



Republic of the Philippines Province of Bohol <b>Municipality of Loon</b>	Doc. Code:
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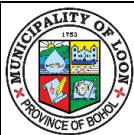


**Vision:** A socioeconomically developed town with empowered people who nurture their heritage and sustainably manage their resources through shared and service-oriented governance  
**Mission:** To create a socioeconomically developed environment through sustainable management of resources and enhancement of people's capabilities for inclusive growth

## MUNICIPAL HEALTH OFFICE RURAL HEALTH UNITS 1 AND 2

### Frontline Service 1: General Medical Consultation

STEP	ACTIVITIES/PROCESS		DURATION	REQUIREMENTS	FEES	PERSON RESPONSIBLE	LOCATION
	CLIENT	MHO/RHU1/RHU2					
1	<ul style="list-style-type: none"> <li>▪ Get priority number</li> <li>▪ Wait for number to be called</li> </ul>	<ul style="list-style-type: none"> <li>▪ Issue priority number</li> </ul>	1 min	Patient's card with Family No.		BHW/Health Aide	RHU reception area
2	<ul style="list-style-type: none"> <li>▪ Respond</li> </ul>	<ul style="list-style-type: none"> <li>▪ Call out priority number</li> <li>▪ Get family folder (ITR, CB, MR, FP)</li> </ul>	5 min			BHW/Health Aide	RHU reception area
3	<ul style="list-style-type: none"> <li>▪ Allow service provider to get vital signs</li> </ul>	<ul style="list-style-type: none"> <li>▪ Get vital signs</li> <li>▪ Fill out Individual Treatment Record (ITR)</li> </ul>	10 min			RHM	RHU reception area
4	<ul style="list-style-type: none"> <li>▪ Proceed to waiting area</li> </ul>	<ul style="list-style-type: none"> <li>▪ Assist client, give initial tx</li> <li>▪ Bring ITR to doctor's room</li> </ul>	5 min			PHN	PHN room
5	<ul style="list-style-type: none"> <li>▪ Enter consultation room when number/ name is called</li> </ul>	<ul style="list-style-type: none"> <li>▪ Physical examine; DX, treatment</li> </ul>	10-15 min			MHO	Consultation/ Treatment room
6	<ul style="list-style-type: none"> <li>▪ Get medicine, if available</li> </ul>	<ul style="list-style-type: none"> <li>▪ Give the medicine with proper instruction</li> </ul>	3-5 min			PHN (Pharmacy Aide if available)	Dispensing Area (Pharmacy)
7	<ul style="list-style-type: none"> <li>▪ Return ITR</li> </ul>	<ul style="list-style-type: none"> <li>▪ Assist client</li> </ul>	1 min			BHW/Health Aide	
8	<ul style="list-style-type: none"> <li>▪ Sign on logbook</li> </ul>	<ul style="list-style-type: none"> <li>▪ Assist client</li> </ul>	1 min			BHW/Health Aide	Exit Area
			44 min				



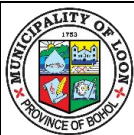
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**Frontline Service 2: Issuance of Medical Certificate**

STEP	ACTIVITIES / PROCESS		DURATION	REQUIREMENTS	FEES	PERSON RESPONSIBLE	LOCATION
	CLIENT	MHO/RHU1/RHU2					
1	▪ Express intent	▪ Interview client	1 min	OR from MTO	P50	RHM/BHW	RHU waiting area
2	▪ Submit to procedure	▪ Take vital signs	5 min	Thermometer, watch Sphygmomanometer		RHM/BHW	Registration area
3	▪ Submit to procedure	▪ Perform history and physical examination	10 min	Stethoscope, otoscope Tongue depressor		MHO	Doctor's Office
4	▪ Submit to procedure	▪ Give available medicine	5 min	Rx form; medicine/ drugs		Pharmacy Aide	Pharmacy
5	▪ Receive medical certificate	▪ Issue medical certificate	2 min	Medical certificate form, Doctor's signature, License # & PTR #		MHO	Doctor's Office
			23 min				

**Frontline Service 3: Issuance of Referral Form**

STEP	ACTIVITIES / PROCESS		DURATION	REQUIREMENTS	FEES	PERSON RESPONSIBLE	LOCATION
	CLIENT	MHO/RHU1/RHU2					
1	▪ Express intent	▪ Interview client	1 min	Patient's family #; MDR		RHM/BHW	RHU waiting area
2	▪ Submit to procedure	▪ Take vital signs ▪ Fill out ITR	5 min	Treatment card, thermometer, watch, sphygmomanometer		RHM/BHW	Registration Area
3	▪ Submit to procedure	▪ Call patient and take history ▪ Perform physical exam, diagnosis, and treatment ▪ Explain reason for referral	15 min	Stethoscope Otoscope Tongue depressor		MHO	Doctor's Office
4	▪ Submit to procedure	▪ Give/Prescribe needed first dose meds/drugs	5 min			Pharmacy aide	Pharmacy
5	▪ Receive meds and referral form	▪ Issue referral form and facilitate transport	10 min	Referral form Doctor's prescription		MHO	Doctor's Office
			36 min				



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**Frontline Service 4: Issuance of Death Certificate**

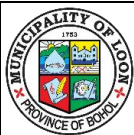
STEP	ACTIVITIES / PROCESS		DURATION	REQUIREMENTS	FEES	PERSON RESPONSIBLE	LOCATION
	CLIENT	MHO/RHU1/RHU2					
1	<ul style="list-style-type: none"> <li>▪ Express intent</li> <li>▪ Answer questions</li> </ul>	<ul style="list-style-type: none"> <li>▪ Interview kin/relative</li> </ul>	10 min	Medical records Lab results of deceased (optional)		MHO	Doctor's Office
2	<ul style="list-style-type: none"> <li>▪ Wait</li> </ul>	<ul style="list-style-type: none"> <li>▪ Fill out death certificate form</li> </ul>	5 min			MHO	Doctor's Office
	<ul style="list-style-type: none"> <li>▪ Accept</li> </ul>	<ul style="list-style-type: none"> <li>▪ Issue death certificate</li> </ul>	1 min				
			16 min				

**Frontline Service 5: Issuance of Sanitary Permit**

STEP	ACTIVITIES / PROCESS		DURATION	REQUIREMENTS	FEES	PERSON RESPONSIBLE	LOCATION
	CLIENT	MHO/RHU1/RHU2					
1	<ul style="list-style-type: none"> <li>▪ Express intent</li> </ul>	<ul style="list-style-type: none"> <li>▪ Interview client</li> </ul>	5 min	OR from MTO	P70 - stool and sputum exam	Sanitary Inspector	MTO/RHU
2	<ul style="list-style-type: none"> <li>▪ Submit to inspection</li> </ul>	<ul style="list-style-type: none"> <li>▪ Inspect business establishment</li> </ul>	30 min - 1 hr	Business establishment		Sanitary Inspector	Business Area
3	<ul style="list-style-type: none"> <li>▪ Accept permit</li> </ul>	<ul style="list-style-type: none"> <li>▪ Issue Sanitary Permit</li> </ul>	1 min	Report from sanitary inspector, sanitary permit		MHO	Doctor's Office
			35 min - 1 hr				

**Frontline Service 6: Medicolegal Services**

STEP	ACTIVITIES / PROCESS		DURATION	REQUIREMENTS	FEES	PERSON RESPONSIBLE	LOCATION
	CLIENT	MHO/RHU1/RHU2					
1	<ul style="list-style-type: none"> <li>▪ Get priority number</li> </ul>	<ul style="list-style-type: none"> <li>▪ Give priority number</li> </ul>	1 min	Patient's Family No. MDR and police request		Health Aide	RHU reception area
2	<ul style="list-style-type: none"> <li>▪ Respond</li> </ul>	<ul style="list-style-type: none"> <li>▪ Call priority number</li> </ul>	1 min			Health Aide	RHU reception area
3	<ul style="list-style-type: none"> <li>▪ Respond/Interact</li> </ul>	<ul style="list-style-type: none"> <li>▪ Get family folder/ ITR</li> <li>▪ Interview patient</li> <li>▪ Get vital signs</li> <li>▪ Fill out ITR</li> </ul>	7 min			Health Aide	RHU reception area
4	<ul style="list-style-type: none"> <li>▪ Wait</li> </ul>	<ul style="list-style-type: none"> <li>▪ Bring ITR to doctor's table</li> </ul>	5 min				RHU reception area



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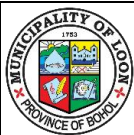
5	<ul style="list-style-type: none"> <li>▪ Go inside MHO's office</li> </ul>	<ul style="list-style-type: none"> <li>▪ Interview patient</li> <li>▪ Perform physical exam</li> <li>▪ Conduct counseling</li> <li>▪ Provide treatment</li> </ul>	10 min	Police request		MHO	MHO's Office
6	<ul style="list-style-type: none"> <li>▪ Wait</li> </ul>	<ul style="list-style-type: none"> <li>▪ Fill out ITR</li> <li>▪ Issue medical certificate</li> </ul>	10 min	OR	P50-200	MHO	MHO's Office
7	<ul style="list-style-type: none"> <li>▪ Wait at pharmacy</li> </ul>	<ul style="list-style-type: none"> <li>▪ Prepare meds</li> </ul>	5 min	MHO's prescription		Pharmacist	Pharmacy
8	<ul style="list-style-type: none"> <li>▪ Receive meds</li> <li>▪ Sign on logbook</li> </ul>	<ul style="list-style-type: none"> <li>▪ Issue meds</li> </ul>	2 min				
			41 min				

**Frontline Service 7: Maternal Health Services, Prenatal / Family Planning Services**

STEP	ACTIVITIES / PROCESS		DURATION	REQUIREMENTS	FEES	PERSON RESPONSIBLE	LOCATION
	CLIENT	MHO/RHU1/RHU2					
1	<ul style="list-style-type: none"> <li>▪ Wait</li> </ul>	<ul style="list-style-type: none"> <li>▪ Get family folder/ITR/FP/</li> <li>▪ Prenatal record</li> </ul>	1 min	Mother and child book/FP service record/MDR		RHM	RHU birthing center
2	<ul style="list-style-type: none"> <li>▪ Interact</li> </ul>	<ul style="list-style-type: none"> <li>▪ Interview patient</li> <li>▪ Get vital signs and fill out record</li> </ul>	3 min			RHM	RHU birthing center
3	<ul style="list-style-type: none"> <li>▪ Lie on examining table</li> <li>▪ Listen to advice</li> </ul>	<ul style="list-style-type: none"> <li>▪ Perform prenatal examination</li> <li>▪ Conduct counseling</li> </ul>	10 min			RHM	RHU birthing center
4	<ul style="list-style-type: none"> <li>▪ Wait</li> </ul>	<ul style="list-style-type: none"> <li>▪ Refer to MHO if the need arises</li> </ul>	10 min			RHM/MHO	RHU
5	<ul style="list-style-type: none"> <li>▪ Wait</li> </ul>	<ul style="list-style-type: none"> <li>▪ Provide vitamins</li> <li>▪ Give other instructions</li> </ul>	3 min			RHM	RHU birthing center
			17-27 min				

**Frontline Service 8: Immunization / Vaccination (EPI)**

STEP	ACTIVITIES / PROCESS		DURATION	REQUIREMENTS	FEES	PERSON RESPONSIBLE	LOCATION
	CLIENT	MHO/RHU1/RHU2					
1	<ul style="list-style-type: none"> <li>▪ Wait for name to be called</li> </ul>	<ul style="list-style-type: none"> <li>▪ Usher the mother into the waiting area</li> </ul>	1 min	ECCD card		BHW	RHU waiting area
2	<ul style="list-style-type: none"> <li>▪ Sit in front of the RHM table</li> </ul>	<ul style="list-style-type: none"> <li>▪ Call in the mother and check ECCD card</li> </ul>	2 min			BHW/RHM	RHU
3	<ul style="list-style-type: none"> <li>▪ Wait</li> </ul>	<ul style="list-style-type: none"> <li>▪ Record child's weight and length</li> </ul>	5 min			RHM	RHU



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4	▪ Listen intently	▪ Inform child's mother what vaccine her child will get	5 min			RHM	RHU
5	▪ Submit to the procedure	▪ Administer the vaccine	5 min			RHM	RHU
6	▪ Wait	▪ Fill out ECCD card ▪ Inform mother when to come back	5 min			RHM	RHU
			23 min				

**Frontline Service 9: Vaccination of Animal Bite Patients at Animal Bite Treatment Center (ABTC)**

**A. INITIAL VISIT**

STEP	ACTIVITIES / PROCESS		DURATION	REQUIREMENTS	FEES	PERSON RESPONSIBLE	LOCATION
	CLIENT	MHO/RHU1/RHU2					
1	▪ Get priority number	▪ Give priority number	1 min	Patient's Card with Family No.		Health Aide	RHU reception area
2	▪ Wait for number to be called	▪ Call priority number	1min			Health Aide	RHU reception area
3	▪ Sit in front of service provider	▪ Interview patient/get history	10 min			ABTC nurse/MHO	ABTC area at RHU
4	▪ Sit in front of service provider	▪ Get vital signs, inspect the bite and fill out ABTC form	10 min			ABTC nurse/MHO	ABTC area at RHU
5	▪ Sit in front of service provider	▪ Explain to patient what category is the bite and the corresponding vaccines needed	15 min			ABTC nurse/MHO	ABTC area at RHU
6	▪ Sit in front of service provider	▪ Preparation of the vaccine	5 min			ABTC nurse/MHO	ABTC area at RHU
7	▪ Sit in front of service provider	▪ Administer due vaccine	3-5 min			ABTC nurse/MHO	ABTC area at RHU
			57 mins				

**Frontline Service 10: Issuance of Pre-marriage Counseling (PMC) Certificate**

STEP	ACTIVITIES / PROCESS		DURATION	REQUIREMENTS	FEES	PERSON RESPONSIBLE	LOCATION
	CLIENT	MHO/RHU1/RHU2					
1	▪ Fill out application form and questionnaire	▪ Collect filled-out forms	5 min	Filled-out PMC forms and questionnaires	P200	PMC counsellor	Lecture room



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2	▪ Attend PMC	▪ Give lecture	2 hr	PMC forms		PMC counsellor	Lecture room
3	▪ Wait	▪ Prepare certificate	5 min			PMC counsellor	RHU
4	▪ Claim PMC certificate	▪ Issue PMC certificate	5 min			PMC counsellor	RHU
			2 hr, 15 min			PMC counsellor	

**Frontline Service 11: Issuance of Exhumation Permit**

STEP	ACTIVITIES / PROCESS		DURATION	REQUIREMENTS	FEES	PERSON RESPONSIBLE	LOCATION
	CLIENT	MHO/RHU1/RHU2					
1	▪ Express intent	▪ Advise client to pay permit fee at MTO	2 min	Death certificate of body to be exhumed		Sanitary Inspector	RHU
2	▪ Pay fee at MTO	▪ Prepare exhumation permit	10 min		P200	Sanitary Inspector	MTO RHU
3	▪ Present OR	▪ Issue permit	2 min	OR		MHO	
			14 min				

**Frontline Service 12: Issuance of Permit to Transfer Human Dead Body/Cadaver**

STEP	ACTIVITIES / PROCESS		DURATION	REQUIREMENTS	FEES	PERSON RESPONSIBLE	LOCATION
	CLIENT	MHO/RHU1/RHU2					
1	▪ Express intent	▪ Advise client to pay at MTO	5 min	Death certificate		Sanitary Inspector	RHU
2	▪ Pay permit fee at MTO	▪ Prepare transfer permit if cause of death is non-communicable disease	5 min		P100	MTO Collector	MTO
3	▪ Present OR	▪ Issue permit	1 min	OR		Sanitary Inspector	RHU
			11 min				