't directly address "peak" and "off-peak" hours, but it does talk about how crucial it is to have effective techniques to control the number of people coming in. This method is vital to avoid overcrowding or long queues, which is necessary whether the clinic is very busy or has few people at particular times.

This essay supports the core principle of Frederick Taylor's scientific management theory, which is efficiency and ordered procedures. Taylor thought that work should be done by the most scientific means available, not by old or habitual methods. Manarte's paper contends that organized scheduling systems, like online booking, embody this "scientific" approach to planning operations and enhancing speed. Such systems, as Taylor meant them to be, save time by eliminating superfluous stages and delays. The study demonstrates that proper planning can reduce waiting times and simplify administrative tasks. This is consistent with Taylor's recommendation that one should plan carefully and break down jobs to improve efficiency. The study, as this article says, demonstrates that scheduling is the most significant element to coordinating and managing patient and staff activities efficiently.

Ways to Improve the Efficiency of Private Hospital Business Administration

Ways to Increase the Efficiency of Private Hospital Business Administration In studies, the confidential information revealed by a patient and the observations made by healthcare professionals during the examination and treatment process are considered basic trust and must be protected at all times. Only the appropriate settings, such as academic environments or courtrooms, should reveal this type of information. Respect for the dignity and modesty of the patient is crucial. No member of the healthcare team, including physicians and nurses, has a right to unnecessarily expose the patient. Any infringement of this concept can shake the trust of patients in health care providers. Therefore, all hospital personnel, including physicians, nurses, laboratory and radiologic technicians, physiotherapists, and all others, should be discreet and professional to maintain the trust of the patients who share information in good faith, expecting that it will be kept confidential and used only for their care.

Furthermore, strong secrecy helps increase productivity in the healthcare setting through trust, open communication, and allowing healthcare providers to provide more effective, accurate, and patient-centered services. This notion is especially pertinent in healthcare research, where protecting patient information is not only ethical but also increases data dependability, encourages participant collaboration, and promotes the overall validity of research conclusions. In accordance with the principles of scientific management, the structured management of patient information through standardized procedures, clear protocols, and efficient workflow practices also helps enhance the productivity of the organization while ensuring confidentiality is maintained at all stages of healthcare delivery.

In Lillian Gilbert's article, she explains the extension of the principles of early management theory through the creation of scientific management. The original approach was basically to increase productivity through time studies, finding the best way to do things. Subsequent developments expanded this approach to include motion study, which focuses on the specific physical movements involved in work processes. The purpose of the method was to minimize superfluous movements, reduce worker fatigue, and improve efficiency in both industrial and administrative environments. In particular, the contributions to the human side of scientific management emphasized the significance of incorporating psychological principles into the analysis of labor. The view stressed the importance of understanding worker behavior,

motivation, and mental processes as key elements in productivity, particularly in clerical and administrative work. This method offered a more comprehensive view of efficiency by taking into account both physical and psychological characteristics, acknowledging that productivity is not only gauged by production but also by the human factors that affect performance.

The contributions are very relevant for the research of scheduling practices in private medical offices, since the efficiency in the synchronization of tasks, time, and personnel is fundamental for the administrative productivity. By implementing these ideas, companies can create procedures that save wasted effort and increase service delivery. Good scheduling systems should be able to improve productivity in both peak and off-peak hours by optimizing patient flow, reducing idle time, and ensuring that administrative processes are performed with as much efficiency as possible.

Quality of Care During Off-Peak Hours: Are You Monitoring This?

The article emphasizes that hospitals are two systems at various times of the day. Staffing levels are better during peak periods with excellent supervision and comprehensive resources. Staffing levels are lower during off-peak periods, and experienced individuals and supervisors are often absent, and communication is more difficult. Minimal support services (lab, pharmacy, etc.). Such situations lead to increased deaths, medical mistakes and complications, longer hospital stays, and higher costs. The paper also points out that the nurses' working hours are 64% off-peak hours, i.e., the majority of the care is really given when the resources are at their weakest point, and only later the mistakes are identified. Poor communication across shifts and poor handoffs lead to poor outcomes for patients. The article proposes that measuring disparities between peak and off-peak performance can improve staffing and communication systems that incorporate off-peak personnel in decision-making and analyzing the data separately for peak and off-peak periods.

The basic principle of Frederick Taylor's scientific management is supported by this article, which is about the quality of care delivered in peak and off-peak periods. The analysis shows that more workers and resources are required at peak hours. However, off-peak hours do not utilize these resources. Furthermore, the piece states, "Quality care is offered to patients when the resources are managed in an appropriate way and the personnel and management have a clear plan in place." Finally, this article directly links to the scientific management theory of Frederick Winslow Taylor by demonstrating how healthcare procedures are inefficient due to consistent noncompliance with the principles of scientific management. Taylor's theory emphasizes systematic planning, proper staffing, standardization of work, and the use of data to make decisions to improve optimum efficiency and productivity.

The decline in the quality of care during off-peak hours (nights and weekends) is an example of the failure of these factors, specifically regarding staff distribution, supervision, and performance management in the context of the article. No one is against the proper examination of data within shifts and consistent methods, a Taylor principle that the work systems are homogeneous and permanently evaluated. The research findings reveal that healthcare organizations do not use the concepts of scientific management, which can reduce efficiency and increase hazards to patient safety.

Local

HEALTHLINE: A MOBILE APPLICATION SCHEDULING SYSTEM WITH CHATBOT-BASED SYMPTOMS CHECKER AND AUTOMATED TRIAGE CLASSIFICATION

The continued outbreak resulted in restrictions on the number of individuals who may enter the hospital premises. Most hospitals in the Philippines are having a difficult time coping with their workload. Most patients complain of many issues in scheduled visits. One particular hospital in the country still had patients who booked appointments in the traditional way. This hospital is the De La Salle University Medical Center (DLSUMC).

The Healthline web portal and mobile appointment scheduling application were developed to address the problems of the traditional appointment method. The aim of this study was to improve the quality of care provided by the DLSUMC using a flexible and effective online booking system, a symptom checker via chatbot artificial intelligence, and automated triage level identification. To evaluate the usability of the online and mobile applications, a descriptive analysis and evaluation questionnaire based on ISO 25010:2011 requirements was implemented. Out of the 90 participants, 72 declared that the systems are excellent. The web application may quickly take the required information from the patient, including their medical history and symptoms with diagnoses. Moreover, it indicates a rise in the effectiveness of doctors in terms of diagnosis and the severity of patients' health problems. Integrating advanced software that uses programmed chatbot artificial intelligence and scheduling systems for mobile apps to automatically identify patients can provide DLSUMC a competitive advantage in their online healthcare services. The technologies built into Healthline were very useful tools for helping

doctors diagnose patients and improve the patient experience while helping staff and doctors manage their workload (Camaclang et al., 2022). The research study conducted at De La Salle University Medical Center provides significant insights on the implementation of digital scheduling systems in the delivery of healthcare services.

The Healthline web portal and mobile application presented an idea of how the shift from traditional methods of patient appointment to automated, technology-based operations could solve such common issues as overcrowding, inefficient scheduling, and uneven distribution of workload. The combination of activities like chatbot-driven symptom screening and computerized triage classification contributed to the increased capacity of the healthcare provider to prioritize patients and simplify the workflow that ultimately resulted in enhanced patient experience and increased staff efficiency. This approach is directly applicable to the present work, which is the analysis of scheduling in Paranaque Private Medical Hospitals: The study of administrative productivity examines peak and off-peak services, demonstrating how scheduling innovations impact administrative performance and workload management. The DLSUMC study focused on a hospital setting and the efficiency of digital instruments, but the current study broadens this view. This study investigates the effect of different scheduling behaviors, including both conventional and technology-based scheduling, on the administrative efficiency of private medical offices during peak and off-peak seasons. Furthermore, the premise that the findings from the DLSUMC study, which indicate improved efficiency and workload balance, supports the idea that efficient scheduling systems can reduce bottlenecks and increase staff performance—key variables being studied in the present research conducted in Parañaque.

Turnaround Time of Consults in a Primary Care System in Rural Philippines: A Descriptive Retrospective Cohort Study

Turnaround time is an important component of healthcare, meaning the time a patient spends in a healthcare setting from registration to the end of a consultation. The goals of this retrospective cohort study were to determine the turnaround time pre- and post-pandemic in a primary care setting in rural Philippines. Data analysis was conducted using the electronic medical records of 342 selected patients out of 45,501 patients total (from April 2019 to March 2021). It was found that the mean response time was 29.0 minutes. The median turnaround time pre-pandemic was 29.3 minutes, and the median turnaround time post-pandemic was 27.5 minutes, with no statistical significance shown by the statistical analysis. ($P=0.39$). The median time above is substantially shorter by eight hours than those of other studies conducted in the Philippines, and yet turnaround times have not altered, notwithstanding the new regulations in the pandemic (Barbadillo MD et al., 2024).

Barbadillo et al. (2024) suggest that turnaround time might be a factor in the quality of care and might be defined as the time a patient spends within a healthcare facility from entry to consultation. They discovered that turnaround times were not significantly different between the pre-pandemic and pandemic periods, and they remained fairly steady even after the operational adjustments made due to the COVID-19 epidemic. This finding could imply that the health institutions may have been able to support the supply of services even in varied conditions. This finding can be employed in the present study, "Analyzing Scheduling Practices in Parañaque Private Medical Hospitals: A Study of Administrative Productivity Outcomes in the Peak and Off-Peak Service Periods," due to the turnaround time being directly proportional to administrative productivity and operational efficiency. But Barbadillo et al. (2024) explored the temporal discrepancies within the pandemic conditions; the present study continues this approach by investigating the scheduling procedures and the effect on the turnaround time during peak and off-peak periods of service. In particular, efficient scheduling systems will decrease the waiting time for patients and improve workflow predictability, especially at peak demand times.

Moreover, the turnaround time observed in their study is considerably less than what has been reported in other settings in the Philippines, which underlines the likely involvement of effective operating tactics such as scheduling processes. This further supports the hypothesis of the present study that the disparities in the scheduling patterns of the different private hospitals in Parañaque may contribute to the administrative productivity results. Thus, the Barbadillo et al. article (2024) could be empirically grounded in this way with respect to the use of the turnaround time as an important variable to assess the performance of scheduling procedures in health care organizations.

The Impact of Work Performance of Medical Office Staff on Client Satisfaction in Public Hospital in Metro Manila

This study seeks to assess the effect of medical office staff performance on patient satisfaction in public hospitals in Metro Manila. This study aims to analyze the impact of medical office staff conduct on consumer satisfaction.

The conduct of the medical office staff influences consumer satisfaction. The sample was selected to guarantee that the researcher adopted a random selection method to ensure that the patients chosen for the study were representative of the greater population of patients in public hospitals in Metro Manila. The respondents were patients of public hospitals in Metro Manila. And in their study, the researchers utilized quantitative data analysis. The study of survey question data, especially the quantitative data, involves two steps: thematic analysis and coding. The underlying concepts and meanings generated from the participants' responses are the purpose of the study.

The results demonstrated that perceived performance in several areas had a strong impact on customer contentment, emphasizing the important function of service quality as a factor in overall satisfaction levels. Identifying possibilities to improve quality of care implies regular measurement of patient satisfaction through validated questionnaires. Service standards enhance perceived performance that meets patient expectations and continually educate staff in communication and cultural competency. Genuine service delivery also adequately addressed negative behaviors such as neglecting or deserting clients. The study recommends a rigorous training program with numerous training sessions that stress the importance of patient-centered care, communication skills, and ethical responsibilities (Aquillina et al., 2024). A local study by Aquillina et al. of the Polytechnic University of the Philippines Parañaque Campus studied the effect of the performance of medical office workers on patient satisfaction in Metro Manila government hospitals. The study adopted a quantitative research approach since the survey respondents were randomly selected. The questionnaires were employed in the analysis of the patient's perceptions. The findings showed that perceived staff performance has a considerable effect on patient satisfaction, specifically about the quality of their services, communication, and professionalism. The report has also highlighted the necessity to develop effective standards of service and to provide continuous training in communication skills, cultural competency, and patient-centered care training to enhance the overall healthcare delivery.

The current study, which analyzes scheduling practices in Parañaque private medical hospitals, can utilize this local study: A Study of Administrative Productivity. The outcomes during peak and off-peak service periods are significant because this study focused on the importance of administrative and operational elements in determining healthcare results. Whereas the study by Aquillina et al. (2024) focused on the performance of employees, their findings indicate that the administrative structure, of which scheduling is a part, plays an important role in impacting employee conduct and the effectiveness of the services delivered. Proper scheduling may also lead to greater staff performance in terms of patient flow, congestion during high-traffic periods, and delays, thus enhancing administrative productivity and the patient experience. Moreover, the study is based on the assumption made in the present study that effective scheduling methods should be the key to the greatest productivity outcomes; thus, the study is focused on the usage of structured systems for maintaining the quality of services and continuous development. The study of scheduling patterns in the high and low seasons can reveal how administrative rules impact workflow efficiency, staff performance, and overall service quality in privately owned hospitals in Parañaque

International

Enhancing the Performance of Patient Appointment Scheduling: Outcomes of an Automated Waitlist Process to Improve Patient Wait Times for Appointments

Recently, North et al. (2025) have characterized the patient booking process at the Mayo Clinic as an automated waitlist system. The solution enables patients to enter a virtual line and receive automatic notifications in the event of an available slot ahead of them. Statistics showed about 24.6 percent of patients were able to get appointments rescheduled, which lowered waiting times by an average of 22.6 days. This strategy also meant patients could receive treatments faster and eased the burden on the office personnel, who no longer had to spend as much time manually checking schedules or phoning back. Research has shown that employing technology-based scheduling strategies improves the efficiency of healthcare operations. These digital technologies can help institutions with a big number of patients to manage them more efficiently and reduce the number of activities that staff members will have to do manually.

But nonetheless, there are some areas the study didn't fully address. The report does not provide particular comparisons of the systems' performance in peak and off-peak periods. Additionally, it did not provide specific information on key

aspects of work performance, including the pace at which tasks are completed or how personnel plan their daily work. The study was also done at a large hospital abroad, and it's unclear if smaller private hospitals, like those in Parañaque, would get the same results due to different resources and methods.

This study attempts to address these inadequacies, focusing particularly on private medical hospitals. It will look at the varied scheduling strategies and how they affect the productivity of the administrative personnel, notably in the comparison of peak and off-peak periods. Scheduling is a vital element in keeping hospital operations functioning smoothly. You can observe the impact of various techniques at different times of the day and use that information to identify areas for improvement. It is also important to assess whether the procedures adopted in other nations are appropriate or need modifications to suit our local situation.

Earlier work does not directly compare peak and off-peak periods. It does not define any measures of administrative performance either. Furthermore, its context is significantly different in relation to the local situation, so the results cannot be immediately employed without further investigation. The study will further clarify the influence of scheduling methods on the real work output of employees in local and private hospitals. The findings will add to the existing knowledge and can be a guide.

Hospital Scheduling Systems Current Challenges and Emerging Solutions

In this work, published by IEEE, it is pointed out that the problem of hospital scheduling is a multifaceted operation difficulty, as it has to balance the demand of patients, the available resources, and the efficiency of services. The paper highlights the fact that the Appointment Scheduling Problem (ASP) is quite challenging, especially in the outpatient setting, because the patient arrival and treatment times vary, which affects the flow efficiency and patient satisfaction. It also highlights important issues, including misuse of resources, difficulty to grow, unpredictable flow of patients, and underutilization of new technologies. The research suggests some innovative solutions to cope with the issues, including artificial intelligence-based scheduling, blockchain, and customer-focused system development to improve efficiency and provide more patient-centered services in healthcare.

Hospital scheduling systems are considered a key feature of healthcare administration to address the complex problem of how best to utilize appointment schedules (Nura Shifa Musa et al., 2024). The Appointment Scheduling Problem (ASP) is a complex issue that has drawn the attention of the healthcare research community. This problem is particularly important in the outpatient setting, where a well-organized scheduling system may be important for patient satisfaction and the overall effectiveness of health care. Recent large-scale studies have illustrated the multidimensional appointment scheduling problem with respect to healthcare services. They state the necessity of novel solutions and propose new scheduling models. This study will review research on hospital scheduling systems, explore current difficulties in scheduling systems, and examine emerging solutions discussed in the literature. The assessment provides chances for innovations and improvements in scheduling process organization as well as problems related to resource allocation, scheduling, and technology adoption. It is claimed that the implementation of advanced technologies into the health care system, which includes blockchain and AI-based algorithms, is extremely important if one is talking about making further steps towards patient-oriented care delivery.

The research has revealed some weaknesses in hospital scheduling systems. Among them are scalability/generalizability, unpredictability, the need for practical application, and neglecting of emergencies. To enhance patient outcomes and the efficiency of healthcare scheduling, we need further research and development, stakeholder participation, user-centered design, and longitudinal studies. In conclusion, hospital scheduling systems are a dynamic subject of study, as they try to address the complex interaction between patient happiness, resource optimization, and technological improvements. The article has a significant association with the study of analyzing scheduling practices in Parañaque private medical offices because they discuss how scheduling systems have a direct impact on administrative productivity and service performance within changing service periods. The issues noted, such as the changing patient demand, the underutilization of resources, and the lack of dynamic scheduling, are most evident in the peak and off-peak phases of private clinics. These changes make the local study consistent with the article's goal of maximizing scheduling to reduce waiting time, boost the efficiency of the personnel, and improve patient happiness.

Moreover, the new solutions presented in the IEEE study, such as data-driven and adaptive scheduling models, provide theoretical and practical background on the way to improve the administrative performance in private medical offices,

especially concerning treating the workload variances between peak and off-peak schedules. Thus, the paper is a strong item of supportive literature that emphasizes the importance of methodical and technology-intensive scheduling techniques to achieve higher productivity levels in healthcare facilities.

The impact of privatization on efficiency and productivity: The case of US private hospitals

The findings of this study offer several important implications for healthcare management, particularly in relation to the role of privatization in improving hospital performance. The major results indicate that privatization can contribute positively to increased efficiency and productivity within public hospitals. It implies that government owned hospitals facing problems like inefficiency in operations, poor productivity, and even financial difficulty should consider privatization as one of the strategic alternatives available to them. Through privatization, hospitals can acquire more effective management systems as well as sound administrative and financial policies that would contribute to their overall productivity.

The study, however, stresses the point that privatization is not a one-size-fits-all solution to any organizational problems that are encountered by public hospitals. There are some important considerations that administrators need to make in order to make an informed decision when they choose privatization as a strategy. According to the findings, there is an obvious increase in productivity once the hospital undergoes privatization to FP organizations since these institutions are very effective in controlling costs and adopting efficient management practices. But privatization to FP organizations does not necessarily result in consistently high levels of efficiency than those of NFP organizations.

Moreover, the current study reveals a significant distinction in approaches of efficiency improvement between FP hospitals and those under NFP privatization. It seems that NFP privatized hospitals emphasize the reduction of work hours per employee and the organization of the labor process. At the same time, the reduction of staffing levels accompanied by the improvement of working capital efficiency appears to be more typical of FP privatized hospitals. Hence, managers' approaches and institutional aims play a role in influencing the impact of the

privatization strategy. Thus, there should be an appropriate alignment between the model of privatization and the characteristics of a particular hospital.

In addition, the current study confirms results of previous research by Tiemann and Schreyögg (2010, 2012) showing that the privatization process is positively related to hospital efficiency. Still, although privatization is able to lead to efficiency gains, especially concerning manpower and labor usage, these advantages are gained at the expense of several other aspects of health care. Particularly, staffing and labor hour reductions negatively affect patient access to health care services as well as the quality of provided health care. Moreover, previous studies showed that privatization can result in decreasing service quality.

Overall, the literature suggests that privatization can be an effective strategy for improving selected aspects of hospital performance, especially efficiency and productivity. Nevertheless, it is not a complete remedy for all challenges faced by public health institutions. Policymakers must balance economic benefits with the broader social responsibility of ensuring accessible, equitable, and high-quality health care services.

Barriers to and Facilitators of Automated Patient Self-scheduling for Health Care Organizations: Scoping Review

The findings have several major implications for health care administration, particularly in relation to the role of privatization in enhancing hospital performance. The main findings suggest that privatization can positively contribute to increased efficiency and productivity in the public hospitals. This indicates that privatization may be a feasible strategic option for government hospitals that suffer from recurring problems, including low operational efficiency, limited productivity, and financial hardship. Hospitals that transfer ownership or management to private firms may receive better systems for resource management, better administrative practices, and stronger financial incentives to optimize performance.

However, the report also emphasizes that public hospitals should not view privatization as a panacea for all organizational challenges. However, before proceeding with such reforms, there are several factors that administrators, policymakers, and stakeholders should consider. The results indicate that privatization to for-profit (FP) organizations tends to yield large gains in productivity, largely attributable to aggressive cost control and performance-driven management strategies

adopted by these institutions. However, privatization to FP entities does not necessarily mean higher levels of efficiency than privatization to not-for-profit (NFP) organizations. This suggests that the benefits of privatization can depend on the type of private ownership structure that is in place.

Moreover, the study finds that there are significant disparities in the way FP and NFP hospitals achieve efficiency gains. Hospitals under NFP ownership generally privatize and focus on decreasing staff work hours and reorganizing labor usage. FP hospitals, on the other hand, are more likely to cut the total number of personnel and increase the efficiency of working capital and financial resources at the same time. These data indicate that privatization initiatives may deliver diverse operational results depending on managerial goals and institutional agendas. Therefore, decision-makers need to tailor privatization models to the specific demands and goals of the institution.

Furthermore, the study confirms previous results obtained by Tiemann and Schreyögg, who also found that privatization can improve hospital efficiency. Efficiency gains, especially in labor and manpower, may come at the cost of other important aspects of health care delivery. In particular, changes in personnel levels or worker hours could adversely influence patient access to services, continuity of treatment, and the quality of health care generally. Some evidence suggests that privatization can worsen service quality in certain circumstances.

Overall, the literature suggests that privatization can be a viable method for enhancing chosen dimensions of hospital performance, especially efficiency and productivity. However, it does not fully address every difficulty presented by public health organizations. Policymakers need to weigh economic benefits against the broader social obligation to provide accessible, equitable, and high-quality health care services.

A Review of Optimization Studies for System Appointment Scheduling

The need to balance the allocation of limited medical resources with the enjoyment of patients in an increasingly demanding outpatient context has substantial social and economic benefits. This situation has resulted in the implementation of the appointment scheduling (AS) system in clinics and hospitals, and research on the optimal operation of the system is important. This article reviews existing research on optimizing appointment scheduling systems. We first classify and generalize the current systems of decision-making and scheduling systems for appointments. Then, the overview of the framework for optimizing system reliability under three viewpoints—constraints, decision variables, and system optimization targets in the appointment scheduling system—is introduced. Then the most prevalent strategies for system optimization in several appointment scheduling systems are examined. Finally, a bibliometric study of the literature is presented. During our literature survey (Gao et al., 2023).

Gao et al. talked about the importance of optimal appointment scheduling (AS) systems in healthcare facilities in an article in which the management of scarce medical resources without any patient dissatisfaction is discussed. The article emphasizes the importance of effective scheduling systems in the outpatient setting to balance service efficiency with patient needs in an ever-demanding environment. The article also explored various decision-making models, limitations, and optimization techniques that enhance the reliability and performance of appointment scheduling systems.

This work is very relevant to the present work, which is "Analyzing Scheduling Practices in Parañaque Private Medical Hospitals: A Study of Administrative Productivity Outcomes in Service Periods of Peak and Off-Peak," as it provides theoretical and analytical background on how scheduling systems affect operations in healthcare. Gao et al. (2023) previously focused their study on optimization models for the system and a global view. But in this research, the optimization ideas are applied in the local environment through the study of the effects of scheduling practices on administrative efficiency within private hospitals in Parañaque.

Furthermore, the present study emphasizes the optimization of scheduling systems, aligning with its focus on improving workflow, particularly during peak service times when resource limitations and patient demand are most critical. The present research is an extension of the earlier research that concentrates on the application of optimization theories in real-world situations in the context of the assessment of the scheduling process during peak and non-peak periods. In this way the study supports the idea that well-designed and optimized scheduling systems are important for efficient resource allocation and better productivity in healthcare organizations.

Expanded Synthesis of Related Literature

The integration of modern literature and the core concepts of management makes it evident that the optimization of healthcare efficiency is a multi-dimensional issue based on the synergy between organized administrative frameworks and human-centric service delivery. The theoretical heart of this relation is Frederick Taylor's scientific management, which claims that the success of institutions is not by coincidence but by the conscious replacement of old, traditional habits by scientifically arranged work processes. In practical application, this idea encourages the use of advanced scheduling systems and digital booking protocols aimed at decreasing "dead time" and streamlining the flow of patients through various stages of care. Studies show that the best way to determine how well these systems work is by "turnaround time." This is the key measure of how long it takes a patient to go from checking in to finishing their visit. Studies, both local and international, indicate that a steady turnaround time, even in the midst of logistical interruptions of global health crises, is a fundamental sign of a resilient administrative structure.

Moreover, the literature suggests that administrative efficiency is a prerequisite for the

performance of high-level staff. By minimizing environmental stressors such as congestion in the clinics and scheduling overlaps, medical office personnel are better able to exercise professionalism, clear communication, and ethical discretion. The thematic focus on confidentiality further buttresses the staff-patient dynamic, with the strict safeguarding of patient data being perceived as not merely a legal imperative but also a strategic tool for establishing the institutional trust needed for accurate diagnosis and patient retention. Ultimately, the literature reveals that genuine productivity in healthcare is attained when scientific management, measurable operational speed, and unshakable dedication to professional ethics meet to provide a smooth and reliable patient journey.

METHODOLOGY

RESEARCH DESIGN

This study used a quantitative descriptive-correlational research design to analyze scheduling practices and their impact on administrative productivity in Parañaque City's private medical hospitals. The descriptive aspect will identify and determine the existing scheduling practices, workplace efficiency, and levels of productivity during peak and off-peak hours, while the correlational aspect determines whether significant relationships exist between (a) scheduling practices and (b) administrative productivity.

This design is fitting as it aims to gather numerical data via online surveys and statistically analyze the relationships among the variables that are involved in the study. The study's objective is not just to describe how operations in private medical facilities are currently run but also to determine whether there are differences in the quality of scheduling that lead to changes in productivity and efficiency.

RESEARCH LOCALE

The research took place in various private medical hospitals situated within Parañaque City, Metro Manila. This location was chosen because the area has a large number of private healthcare institutions that operate and serve a high volume of patients daily. These facilities follow a structured scheduling system and clearly experience shifts in patient demand, with peak hours being marked by heavy patient flow and off-peak hours being characterized by fewer visitors.

This setting is ideal for studying how scheduling practices are applied in real operations and for measuring their direct impact on administrative outcomes and the smoothness of the workflow across different service periods. Additionally, the accessibility of these facilities within the city made data collection easier and more efficient for the respondents.

RESPONDENTS OF THE STUDY

The participants of the study were 135 representative medical and administrative employees working in the private medical hospitals in Parañaque City. This group includes administrative assistants, nurses, and other healthcare support staff who are directly involved in setting schedules, assisting patients, and performing office tasks. They were selected because they are directly involved and experiencing current scheduling systems, experience changes in workloads during peak and off-peak periods, and can provide accurate information about their scheduling practices and the productivity outcomes.

SAMPLING TECHNIQUE

The researcher used a convenient sampling technique, a non-probability sampling method. This technique was chosen because it is accessible and appropriate given the busy schedules that are common in private medical hospitals. Participants who were selected based on their availability, accessibility, and willingness to take part in this study.

To ensure the accuracy and reliability of the given data, respondents with at least six (6) months of work experience were included (ranging from 6 months to 29 years in service), guaranteeing they experience the daily workflow, have sufficient knowledge, and use scheduling system practices.

RESEARCH INSTRUMENTS

The primary instrument used in this study was a researcher-made survey questionnaire using Google Forms. The questionnaire contained questions about the respondent's demographic profile, current scheduling practices that are implemented, the level of administrative productivity during peak and off-peak service periods, and the overall impact of these scheduling practices on the efficiency of the workplace.

The research questions utilize two types of response formats: Yes/No questions and a 5-point Likert scale, which ranges from 5 (Strongly Agree) down to 1 (Strongly Disagree), measure the extent of its implementation. To ensure its effectiveness, the instrument underwent content validation conducted by the research mentor.

DATA GATHERING PROCEDURE

Approval to conduct the study was obtained from the research mentor. Once permission was granted, respondents were informed about the study's objectives and confirmed that their participation was voluntary in nature. The researcher also assured that every respondent's information shared would be kept private before data collection began.

Survey forms were then given to the participants, and the instructions were clearly given to ensure the answers were accurate in every section. After the respondents finished answering, the forms were collected right away, and every form was checked for completeness and correctness.

Finally, all valid responses were gathered and arranged in preparation for statistical analysis and interpretation

DATA ANALYSIS

The following statistical tools were utilized in the study.

1. Frequency and Percentage Distribution. This method was employed to outline the profile of the participants in terms of age, gender, hospital name, and years of experience, providing a clear overview of their characteristics.
2. Weighted Mean. This tool is exclusively applied to the Likert scale section to determine the degree of implementation of scheduling practices and the level of productivity outcomes during peak and off-peak periods, allowing for an understanding of its effectiveness.
3. Mean Scores and Standard Deviation: These statistics were calculated to evaluate scheduling practices and administrative productivity outcomes across peak and off-peak periods, offering insights to determine the consistency of the respondents' perceptions.
4. Chi-Square Test: This test was conducted to explore the relationship between the demographic profile of the respondents and their assessment of scheduling practices and administrative productivity during peak and off-peak service periods.
5. Kruskal-Wallis H Test: The Kruskal–Wallis H Test was employed to identify whether there are significant differences in the respondents' assessments when grouped according to profile variables such as gender, age, and years of experience.

ETHICAL CONSIDERATION

Conducting this study, the researcher adhered to strict ethical guidelines when involving human participation. Participants were told that their participation was voluntary and that they could withdraw at any time without penalty. Prior to data collection, the researcher provided a detailed explanation of the research study. To ensure their protection in privacy, all the information gathered from the respondents was treated confidentially. No personal identifiers such as names or other

sensitive details were disclosed in any part of the research. Furthermore, all the data collected were stored securely and exclusively utilized only for academic purposes.

SUMMARY

This chapter outlines the methodology employed to conduct the study on scheduling practices and administrative productivity in private medical hospitals in Parañaque City. By utilizing a descriptive-correlational design and convenient sampling, the study was able to gather targeted data effectively. The validated research instruments ensured the reliability, validity, and objectivity of the findings.

Additionally, to ensure participants' rights and confidentiality, the study observed ethical considerations. As a result, the knowledge acquired is significant and pertinent to the fields of organizational productivity and hospital administration.

PRESENTATION, ANALYSIS, AND INTERPRETATION OF DATA

The findings of the study are detailed in this chapter. The study is composed of 135 respondents on scheduling methods within Parañaque City private medical hospitals. This includes the following: the profile of respondents, existing scheduling methods being used, and the impact of these methods on work efficiency and productivity during high and low traffic hours, among others. Relationships between different variables will also be analyzed. To understand the data easier, tables and figures are included to visually represent the analyzed data.

PROFILE OF RESPONDENTS

Table 1 Profile of Respondents (N = 135)

Profile Variable	Category	Frequency	Percentage
Age	21 - 22	55	40.74 %
	23 - 27	35	25.93 %
	28 - 35	30	22.22 %
	36 and Above	15	11.11%
Sex	Male	37	27.40 %
	Female	72	53.33 %
	Non-binary	8	5.93 %
	Others	18	13.33%
Hospital Affiliation	Olivarez General Hospital	38	28.15%
	Unihealth Parañaque	30	22.22 %
	Medical Center Parañaque, Inc.	25	18.52 %
	Premier Medical Hospital	17	12.59%
	Rita de Baclaran Hospital	14	10.37%
	Others	11	8.15%
Years of Experience	Less than 1 year	31	22.96 %
	1-3 years	45	33.33%
	4 - 6 years	36	26.67 %
	7years and Above	23	17.03%

The majority of participants fell within the age range of 21 to 36 and above, with a significant number being female. Notably, the highest percentage of respondents came from Olivarez General Hospital, followed by respondents from other private medical hospitals in Parañaque City. In years of experience, a large proportion of respondents have 1 to 6 years. These findings show that the study primarily reflects the perspective of young and moderately experienced hospital

staff, which may affect the perception regarding scheduling practices and administrative outcomes during peak and off-peak periods.

Extent of Scheduling Practices

Extent of Scheduling Practices (N = 135)

Indicators	Mean	SD	Verbal Interpretation
Use of digital scheduling systems	1.93	0.25	Generally Yes.
Scheduling Efficiency	1.93	0.25	Generally Yes
Reduction of Scheduling Errors	1.86	0.34	Generally Yes
Adequacy of Consultation Time	1.91	0.29	Generally Yes
Consistency in Time Allocation	1.84	0.37	Generally Yes
Workflow Management	1.89	0.32	Generally Yes
Walk-in Patient Management	1.91	0.29	Generally Yes
Clarity of Walk-in Policies	1.93	0.26	Generally Yes
Appointment Schedule Stability	1.87	0.34	Generally Yes
Overall Mean	1.89		Generally Yes

Scheduling practices generally have seen significant implementation with an overall mean of 1.89. The use of the digital scheduling systems obtained the highest mean of 1.93, with 126 out of 135 answering 'Yes', indicating that these are the standard procedures observed by almost all staff members. However, consistency in time allocation and the reduction of scheduling errors received slightly lower scores, indicating that more respondents answered 'No', suggesting that there is room for improvement in these aspects.

Level of Administrative Productivity

Level of Administrative Productivity (N = 135)

Indicators	Mean	SD	Verbal Interpretation
Timeliness of Administrative Tasks During Peak Hours	3.95	0.64	Agree
Timeliness of Administrative Tasks During Off-Peak Hours	3.93	0.63	Agree

Patient Waiting Time During Peak Hours	3.79	0.77	Agree
Patient Waiting Time During Off-Peak Hours	3.77	0.73	Agree
Staff Workload Management During Peak Hours	3.73	0.81	Agree
Staff Workload Management During Off-Peak Hours	3.94	0.71	Agree
Patient Handling Capacity During Peak Hours	3.7	0.85	Agree
Patient Service Consistency During Off-Peak Hours	3.82	0.73	Agree
Overall Mean	3.83		Agree

The table shows that the overall weighted mean is 3.83, which is interpreted as "Agree". The highest rating was given to staff workload management during off-peak hours with a mean of 3.94. This finding indicates that the workload of the staff during off-peak periods is effectively managed, allowing employees to perform administrative tasks more efficiently and maintain productivity within the workplace.

Extent of Impact on Workplace Efficiency

Indicators	Mean	SD	Verbal Interpretation
Positive Staff Attitude	4.19	0.74	High Impact
Staff Adaptability to Scheduling Demands	3.96	0.87	Moderate Impact
Fair Patient Treatment	3.97	0.71	Moderate Impact
Ethical Scheduling Practices	3.99	0.68	Moderate Impact
Workplace Stress Due to Poor Scheduling	4.23	0.77	High Impact
Stress Reduction Through Efficient Scheduling	4.25	0.69	High Impact
Overall Mean	4.9		High Impact

The overall mean of 4.9 shows that scheduling practices have a high impact on efficiency. Among the indicators, stress reduction through efficient scheduling, workplace stress due to poor scheduling and positive staff attitude recorded the highest means, indicating a result of strong influence on staff well-being and behaviour. Meanwhile, ethical scheduling practices, fair patient treatment, and staff adaptability got moderate impact ratings, showing that these aspects need further enhancement.

Summary Comparison of Productivity Levels

Summary Comparison of Productivity Levels (N = 135)

Indicators	Mean	SD	Verbal Interpretation
Productivity Difference Between Peak and Off-Peak Hours	4.9	0.69	Strongly Agree
Higher Productivity During	3.77	0.86	Agree

Off-Peak Hours			
Effect of Scheduling Practices on Productivity	4.3	0.63	Strongly Agree
Overall Mean	4.32		Strongly Agree

The overall mean of 4.32 indicates that the respondents strongly agree that scheduling practices affect productivity. With the highest mean score of 4.9, it confirms that productivity is perceived to have a significant difference between peak and off-peak periods. The findings also indicate that the staff productivity is higher during off-peak hours, implying that the quantity of workload directly influences the performance and efficiency in completing administrative tasks.

Relationship Between Implementation and Outcomes

Correlation Between Scheduling Practices and Administrative Productivity

Variables Correlated	r-value	Verbal Interpretation
Scheduling Practices	0.68	Moderate Positive
× Administrative Productivity		Relationship
Scheduling Practices × Workplace Efficiency	0.64	Moderate Positive Relationship
Scheduling Practices × Productivity During Off-Peak Hours	0.59	Moderate Positive Relationship

The result reveals a moderate positive correlation between scheduling practices and administrative productivity outcomes in private medical hospitals in Parañaque City. This means that good scheduling techniques are associated with improved administrative productivity and efficiency in the office. Well-designed scheduling systems help in making workflow management smoother, reduce workplace stress, improve patient handling and increasing productivity of workers, especially during the off-peak service times. The findings support the assumption that structured scheduling systems are essential for improving operational performance in healthcare organizations.

Differences Based On Profile

Kruskal-Wallis Test for differences in Assessment of Scheduling

Profile Variable	H-value	p-value	Decision
Age	4.83	0.18	Not Significant
Sex	3.11	0.09	Not Significant
Hospital Affiliation	10.24	0.03	Significant
Years of Experience	8.57	0.04	Significant

The Kruskal-Wallis Test indicated statistically significant differences in perceptions by respondents' hospital affiliation and years of experience. Hospitals with more organized scheduling systems were more likely to give high ratings to scheduling procedures and productivity, suggesting confidence in their performance. Employees with more experience were more crucial, as they were more exposed to the operations and workload demands of the facility. The results indicate that the office environment and professional experience influence respondents' evaluation of scheduling and administrative productivity.

Summary

The results in Chapter 4 found that the scheduling practices used in the private medical hospitals of Parañaque City were done successfully and significantly increased the levels of productivity and efficiency in work settings during the high and low peak services. This means that the greatest mean scores are achieved by factors such as the use of computerized schedules, efficiency in scheduling, and clear walk-in policies, implying that such practices are commonly practiced in their workplaces. Administrative productivity was rated positively by the respondents. This can be seen from the highest score given to the level of staffing in off-peak periods, meaning that it is possible for staff members to handle their work effectively without the pressures of high number of patients. At the same time, the ratings on the capability to deal with patients during peak periods received slightly lesser scores. It implies that the number of patients can influence the efficiency and productivity of the workflow.

Moreover, the results also showed that the use of scheduling practices influences productivity in terms of workplace efficiency. Effective scheduling contributes to employees feeling less stressed, improves staff attitude, and manages a smoother workflow within the workplace. Although most indicators received lower ratings, such as consistency in time allocation, staff adaptability to scheduling demands may still require further improvement to strengthen overall operational performance, even though the majority of indicators received positive feedback.

The comparison of productivity levels during peak and off-peak periods also confirmed that scheduling practices directly influence administrative productivity. According to the results, the respondents strongly agreed that productivity may differ between service periods. Wherein employees generally become more productive during off-peak hours due to more controlled patient flow and lighter workloads.

Furthermore, the Kruskal–Wallis H Test showed significant differences in the respondents' perceptions based on hospital affiliation and years of experience. Hospitals that had more organized scheduling systems generally to provide higher assessments of scheduling effectiveness and productivity outcomes, indicating greater confidence in operational performance. The employees with more years of experience were also more critical in their assessment since they had greater exposure to the hospital operations and workload pressures. This is an indication that work environment and professional experience influence the respondents' assessment of scheduling practices and administrative productivity.

Overall, the results of the study support that effective scheduling practices play an important role in improving administrative productivity and workplace effectiveness in private medical hospitals. Proper workload management, well-organised scheduling systems, and effective workload management were found to be essential factors in maintaining efficient hospital operations across a range of service periods.

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Summary

The general purpose of this study was to investigate the scheduling practices and their effects on the productivity of the administrative staff of private medical hospitals in Parañaque City. Specifically, it was to determine what type of scheduling systems are used in private medical practices, how this impacts the effectiveness of the medical practices, compare the productivity of medical practices during peak hours and off-peak hours, and make recommendations for improving the scheduling system to increase the effectiveness of medical practices. The study used a quantitative descriptive-correlational research design. The respondents were a total of 135, composed of medical and administrative employees. Data were collected using a researcher-made survey questionnaire disseminated using Google forms.

The implementation level of scheduling techniques in private medical hospitals was determined to be adequate in general. The majority of respondents reported having digital scheduling systems, effective scheduling, a clear walk-in patient policy, and appropriate consultation time. The two highest-rated indicators were digital scheduling systems and clear communication of walk-in policies. These practices are routine in the hospital. Respondents rated consistency in time allocation and minimization of scheduling errors somewhat lower, indicating room for improvement in scheduling.

In terms of administrative productivity, the majority of respondents felt that there was no difference in productivity between peak and off-peak hours of operation. The most common score and the highest average score received were for staff workload management during off-peak hours, indicating that it is easier for the staff to accomplish administrative

activities during off-peak times. However, the capacity to handle patients during peak hours was rated lower. This indicates that increased patient loads can affect the efficiency and productivity of the workflow.

The study also revealed that the practice of scheduling has a major impact on workplace efficiency. The rosters were streamlined, reducing stress, fostering positive attitudes and improving worker management. However, it was discovered that there was a lack of scheduling in the office, which could lead to workplace stress and decrease employee performance. Further, the comparison of peak and off-peak revealed productivity changes depending upon the workload amount. Strongly agreed that personnel are more productive during off-peak hours as the burden is lighter and patient flow is not as onerous. Overall, the results showed the importance of a beneficial scheduling system to improve administrative productivity and the efficient operation of hospitals.

CONCLUSIONS

Generally, it can be concluded that the study of the scheduling practices of the administrative personnel of private medical hospitals in Parañaque City has a significant influence on enhancing the productivity of the administrative personnel in these hospitals. The use of digital scheduling, efficient appointment procedures, and effective schedules helped enhance productivity and workflow. These practices helped workers to manage their responsibilities as well as their day-to-day hospital activities.

The study also shows that during the periods of high and low demand, the productivity of administration is different. Employees working during off-peak hours demonstrated higher productivity due to reduced workload and patient traffic on the premises. High levels of demand on patients also affected staff performance and workflow during busy periods, impacting their efficiency in administrative processes and patient management. This finding implies that the number of workloads is the productivity of staff in a hospital environment.

In addition, the study finds that effective scheduling helps positively promote employee wellness and productivity. Efficient planning decreases the stress and tension within the workplace, boosts employee morale, and helps with workflow management. However, we must address certain issues, such as ensuring a consistent allocation of time, being flexible with staff, and minimizing scheduling mistakes. Hence, constantly improving the scheduling system is essential to ensure efficient operations and enhance the overall productivity of private medical hospitals.

RECOMMENDATIONS

The study's findings and conclusions lead to the following suggestions:

- Private medical hospitals need to continue enhancing their digital scheduling processes to avoid scheduling conflicts, avert errors, and enhance appointment administration.
- Hospital administrators need to establish better systems and procedures to handle workloads during peak hours to minimize employee stress and enhance patient-handling efficiency.
- Medical offices should provide regular training and seminars for staff on proper scheduling, time management, and workflow coordination.
- It is necessary to strengthen walk-in patient handling policies to improve patient movement in hospitals. Hospitals should be more strict with the policies of walk-in management to make the patients' movement smoother, and there would be less delay during the busy time.
- During busy periods, hospitals may implement adjustments to staff or flexible working schedules to help distribute the workload more evenly.
- The schedules need to be assessed on a regular basis at healthcare institutions to gain feedback from employees about any aspects that they feel could be improved.
- This study could be replicated in other hospitals or with other respondents to expand the results on hospital scheduling practices and productivity.
- In the future, other variables that influence the productivity of administration could also be explored, such as employee motivation, working environment, leadership style, and technology development in hospital operations.
- Other research designs (qualitative or mixed method) can be used to gain a deeper understanding of employee experience and perceptions of scheduling practices.

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