



CITY ORDINANCE NO. 375

November 11, 2004

**AN ORDINANCE ESTABLISHING A BACOLOD CITY MENTAL HEALTH CARE CENTER UNDER THE CITY HEALTH OFFICE AND PROVIDING FUNDS THEREFOR.**

**WHEREAS**, according to the World Health Organization (WHO), 1% of the population suffers from severe mental and neurological disorder while 4% - 5% of the population suffers mild to moderate mental and neurological disorders;

**WHEREAS**, according to the Department of Health (DOH), in the Philippines, approximately seventeen (17%) percent of adults and fifteen (15%) percent of children consulting the health centers have mental disorders and prevalence of mental health problem is expected to increase further,

**WHEREAS**, in the City of Bacolod, more than five thousand (5,000) patients including chronic and acute cases have come to the Mental Health Division of Bacolod City Health Office for consultation and treatment with one hundred sixty two (162) new cases in 2001 and one hundred seventeen (117) in 2002,

**WHEREAS**, in the absence of a government mental hospital, the Mental Health Division can only treat patients on an out-patient basis leaving vagrant psychotics to roam the City, creating traffic obstruction, stoning business establishments or vehicles, endangering/harming bystanders/pedestrians, and eventually may hamper the City's peace and order situation, economy and social reputation;

**WHEREAS**, even if there is no guarantee of complete recovery, there is a pressing need for a mental hospital located in Bacolod City to admit these patients even just for humanitarian purposes

Be it ordained by the Sangguniang Panlungsod of Bacolod, that:

**ARTICLE I. TITLE**

This ordinance shall be known as "Bacolod City Mental Health Care Center under the City Health Office and providing funds therefor".

**ARTICLE II. OBJECTIVES**

**A. General Objectives**

- A.1 To consult, admit and treat mentally ill patients in Out-Patient Department (OPD) and In-Patient Department (IPD).

- A.2. To facilitate the detoxification and treatment of psychotic substance abusers (e.g. methamphetamine, alcohol, etc.)
- A.3. To de-institutionalize patients and re-integrate them to their family and community.
- A.4. To take care of the chronically ill.

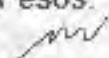
**B. Specific Objectives**

- B.1. To consult, admit and treat mentally ill patients by administering appropriate medication, psychotherapy and other related measures to enhance fast recovery.
- B.2. To treat psychotic substance abusers and rehabilitate them
- B.3. To let patients understand the nature of their illness in order that they will be responsible enough to monitor their own medication and personal needs.
- B.4. To educate the family regarding the illness of their kin so that they will be more supportive and understanding.
- B.5. To possibly teach the patients income-generating projects through occupational therapy to prepare them for discharge from the BCMHCC.

**ARTICLE III. BENEFICIARIES AND OBJECTIVES**

Patients from Bacolod City shall have the first priority as certified by the barangay officials. During residency in the Center these patients shall pay Four Thousand (P4,000.00) Pesos per month to the City Treasurer, while patients from outside Bacolod City shall pay Five Thousand (P5,000.00) Pesos a month. These fees, covered board and lodging for the patient and regular in-house treatment and care excluding cost of medication. Lower rates may be approved by the City Mayor for indigents. Vagrant psychotics will be given special treatment under pertinent government programs.

Corresponding fees will be collected from the Out-Patient Department existing services; Neuro-Psychiatric/Psychological Testing will be charged Two Hundred (P200.00) Pesos; Psychiatric Medical Certificates will be charged One Hundred (P100.00) Pesos.



**ARTICLE IV. POLICY AND PROGRAM**

**Phase I Consultation**

The family, barangay officials or DSSD personnel must accompany the mentally ill patient for consultation. For vagrant psychotics, they be picked-up by BCMHCC personnel accompanied by PNP, DSSD and CHO.

**Phase II Admission, Treatment and Rehabilitation**

**1. Admission Policy**

- 1.1. Consultation and assessment by the Psychiatrist.
- 1.2. Interview/case study of the patient and his/her family by the Social Worker.
- 1.3. Orientation on the BCMHCC rules and regulations by the nurse on-duty.
- 1.4. Open-ward policy on admitted patient shall be watched/accompanied by an authorized person who must sign the consent/contract for admission. (Optional)
- 1.5. Vagrants psychotics may be admitted without watchers and shall be given special treatment under pertinent government programs.

**2. Treatment and Rehabilitation**

Admitted patients will benefit from the following treatment and rehabilitations:

- 2.1. Detoxification treatment of substance abusers.
- 2.2. Regular session with the psychiatrist.
- 2.3. Psychological examination by the psychologist.
- 2.4. Occupational therapy.
- 2.5. Biological therapy and Pharmacotherapy.
- 2.6. Various therapies involving group work, play music and recreation.
- 2.7. Spiritual therapy by invited clergy and spiritual groups.

**Phase III De-Institutionalization, Re-Integration, After Care and Home Conduction.**

Once a patient is assessed to have sufficiently improved or recovered, they will be discharged from BCMHCC and re-integrated with their families and respective communities. The family and the patient will be given discharge instruction.

**Phase IV Follow-up Consultation, After Care Treatment and Monitoring/Evaluation**

Upon discharge, patients will be instructed when to report to OPD for follow-up consultation with the psychiatrist.

Proper documentation of the program through photographs, print, video, news releases and press conferences will be made. Regular meetings must be conducted to evaluate the program's implementation.

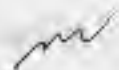
**ARTICLE V. APPROPRIATION**

The sum of at least One Million (P1,000,000.00) shall be appropriated annually out of any available funds and at least another One Million (P1,000,000.00) for the operational maintenance of the building and its facilities to be augmented as the need arises from aids, grants and other sources.

**ARTICLE VI. THE MINIMUM STAFFING WILL INCLUDE THE FOLLOWING**

Psychiatrist/Medical Director	1	(regular employee)
Administrative Officer	1	(regular employee from CHO)
Clinical Psychologist	1	(regular employee)
Registered Social Worker	1	(from DSSD)
Nurse	8	(2 regular employees 6 job orders)
Male Nursing attendant	8	(8 honoraria)
Female Nursing Attendant	6	(6 honoraria)
Security Guards	4	(from POSO)
Cook	1	(honorarium)
Asst. Cook	1	(honorarium)
Driver	1	(job order)
Utility	1	(job order)
Gardener	1	(job order)

The Medical Director may recommend additional staffing if need arises.



**ARTICLE VII. MANAGEMENT**

There shall be a Management Committee composed of the City Mayor or his duly authorized representative, Chairman, Committee on Health & Sanitation of the Sangguniang Panlungsod, City Health Officer, City Social Welfare Officer, and City Psychiatrist/Medical Director

**ARTICLE VIII. EFFECTIVITY**

This ordinance shall take effect fifteen (15) days after approval.

**CARRIED BY THE VOTE OF:**

Affirmative:

Councilors : Greg G. Gasataya, Ana Marie V. Palermo, Lyndon P. Caña, Jocelle Batapa-Sigue, Homer Q. Bais, Dindo C. Ramos, Jude Thaddeus A. Sayson, Napoleon A. Cordova, Elmer T. Sy, Al Victor A. Espino, Catalino T. Alisbo, Reynold I. Iledan, Arturo V. Parreño.

Negative : None.

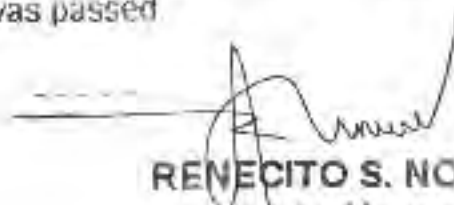
Absent : None.

Official Leave : Councilor Marx Louie S. de la Rosa.

Author : Councilor Reynold I. Iledan.

Passed : November 11, 2004 (20th Regular Session).

Comments: Passed.  
Councilor Elmer T. Sy was out of the session hall when this ordinance was passed



**RENECITO S. NOVERO**

Vice Mayor  
Presiding Officer

ATTESTED:

**ATTY. NILO T. ALEJANDRINO**

Secretary to the Sanggunian

APPROVED November 11, 2004.

**EVELIO R. LEONARDIA**

City Mayor

10 DAYS LAPSED  
AS OF Nov. 21, 2004