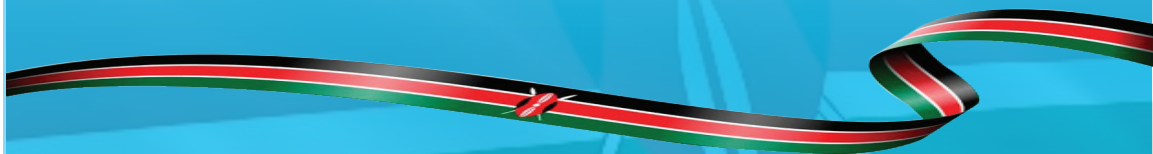


REPUBLIC OF KENYA

**MINISTRY OF PUBLIC SERVICE AND
HUMAN CAPITAL DEVELOPMENT**

Public Service Counselling and Wellness Policy

Revised, 2024





DEFINITION OF TERMS

Authorized Persons: Public officials who may have access to client's information by virtue of their role and responsibility in the Public Service.

Client: A public servant in need of counselling services.

Clinical Counselling Records: Notes on therapeutic content of counselling sessions.

Confidentiality: The assurance that information shared during counselling will not be disclosed without the written consent of the client(s).

Counselling: A skilled helping relationship in which a counsellor assists client(s) to resolve their issues and/or cope with situations.

Counselling Contract: A written consent duly signed by both the counsellor and client(s) indicating that the client(s) has agreed to be counselled.

Counselling Process: The period between contracting and termination of therapy.

Counselling Professional Ethics: Principles, standards and guidelines that regulate the counselling practice.

Counselling Session: The period spent with a client within a counselling setting.

Counsellor: A professional, specialized in the field of counselling psychology, who assists client(s) to resolve their issues and/or cope with situations.

Counsellor Supervisor: An experienced certified counsellor who provides counsellor support to ensure adherence to counselling professional ethics.

Guidance: Provision of advice aimed at resolving a challenge.

Mental health: A state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community (WHO, 2005).

Mental Wellbeing: An active or dynamic process of becoming aware and making choices towards a healthy and fulfilling life in different dimensions.

Mental wellness: The positive sense of wellbeing and hope, despite daily stressors and challenges.

Mental illness/disorder: A clinically significant disturbance in an individual's cognition, emotional regulation, or behaviour, usually associated with distress or impairment in important areas of functioning.

Mental health practitioner: A duly registered and licensed professional as cited in the Mental Health Act, 2022.

Patient: A public servant in need of psychotherapy and other medical treatment.

Psychiatrist: A medical doctor specialised in diagnosing and treating mental disorders.

Psychologist: A professional specialized in diagnosing and treating diseases of the mind, emotional disturbance and behavioural problems.

Public Service Mental Health Champion: A public servant who has undergone the Essential Counselling Skills Training on early identification, guidance and referral of public servants with mental health challenges.

Psycho-education: Structured and specific method of providing knowledge and information for mental wellness.

Psychotherapy: A scientific approach that deals with diverse techniques that aim to help a person identify and change troubling emotions, thoughts and behaviors.

Referral: Recommendation of a client/patient to or by another professional or agency for appropriate care and services.

Special Populations: Public servants with needs that require distinct consideration and attention.

Social worker: A professional who works with patient/client/family and community in need of social help.

Supervisor: A public officer with administrative responsibilities and staff reporting to him or her.

Termination: The process of ending the therapeutic relationship between the counsellor and client.

WHO Quality rights: A global initiative in mental health care which is rights-based and recovery orientated.

Workplace: Occupational settings, stations and places where public servants are engaged for gainful employment in Public Service.

ACRONYMS AND ABBREVIATIONS

ACU	AIDS Control Unit
ADA	Alcohol Drug Abuse
AIDS	Acquired Immune Deficiency Syndrome
CEO	Chief Executive Officer
CPB	Counsellors and Psychologists Board
DCWS	Directorate of Counselling and Wellness Services
HIV	Human Immunodeficiency Virus
ILO	International Labour Organization
MARPs	Most at Risk Populations
MCDAs	Ministries, Counties, Departments and Agencies
MHP	Mental Health Practitioners
MOH	Ministry of Health
MPS & HCD	Ministry of Public Service and Human Capital Development
NACADA	National Authority for the Campaign against Alcohol and Drug Abuse
NCDs	Non-Communicable Diseases
PSCWP	Public Service Counselling and Wellness Policy
PSMHC	Public Service Mental Health Champion
PSPAC	Public Service Psychological Assessment Centre
SUD	Substance Use Disorders
WHO	World Health Organisation


FOREWORD

Mental health challenge is a global concern. The World Health Organization estimated that in 2019, 15% of working age adults had a mental disorder. In Kenya, the economic loss due to lost productivity from premature mortality, absenteeism and presenteeism was KES 56.6 billion (Kenya Mental Health Investment Case, 2021). Therefore, it is evident that mental health challenges negatively affect work productivity and quality of life increasing the demand for counselling and wellness services.

In view of the above, the Government continues to strengthen the existing legal and policy frameworks. This policy is responsive to the emerging mental health challenges with an aim of improving public servants' mental health and well-being for enhanced work productivity.

The policy covers the period 2024/25-2028/29 and it has been developed in accordance with the relevant International Conventions, Constitution of Kenya (2010), Counsellors and Psychologists Act (2014), Kenya Mental Health Amendment Act (2022), Kenya Mental Health Policy (2015-2030) and other relevant Statutes.

This Ministry is committed to steer the implementation of this policy in the Public Service which will go a long way in mitigating the impact of mental health issues on service delivery. I urge all stakeholders involved to ensure effective implementation of the policy.



Hon. Justin B.N. Muturi, EGH
CABINET SECRETARY
MINISTRY OF PUBLIC SERVICE AND HUMAN CAPITAL
DEVELOPMENT

PREFACE

The Public Service is adversely affected by mental health challenges which poses a threat to productivity at the workplace. In order to address this concern, the Government is investing in mental health and well-being of the public servants by streamlining and professionalizing the provision of counselling and wellness services in the public service. In line with global evidence-based practice, it is important that reforms in the Public Service adopt the use of counselling and wellness services in dealing with mental health issues to maximize productivity of public servants for effective and efficient service delivery.

This Ministry is keen in providing Counselling and Wellness Services to the public servants to enhance their work productivity. The review and implementation of this policy, will set standards for mainstreaming workplace Counselling and Wellness Services in the Public Service. The strategic mental health focus areas include the strengthening of Counselling and Wellness Services, open mental health dialogue, research and digitization of Counselling and Wellness Services.

This policy consists of 4 chapters: Chapter 1 represents a background of the burden of poor mental health which impacts negatively to the work productivity, while chapter 2 covers the legal and regulatory framework on which this policy is anchored on. Chapter 3 covers the guiding principles to be adhered to during service provision by counsellors and mental health practitioners. To ensure successful implementation, Chapter 4 covers the operational guidelines and framework among stakeholders for effective management of mental health care of public servants.

The successful implementation of this policy will depend on the unrelenting and concerted effort of all stakeholders. It is expected that all Chief Executive Officers and Accounting Officers will ensure the policy, programmes and activities are implemented to achieve the desired objectives.



Amps N. Gathecha, EBS, 'ndc' (K)

PRINCIPAL SECRETARY

**MINISTRY OF PUBLIC SERVICE AND HUMAN CAPITAL
DEVELOPMENT**

ACKNOWLEDGEMENT

The successful review of the Public Service Counselling and Wellness Policy, would not have been achieved without the concerted efforts and consultation by all stakeholders.

Special appreciation goes to the Cabinet Secretary for Ministry of Public Service and Human Capital Development, Hon. Justin B.M. Muturi, EGH, MP, for his strategic leadership and guidance towards the successful completion of this Policy. Further, gratitude is also extended to Cabinet Secretaries for Health, Education, Labour and Social Protection for their technical support towards the review of this policy.

Recognition is also made to the Principal Secretary, Ministry for Public Service and Human Capital Development for his guidance, support and commitment towards the review and finalisation of this policy.

Finally, the Directorate of Counselling and Wellness Services is indebted to the Counsellors and Psychologists Board, staff of the State Department for Public Service and stakeholders for their dedication and invaluable contributions towards the review of the policy.



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SERVICES

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CHAPTER ONE

INTRODUCTION

1.1 Background

Mental health issues are a global concern, with Kenya experiencing rapidly increasing mental health challenges. The leading mental health conditions in Kenya are anxiety, depression and substance use disorders (Kwobah *et al*, 2017), which is further complicated by social-cultural and economic crises, increase of Non-Communicable Diseases (NCDs), rapid changes in technology, post COVID-19 pandemic, safety and security concerns.

The Counselling baseline survey conducted in 2017 indicated that public servants had a low psychological health index at 39.8%. Further, mental health challenges in the public service as evidenced by client work are mainly manifested through substance use, depression, anxiety, financial challenges and family dysfunctionality. This impacts negatively on their work productivity as confirmed by the Kenya Mental Health Investment Case (2021) which showed the Mental Health conditions cost the country KES 62.2 billion where majority of this cost was attributed to absenteeism (49%) and presenteeism (30%). This evidence clearly shows the impact of a mentally unhealthy workforce on the economy.

In view of this, the Public Service Guidance and Counselling Policy (2017) is reviewed to address the existing mental health gaps, emerging issues and integrate best practices in counselling and wellness services. Therefore, the review and subsequent implementation of this policy will enhance mental health and wellbeing of public servants for quality service delivery.

1.2 Rationale

The rise in mental health challenges and emerging issues, their negative impact on productivity in the Public Service, major legal and structural changes have informed the review of this policy. This will ensure responsiveness to the holistic needs of the public servants by putting in place sustainable mental health interventions for improved quality service delivery.

1.3 Objectives

They are to: -

1. Set standards for mainstreaming workplace counselling and wellness services in the Public Service;
2. Provide guidelines for operationalisation of counselling and wellness services in the Public Service; and
3. Establish a coordinating framework for implementing counselling and wellness programs in the Public Service.

1.4 Scope

This policy is applicable to all Public Service institutions at National and County Governments.

CHAPTER TWO

LEGAL AND POLICY FRAMEWORK

2.1 Overview

This policy takes cognizance of the International Conventions, Constitution of Kenya and relevant Kenyan Statutes. Counselling and wellness practice in the Public Service draws from the following Conventions and Statutes.

2.2 International Labour Organization Conventions

The International Labour Organization (ILO) stipulates that organizations should observe good work ethics and policies that enable employees to work in less stressful environments. As of June 2022, the ILO declared a safe and healthy working environment as a fundamental right, of which Convention C155 on Occupational Safety and Health provides overall guidance.

2.2.1 Code of Practice on HIV and AIDS and the World of Work (2001)

The Code stipulates that employers should encourage workers with HIV and AIDS to use expertise and assistance outside the organization for counselling or in workplace programme, if specialized and confidential counselling is offered. Counselling support should also be made accessible at no cost to workers and adapted to the different needs and circumstances of women and men. This is in liaison with other relevant stakeholders in establishing and providing such support. Counsellors should inform all workers of their rights and benefits in relation to statutory service, security programmes, occupational schemes and any life skills programmes which may help workers cope with the disease.

2.2.2 Vocational Rehabilitation and Employment (Disabled Persons)Convention (1983)

This Convention requires that vocational guidance be offered to the challenged persons to help them retain and advance in employment. It provides for support and recognition of people vulnerable to discrimination. Effort will be made to support these groups which include: People Living with HIV (PLHIV), Most at Risk Populations (MARPS), People Living with Disabilities (PLWD) and other special needs.

2.2.3 Workers with Family Responsibilities Recommendation (1981)R. 165

The Convention requires that those in employment should have available free of charge vocational guidance, counselling, information and placement services. The personnel offering these services should be competent to respond to the special needs of workers with family responsibilities.

2.3 Laws of Kenya

2.3.1 Constitution of Kenya

The Constitution of the Republic of Kenya is the Supreme Law and lays the foundation for all other national laws. It addresses matters relating to equality (Articles 43 and 27), freedom from discrimination (Article 27) and universal access to services (Article 43) as stipulated below: -

1. Article 43. (1a) provides that every Kenyan has the right to the highest attainable standard of health;
2. Chapter 4 on the Bill of Rights, Article 27 provides for equality before the Law, right to equal protection and equal benefit. The state shall not discriminate directly or indirectly against any person on any grounds; and

3. Article 31 (c) speaks on confidentiality and to privacy, stating the right not to have information relating to their family or private affairs unnecessarily required or revealed.

2.3.2 Mental Health (Amendment) Act (2022)

The Act provides for the prevention of mental illnesses, care, treatment and rehabilitation of persons with mental illness, procedure of admission, treatment and general management of persons with mental illness.

2.3.3 The Data Protection Act (2019)

This Act provides for the regulation of the processing of personal data, rights of data subjects and obligations of data controllers and processors. Section 26 provides for the rights of a data subject including to: -

1. Be informed of the use to which their personal data is to be put;
2. Access their personal data;
3. Object to the processing of all parts of their personal data; and
4. Correction of false or misleading data and deletion of false misleading data.

2.3.4 Counsellors and Psychologists Act (2014)

The Act contains the regulatory framework and requirements for the practice of counsellors and psychologists in Kenya. Counsellors and Psychologists shall be registered and licensed by the Counsellors and Psychologists Board which shall also supervise their professional conduct and practice.

2.3.5 The Public Officer Ethics Act (2012)

All public officers shall maintain integrity and impartiality in their work at the Public Service. A public officer should avoid being in a position where personal interest conflict with official duties. Counsellors and mental health practitioners in the Public Service shall conduct themselves with professionalism and carry out their duties in accordance with the existing Laws.

2.3.6 Cancer Prevention and Control Act (2012)

This Act makes provision for the prevention, treatment and control of cancer and related purposes. Part of the objective of the Act is to ensure the protection of the rights of every person with cancer including outlawing discrimination in all its forms.

2.3.7 National Authority for the Campaign Against Drug Abuse Act (2012)

The Act mandates National Authority for the Campaign Against Drug Abuse(NACADA) to focus on demand reduction, which involves providing preventive education, public awareness, life skills, treatment, rehabilitation and psycho-social support to the general public.

2.3.8 Alcoholic Drinks Control Act (2010)

The Act addresses the harm reduction strategies related to alcohol and the role it plays in exacerbating mental health challenges.

2.3.9 The Employment Act (2007)

The Act defines the fundamental rights of employees and the basic conditions of employment. It addresses issues on

discrimination and sexual harassment. Under this Act, no employer shall discriminate directly or indirectly against an employee on grounds of race, colour, sex, language, religion, political or other opinion, nationality, ethnic or social origin, disability, pregnancy, HIV and mental status.

2.3.10 Occupational Safety and Health Act (2007)

The Act provides for the safety, health and welfare of all workers, including public servants and all persons lawfully present at workplaces and for matters connected therewith. The duty of care, has been vested upon the employers to adopt both promotive and preventive measures for a safe and healthy work environment by ensuring all health risks and their associated hazards are closely monitored and managed. Employees have a duty to comply with the policies and procedures that ensure safety and health at the workplace.

2.3.11 The HIV and AIDS Prevention and Control Act (2006)

The Act makes specific reference to HIV and AIDS education and information, safe practices and procedures, testing, screening and access to health care services, confidentiality and discriminatory acts and policies which are related to the provision of counselling.

2.3.12 The Sexual Offences Act (2006)

This Act provides for the prevention and protection of all persons from harm, unlawful sexual acts and/or connected purposes. Under this provision, counsellors and other mental health practitioners shall provide professional help to public servants who are victims of sexual offences in liaison with other relevant institutions.

2.3.13 Persons with Disability Act (2003)

This Act makes provisions for non-discrimination and non-stigmatization in respect to access to services and opportunities.

2.4 Regulations, Policies and Guidelines

2.4.1 National Guidelines on WorkPlace Mental Wellness(2023)

These guidelines provide recommendation for interventions to safe guard the mental wellbeing of employees, managers/ supervisors with the aim of promoting mental wellness at work, preventing work related mental health conditions and supporting workers to access quality care. Therefore, the Public Service will adhere to these laws to enable public officers enjoy their full rights as enshrined in the Constitution.

2.4.2 Public Service Commission Regulations (2020)

The regulations prohibit discrimination in appointment, promotion and transfer of public servants. The regulations assert that if a public officer is incapable by reason of any infirmity of mind or body of discharging the functions of his public office, he/she may present himself/herself before a Medical Board with a view to it being ascertained whether or not he/she is incapable as aforesaid. Further, any public servant who is ill should seek and obtain permission as per existing regulations for absence from the workplace on account of ill health.

2.4.3 Medical Examination Rules (L.N.24 2005)

This provides for occupational medical examination of all workers exposed to hazards at work, including psychosocial hazards. These examinations are done at pre-employment, annually, and at the exit of employment. The medical reports

include a certificate of redeployment or certificate of fitness and employees examined maybe referred for counselling services as need be.

2.4.4 Public Service Substance Abuse Workplace Policy (2017)

The policy seeks to guide the prevention, treatment and management of public servants who abuse or are chemically dependent to substances.

2.4.5 Public Sector Workplace Policy on HIV and AIDS (2017)

This policy provides a framework and set standards for addressing HIV and AIDS in the public sector.

2.4.6 Kenya Mental Health Policy (2015-2030)

The policy seeks to align mental health services with the Constitution of Kenya, National and Global health agendas. The policy addresses the systemic challenges, respond to emerging trends, mitigate the burden of mental disorders, integrate mental health services within all levels of the health care system, promote, respect and observe the rights of persons with mental disorders. The policy also recognizes the importance of employing a multi-sectoral approach in addressing mental health issues in the country.

CHAPTER THREE: GUIDING PRINCIPLES

3.1 Introduction

The primary responsibility of counsellors and mental health practitioners is promotion of mental wellness, prevention of mental health challenges, support and care for those affected by mental health challenges.

3.2 Guiding Principles for Counsellors and Mental Health Practitioners

a) Informed Consent

1. Counsellors and mental health practitioners will explain to clients the nature and process of the counselling services provided;
2. Clients have the freedom to choose whether to use the counselling and wellness services offered in the public service or not;and
3. Where a referred client chooses not to use the services provided, this information will be communicated in writing to the referral source.

b) Rights based Approach

The rights of workers including mental wellness should be respected as enshrined in various relevant national and international laws, policies, and conventions as emphasised by WHO quality rights initiative.

c) Working Relationship

The quality of interaction with clients, colleagues and other professionals can influence the quality of counselling services. Counsellors and mental health practitioners will build therapeutic relationships with their clients or/and patients for their effective and efficient management.

With Client(s) and/or patients

In maintaining a good therapeutic relationship, counsellors and mental health practitioners will: -

1. Participate and contribute to decisions that enhance the well-being of client(s) and/or patients; and
2. Reject sexual or romantic relationship with their client(s) or the family members of the client(s) as guided by professional Codes of Ethics.

With Colleagues and other Professionals

Counsellors and other mental health practitioners will: -

1. Respect services that differ from their own;
2. Respect practices of other professionals with whom they work with;
3. Consult with other professionals when faced with counselling ethical dilemmas; and
4. Resolve ethical dilemmas in a professional manner.

Special Population

Counsellors and mental health practitioners shall provide services to special population in the public service without discrimination. The following shall be observed: -

1. Provision of specialized services to the special population. This requires that practitioners be aware of the skills required

- and put mechanisms in place to overcome the barriers to care;and
2. Responsive to emerging contextual counselling and wellness issues.

d) Confidentiality

Trust is the cornerstone of a therapeutic relationship. To uphold clients' trust, counsellors shall: -

1. Respect clients' right to privacy and seek information from clients only when it is beneficial to the counselling process;
2. Seek clients' consent to share their confidential information with legal or ethical justification;
3. Only disclose clients' information to third party if such disclosure is going to benefit the client and the employer with the clients' consent; and
4. Ensure privacy when a third party is involved in special needs counselling.

e) Healthcare Records

Counsellors and mental health practitioners shall maintain records necessary for rendering professional services to their clients as required by the Law and regulations governing the counselling profession. They will: -

1. Ensure sufficient and timely documentation of their clients' records for delivery and continuity of needed services;
2. Maintain accurate records that reflect clients' progress and services provided;
3. Ensure that clinical records are kept securely and that access to the records shall be limited strictly to authorized persons;

4. Seek consent from client for use of their information for counsellor supervision, consultation and referral;
5. Provide in writing reasonable access to records and copies of records when requested by clients;
6. Provide individual clients with only those parts of records that are related directly to them when there is compelling evidence that such access would cause no harm;
7. Obtain written permission from clients to disclose or write reports to third parties if exceptional cases of confidentiality exist (steps should be taken to ensure that receivers of the health records are sensitive to their confidential nature);
8. Ensure reasonable future access and maintain the records in accordance with the statutes governing storage of records, upon termination of services; and
9. Protect the confidentiality of deceased client's clinical records and any disclosure should be consistent with the legal requirements.

f) Professional Responsibility and Obligation(s)

Counsellors and mental health practitioners have the responsibility and obligation to both the client(s)/patient(s) and employer. They shall:-

1. Inform clients and employer of the limits of confidentiality;
2. Give their professional impression when sought to determine a disciplinary case of a client under their care;
3. Adhere to laws and regulations governing the Public Service, counselling professional bodies or from certifying bodies of which they are members;
4. Practice within the boundaries of their competence;
5. Ensure personal wellness and selfcare for effective service delivery;

6. Ensure continuous professional development in accordance with the latest research findings for best practice;
7. Refer all clients' suitably in case of incapacitation, transfer, or termination of service/practice;
8. Hand-over relevant case summaries for continuity of client management in case of incapacitation, transfer, or termination of service/practice;
9. Provide relevant information to clients to facilitate their commitment to the counselling and wellness services; and
10. Observe relevant ethical codes of conduct while discharging their duties.

g) Evaluation, Assessment and Interpretation of Clients' Results

Counsellors and mental health practitioners will administer assessment instruments within the limit of their competence taking into account the clients' personal, educational and socio-cultural context. They shall: -

1. Promote the mental well-being of individual clients or groups by using appropriate assessment instruments;
2. Use assessment results and interpretations, for appropriate mental health interventions;
3. Respect client's rights to know the results, interpretations and the recommendations; and
4. Collaborate with other relevant service providers when dealing with clients with special needs.

h) Termination and Referral

Counsellors and mental health practitioners shall terminate or refer clients/patients when it becomes apparent that the client

no longer needs their services or is not benefiting from continued care. They will: -

1. Make appropriate arrangements for termination and referrals in case of interruptions resulting from long vacations, transfers, illness among others;
2. Avoid entering or continuing working/therapeutic relationships in instances of dual-relationships and professional limitations;
3. Be multi-culturally competent for effective counselling and wellness services;
4. Terminate the relationship and document reasons for such termination and/or referral; and
5. Ensure relevant clinical and administrative referral procedures are followed.

3.3 Guiding Principles for Wellness Service Providers and Stakeholders

All wellness service providers and stakeholders will be guided by their respective professional codes of ethics.

3.4 Evidence-based Practices

All programs and interventions applied should be based on scientific evidence and best practices, taking into consideration our cultural context and should be routinely evaluated and assessed for effectiveness.

CHAPTER FOUR:
**OPERATIONAL GUIDELINES AND
IMPLEMENTATION FRAMEWORK**

4.1 Introduction

The Ministry of Public Service and Human Capital Development will coordinate, monitor, evaluate and report on counselling and wellness services in the Public Service. It will develop policies, strategies, guidelines on management of effective counselling and wellness services to ensure mental health and well-being of the public servants upon entry, stay and exit from the Public Service.

The leadership in all MCDAs will provide supportive leadership on mental health, safety and wellbeing of employees, hence creating a healthy working environment that promotes mental health. Further, they will provide adequate resources to ensure accessibility of mental wellness services that include provision of specialized counselling and psycho education and wellness program that address different types of wellness.

4.2 Operational Guidelines

Provision of counselling and wellness services in the Public Service will be guided by the following: -

1. To mainstream and domesticate the counselling and wellness policy in Ministries, Counties, Departments and Agencies (MCDAs);
2. To establish Counselling and Wellness Unit at the workplace;
3. To provide Counselling and wellness services by counsellors, psychologists and mental health practitioners who are duly registered and licensed by the relevant regulatory body;

4. To provide Counselling and wellness services to public servants and their nuclear family members; and
5. To provide free counselling and wellness services to public servants. However, regulations on medical treatment will prevail for referrals outside the Public Service.

4.3 Implementation Framework

The following shall play a pivotal role in the implementation of this policy;

Ministry of Public Service and Human Capital Development, Ministry of Health, Cabinet Secretaries, Governors, Accounting/ Authorized officers/Chief Executive Officers, Line Managers/ Supervisors, Counsellors, Mental Health Practitioners, Public Service Mental Health Champions (PSMHCs), Public Servants and Partners/Stakeholders.

4.4 Roles and Responsibilities

4.4.1 Ministry of Public Service and Human Capital Development

The MPS & HCD, will: -

1. Provide leadership and policy direction on mental health in the public service;
2. Formulate, implement and review the policy on counselling and wellness services in the Public Service;
3. Monitor, evaluate and disseminate findings on the status of mental health in the Public Service;
4. Establish the Public Service Psychological Assessment Centre (PSPAC);
5. Promote partnerships and linkages with mental health practitioners and other stakeholders to enhance counselling and wellness services;

6. Provide and co-ordinate counsellor supervision for counsellors and PSMHCs in the Public Service;
7. Provide technical support in the implementation of this policy in the Public Service;
8. Promote research and innovations in the provision of counselling and wellness services;
9. Develop strategies and guidelines on counselling and wellness services; and
10. Organizing and participating in national and international counselling conferences for professional growth and development.

4.4.2 Ministry of Health

The Counsellors and Psychologist Act (2014) is anchored in the Ministry and therefore, the Counsellors and Psychologist Board will be responsible for registration and licensure of counsellors and psychologists in the Public Service.

Further, the Ministry will;

1. Provide support for referred public servants in need of health -related services; and
2. Promote professionalism among mental health practitioners.

4.4.3 Cabinet Secretaries

Cabinet Secretaries shall ensure that counselling and wellness targets are in their performance contract in their respective Ministries and State Departments.

Governors

Governors shall ensure that counselling and wellness performance targets are in the performance contracts of their respective counties.

4.4.4 Accounting/Authorized Officers/Chief Executive Officers

Their role will include to: -

1. Mainstream and domesticate this policy in their respective State Departments/ Counties/ Agencies;
2. Mobilize resources to facilitate provision of counselling and wellness services; and
3. Oversee preparation and submission of quarterly reports to MPS&HCD

4.4.5 Line Managers/Supervisors

They will: -

1. Create awareness on counselling and wellness services;
2. Identify and promptly refer public servants in need of counselling and wellness services;
3. Provide a supportive work environment to public servants
4. Support counselling and wellness programmes in their respective workplace; and
5. Facilitate administrative procedures for public servants to access counselling and wellness services.

4.4.6 Counsellors and Mental Health Practitioners

They will: -

1. Provide counselling and wellness services to public servants and their nuclear family members;
2. Plan and budget for counselling and wellness programmes;
3. Prepare and submit counselling and wellness quarterly reports;
4. Liaise with other healthcare practitioners and organizations to enhance service provision;
5. Refer public servants for specialized services; and
6. Conduct research that will:
 - a) Design, conduct and disseminate research findings in line with existing legal and ethical provisions, scientific standards and procedures governing research;
 - b) Protect confidentiality of the client and the clinical records used for research; and
 - c) Minimize bias and respect diversity in the research process.

4.4.7 Public Service Mental Health Champions

They will: -

1. Conduct early detection of public servants in need of counselling and wellness services;
2. Provide guidance to needy public servants and where necessary refer them to counsellors or mental health practitioners; and
3. Prepare quarterly mental health reports and submit to SDPS

4.4.8 Public Servants

They will: -

1. Actively participate in the implementation of this policy;and
2. Take appropriate measures to promote their mental health, prevent mental illnesses and seek professional help when in need.

4.4.9 Stakeholders

They will be involved in technical assistance and resource mobilization.

4.5 Monitoring and Evaluation

The monitoring and evaluation of the Policy shall establish whether the intended purpose of the Policy is achieved and what corrective actions and reviews may be needed.

The monitoring and evaluation of the policy is intended to provide information on how the operationalization of the Policy is meeting its set objectives, challenges facing its implementation, corrective actions that may be needed to ensure effective and efficient counselling and wellness service delivery in the Public Service.

MCDAs will generate information necessary to assess the implementation status of the impact of Counselling and Wellness Services Policy within their areas of jurisdiction. MCDAs will submit quarterly reports in the prescribed format to the MPS&HCD. The Ministry will then prepare evaluation reports periodically and disseminate annual progress reports on the mental wellness status in the Public Service.

4.6 Policy Development and Review

The Policy shall be reviewed after every five years of implementation or as need arises. The review shall be initiated and coordinated by the Directorate of Counselling and Wellness Services in the Public Service after a successful evaluation of the Policy. Findings of the evaluation shall be used to improve, inform and review the Policy to ensure it remains relevant in addressing mental health and wellbeing of the public servants.



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