



THE MEDICAL PRACTITIONERS AND DENTISTS COUNCIL (CAP 253)



REQUIREMENTS FOR OPENING HEALTH INSTITUTIONS

SECTION A: GENERAL REQUIREMENTS

1st August 2017

- i. Obtain forms IX or download from www.kmpdc.co.ke; fill and submit to the Council.
- ii. Attach the following documents: -
 - (a) Company or Business Registration Certificate
 - (b) Certified copies of Professional Certificates of all Health Professionals working therein including licenses from their respective Regulatory Authorities.
 - (c) Building Architectural Plans for hospitals and nursing homes.
- iii. Hospitals, Maternity & Nursing Homes must have a holding room for dead bodies or mortuary
- iv. All in-patient facilities must have a clearly defined method of waste disposal and management systems in place including incinerators, placenta pits etc.
- v. The facility should be inspected by the County Director of Health or County Health Management Team or Joint Board and Council Inspection Team.
- vi. It may be a requirement from other Health Regulatory Authorities to obtain their licenses for other facilities: e.g. Laboratory, Pharmacy, Radiology and X-ray Services etc.
- vii. The Proprietor/Administrator/Director must ensure that: -
 - (a) All payments are paid in full as per the category. (*See Section B below*).
 - (b) Licenses are up to date.
 - (c) Health Professionals working therein are registered and licensed by their respective Boards/Councils.
- viii. **Payment Methods**
 - a) **Bank**
Kenya Medical Practitioners and Dentists Council
Account No: 1103158643
Branch: KCB Milimani
 - b) **MPESA**
Paybill No: 992836; Account No - "RegNo" - Indicate the Transaction Code and the date paid on the form.
 - c) **SWIFT CODE: KCBLKENX**
BANK: Kenya Commercial Bank (KCB)
BANK CODE: 01175
 - d) **Payments via PDQ are also allowed at the Finance Office**

SECTION B: HEALTH INSTITUTIONS CATEGORIES

Details of various Health Institutions Categories found on the link below:

https://kmpdc.go.ke/resources/The_Medical_Practitioners_and_Dentists_Private_Medical_Institutions_Amendment_Rules_2017.pdf

SECTION C: REGISTRATION AND LICENSE FEES FOR HEALTH INSTITUTIONS

NO	Health Facility Type	Registration Fees (KSh.)	Annual License Fees (Ksh.)
1.	Medical Clinic	10,000	15,000
2.	Dental Clinic	10,000	15,000
3.	Dispensary	5,000	5,000
4.	Faith Based Dispensary	5,000	5,000
5.	Mobile Clinic	10,000	15,000
6.	Eye Clinic	10,000	15,000
7.	Faith Based Basic Health Centre	5,000	15,000
8.	Basic Health Centre	10,000	15,000
9.	Faith Based Comprehensive Health Centre	5,000	15,000
10.	Comprehensive Centre	15,000	20,000
11.	Medical/Dental Centre	15,000	20,000
12.	Funeral Home Stand Alone	15,000	20,000
13.	Nursing Home/Cottage Hospital	15,000	30,000
14.	Maternity Home	15,000	25,000
15.	Faith Based Level 4 Hospital	10,000	30,000
16.	Hospital Level 4/ Internship Training Centre/County Hospital /Eye Hospital	30,000	80,000
17.	Faith Based Level 5 Hospital	10,000	50,000
18.	Hospital Level 5/County Referral Hospitals/Secondary Care Hospital	30,000	90,000
19.	Faith Based Specialized Tertiary Referral Hospital	10,000	80,000
20.	Specialized Tertiary Referral Hospital	30,000	90,000
21.	Faith Based National Referral and Teaching Hospitals and specialized hospitals	30,000	100,000
22.	National Referral and Teaching Hospitals and specialized hospitals Level 6	40,000	300,000

Dr. David G. Kariuki
CHIEF EXECUTIVE OFFICER/REGISTRAR
KENYA PRACTITIONERS AND DENTISTS COUNCIL