COUNTY GOVERNMENT OF ISIOLO DEPARTMENT OF MEDICAL SERVICES AND PUBLIC HEALTH

ISIOLO COUNTY TEACHING AND REFERRAL HOSPITAL

MENTAL HEALTH UNIT SERVICE CHARTER



PREAMBLE

The Mental Health Unit staff at Isiolo County
Teaching and Referral Hospital are committed to
providing comprehensive, affordable, accessible,
quality mental health services in a dignified manner
and of the highest attainable standards in line with
Ministry of Health standards.

VISION

An efficient and high-quality mental health care system that is accessible, equitable and affordable for all people in Isiolo County.

MISSION

To promote and participate in provision of intergrated and high quality promotive, preventive, curative and rehabilitative mental health care services in Isiolo County.

SERVICES OFFERED AT ISIOLO TEACHING AND REFERRAL HOSPITAL

SERVICES RENDERED	CLIENT REQUIREMENTS	USER CHARGES (KSHS)	TIME TAKEN
Outpatient Services			
Customer care desk	Clients	FREE	Upon entry
Mental Health Outpatient registration	Cooperation, patient availability, outpatient card	Consultancy Fee 100/= Can be covered by NHIF	20 Minutes
Triage	Patient/ client	FREE	5 Minutes
Consultation with Mental Health specialist	Patient availability, outpatient card, special clinic card	Evidence of registration payment	20 Minutes
Routine investigations	Cooperation, request form	Need based/Laboratory	30 Minutes
Pharmacy services	Prescription	Evidence of pay or NHIF card	20 Minutes
Inpatient Services			
Admission	Cooperation and consent from client/ relative/ caregiver/ guardian/ police	NHIF cover or Cash payment as follows:	15 Minutes
Beds and meals for patients	Cooperation	200/= for File	15 Minutes
Treatment	A prescription from the doctor/ consent	3,000/= deposit for inpatient covering 2 weeks.	10 Minutes
Major ward round	To be in bed, patient availability	In case of discharge before the lapse of the 2 weeks, the patient should get refund.	Need Based
Reviews/medical assessments	To be in bed, patient availability		Need Based
Psychotherapy	Attendance/ Cooperation	in case of overstay past 2 weeks they pay 250/= per day	1 Hour
Observations/vital signs	Cooperation		5 Minutes
Occupational Therapy	Attendance/ Cooperation	200/= Outpatient and Inpatients	1 Hour
Specialized investigations (toxicology, CT scan, MRI)	Cooperation & Request Form	Need based. Costs may vary	Need Based
Referral services	Cooperation, referral letters	Need based. Costs may vary. Ambulance Fee dependent on Distance	Need Based
Psychological counselling services	Cooperation, availability of the patient accompanied by caregiver	Need based. Currently part of hospital package	1 Hour
Patient follow-up and reintegration by Health Care Worker	Cooperation and contact/ mobile phone for both client and relative	Means of transport	Need Based
Medical-legal reports	Cooperation, request form from the institution/police	Firearms holders 5,000/= Others 1,000/= Court procedures— charges vary	Need Based

WORKING HOURS: - EVERYDAY - 24HRS

FEEDBACK/COMPLAINT MECHANISM

Feedback, suggestions and complaints on services offered are welcome through contact addresses below:

Isiolo County Government
Department of Health Services
Mental Health Unit
P.O. Box 42 – 60300, Isiolo
Facility cellphone: 0707 915 468
Email; ictrh2018@gmail.com







