

Medical Practitioners and Dentists Board

**STRATEGIC PLAN
2013-2018**

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Foreword

The Medical Practitioners and Dentists Board (MP&DB) is established under Cap 253, Laws of Kenya with the express mandate of regulating the training and practice of Medicine and Dentistry as well as health care standards in the institutions registered under the Act. In exercise of this mandate, the Board is pleased to report some of the major achievements realised during the implementation of the immediate former, 2008-2013 Strategic Plan. To be modest, there have been many achievements, but the most significant have been the following:

1. The reviewing, publication and dissemination of the doctor's professional conduct and discipline (6th edition – January, 2012);
2. The development, gazettelement and implementation of Continuing Professional Development (CPD) rules, standards and guidelines;
3. The reviewing of and gazettelement of medical and dental specialities;
4. The review and gazettelement of doctor's fees guidelines (3rd edition, 2012);
5. The championing of the process of developing the National Patient Rights Charter (April, 2013);
6. The championing of the development and implementation of regional guidelines for inspection and accreditation of medical and dental schools (September, 2009);
7. The reviewing of Core Curricula for both the MBChB and BDS (2nd edition, June, 2013);
8. The development and implementation of joint inspection checklist for inpatient and outpatient health facilities;
9. The development and implementation of medical and dental internship guidelines (January, 2013);
10. The development and implementation of registration and licensing protocols for medical and dental practitioners as well as health institutions;
11. The development and implementation of an ICT Business Model Platform to address among other things, online CPD submission, Retention register, PIC register, and health facilities register;
12. The approval of six new Medical Schools and one (1) new Dental School; namely:
 - (a) The Kenyatta University Medical School;
 - (b) Egerton Medical School;
 - (c) Kenya Methodist University Medical School;
 - (d) Maseno University Medical School;
 - (e) Uzima University, Medical School;
 - (f) Mount Kenya University; and,
 - (g) Moi University Dental School.
13. The approval of Post Graduate training programmes in Medicine at Aga Khan University, Nairobi;
14. The inspection, approval and gazettelement of some 41 new Medical and Dental internship training centres;
15. The generation of funds to finalize the purchase of current Board premises on LR No. 209/371/1, Nairobi;
16. The realization of internal savings totalling to the amount of Kshs.86 million towards the development of a modern office infrastructure;

17. The increased collaboration with strategic partners locally, regionally and internationally, notably, the following:
- (a) Local (University of Nairobi, Kenya Medical Association, Kenya Dental Association, Kenya Medical Practitioners Pharmacists and Dentists Union, and other health regulatory authorities);
 - (b) Regional (Boards and Councils within the EAC partner states, Association of Medical Council of Africa (AMCOA));
 - (c) International Association of Medical Regulatory Authorities (IAMRA);
 - (d) Development partners and donor agencies (CDC Emory, IFC World Bank Group, IPAS Africa Alliance, Funzo Kenya, Capacity Project, PACE University of Maryland, and Synergy Informatics, among others.

It is against such a promising background, that this new Strategic Plan for the years 2013-2018 has been prepared, with specific focus targeting three (3) key strategic themes:

1. *The Legal Framework*: the objective is to appropriately align the Board's activities with relevant statutory laws and policies that supports the Board's legal operational mandate;
2. *Regulatory Enforcement*: the objective here is to ensure quality ethical health care through the regulation of training, registration, licensing, inspections and professional practice, and lastly;
3. *Service Delivery Excellence*: the objective here being, to provide efficient, effective and accessible world class (regulatory) service to our customers.

The implementation of the new Strategic Plan will continue to be a roadmap for the Board in achieving its obligation as articulated in our Vision and Mision.

As Chair of the Board, I wish to conclude by simply challenging both staff and Board Members, to go the extra mile in ensuring the successful implementation of this particular Strategic Plan. Needless to stress, the Chairman undertakes to provide the requisite leadership and dynamism needed in driving the very realization of our very noble Strategic Plan, and look forward to the targeted outcomes over next five years.



PROF. GEORGE MAGOHA, EBS.MBS
CHAIRMAN
MEDICAL PRACTITIONERS AND DENTISTS BOARD

Preface

The MP&DB is pleased to publish its second Strategic Plan covering the period 2013-2018.

The first Board Strategic Plan covered the period 2008-2013 and was developed as well as implemented to about 80 percent, which was both a yardstick and a learning experience. In the process of implementing that Strategic Plan, the Board experienced some challenges, key among them being the inadequate human and financial resources. This was however eventually overcome through the generous support of our key strategic partners as well as from internally generated funds.

This *Strategic Plan 2013-2018* has been developed with the input from key strategic partners and stakeholders in line with the Ministry of Health's own Strategic Plan; the *Kenya Vision 2030* national policy blueprint; the MP&DB Act, Chapter 253 of the Laws of Kenya, as well as in full compliance with the national Constitution of Kenya (2010).

In welcoming this enhanced vision that will be most crucial for Kenya's Health Sector over the foreseeable future, I call upon all the key actors to maximize their skills, knowledge and expertise in order to ensure its successful implementation and delivery for the collective benefit of all our citizens.



DR. FRANCIS M. KIMANI
DIRECTOR OF MEDICAL SERVICES / REGISTRAR
MEDICAL PRACTITIONERS AND DENTISTS BOARD

Acknowledgements

The MP&DB wishes to acknowledge the parties who have been involved in the review of this Strategic Plan 2013-2018 document.

Appreciation goes first, to Prof. George Magoha, Chairman MP&DB; Dr. Elly Nyaim Opot, Chair, Finance & Administration Committee (FAC) and committee members: Dr. Josephine Omondi, Dr. Stephen Ochiel and Prof. Zipporah Ngumi, all for providing the leadership and technical support in the development of this Strategic Plan. We also thank all the Board Members for their ideas and contributions during the process of developing the Strategic Plan.

We further wish to thank the following key stakeholders, among many others, for their valuable contribution and inputs and insights: Dr. David Kiima (SDDMS - Ministry of Health), Dr. Henry Wanga (Hon. National Secretary, KMA), Dr. Jane Wamai (Hon. Chair, KDA), Alice N. Mwongera (Moses Morris Foundation, Consumer Org.), Prof. Kiama Wangai (Law Society of Kenya); Margaret Wamuyu (National Gender and Equality Commission); the Deans of Medical and Dental Schools as well as all the other Health Regulatory Bodies in the country.

In addition, we appreciate the following Strategic Partners, for their financial and technical support: United States Agency for International Development (USAID), through Capacity Kenya project, CDC Emory and the IPAS Africa Alliance Kenya.

The Board also owes a lot of gratitude to Jean Mathenge, the Consultant of Protocol Solutions Limited, for providing professional consultancy services in the development of the Plan.

Finally, the following secretarial team: Leah Adero, Phillip Ole Kamwaro, Rose Wafukho, Christine Muriu and the entire staff of the Board, for providing logistical and operational support that was so crucial for the completion of this important exercise.



DANIEL M. YUMBYA
CHIEF EXECUTIVE OFFICER
MEDICAL PRACTITIONERS AND DENTISTS BOARD

Acronyms

AG	Attorney General
AMCOA	Association of Medical Council of Africa
BCS	Board Communication Strategy
BDS	Bachelor of Dental Surgery
CACs	Clinical Audit Committees
CDC Emory	Centers for Disease Control and Prevention - Emory University
CMTS-EA/OOP-ACU	Community Management & Training Services-East Africa-Office of the President-Aids Control Unit
CPD	Continuous Professional Development
EAC	East African Community
F&A	Finance and Administration
FAC	Finance and Administration Committee
FIDA -Kenya	Federation of Women Lawyers-Kenya
FMS	Financial Management Systems
HERAF	Health Rights Advocacy Forum
HR	Human Resource
IAMRA	International Association of Medical Regulatory Authorities
IPAS	African Alliance for Women's Reproductive Health and Rights
KDA	Kenya Dental Association
KMA	Kenya Medical Association
KMLLTB	Kenya Medical Laboratory Technicians & Technologists Board
M&E	Monitoring and Evaluation
MBChB	Bachelor of Medicine and Bachelor of Surgery
MOST	Management and Organizational Sustainability Tool
MP&DB	Medical Practitioners and Dentists Board
NPC	National Patients' Charter
PCC	Professional Conduct Committee
PIC	Preliminary Inquiry Committee
PPC	Private Practice Committee
SDDMS/DMH	Senior Deputy Director of Medical Services / Director of Mental Health
SP	Strategic Plan
SWOT	Strengths, Weaknesses, Opportunities and Threats
TORs	Terms of Reference
UoN	University of Nairobi
USAID	United States Agency for International Development

1 Executive Summary

1.0 Purpose

This Strategic Plan has been prepared for the Medical Practitioners and Dentists Board (MP&DB). It is intended to serve as the Second Strategic Plan, covering the period 2013-2018. It will be disseminated to stakeholders and also implemented by the Secretariat under the direction of the CEO of the MP&DB.

1.1 Overview

The Strategic Plan provides the basic road map that MP&DB intends to follow in order to achieve its corporate philosophy as endowed in its Mission, Vision and Mandate Statements. The first five year Strategic Plan (SP) ended in June 2013. However, preparations for the subsequent second SP commenced in July 2012. The process of formulating the second Plan involved intensive workshops attended by the Finance and Administration committee at the Simba Lodge from May 4 to May 6 2013. It was followed by extensive stakeholder consultations through questionnaires and meetings followed by a workshop at the Sarova Panafric Hotel on June 25 2013 where the Strategic Plan was also adopted. The adopted Plan was thereafter approved by the Board in June 2013.

All workshops were actively attended and supported by the Chairman of the MP&DB, CEO, Board Secretariat members, partners and diverse members of the medical and dental profession.

1.2 The Strategic Plan Summary

The strategic planning process commenced with a review of the achievements of the First Strategic Plan that covered the period 2008 - 2013. Whereas there were challenges and constraints that inhibited the full realization of the plan, the 2008-2013 Strategic Plan achieved notable successes for the MP&DB as described in Section 2 of this document.

The process also entailed a detailed organizational assessment using the MOST tool which accordingly revealed that the organizational strengths existed in the areas of (i) strategy alignment to the corporate philosophy; (ii) internal communication; (iii) defined roles and responsibilities; (iv) annual operational planning; (v) information management; and (vi) revenue generation management.

On the other hand, the areas that needed improvement include (i) infusing general knowledge about, and application of the corporate philosophy internally and externally; (ii) internal decision making and formalization of the internal lines of authority and accountability; (iii) need for HR policies and procedures for hiring, development and retention of staff; (iv) and need for quality service delivery to its internal and external stakeholders.

The SWOT analysis identified legal (litigation, legal frameworks) as a common theme in all quadrants; while resources (people, systems, financial) was a common theme in the quadrants of strengths, weaknesses and threats; “financial mobilization” and “regulatory obligations” were viewed as under threat and needing to be strengthened including standardizing training curricular, strengthening and enforcing inspections and optimizing the Board's role in devolution of the counties.

Using the MOST and SWOT analysis, and the Mission and Vision statements of the organization, three primary strategic themes or pillars of the strategic plan were identified: (1) Legal (framework); (2) Service delivery excellence; and (3) Regulatory enforcement. The three themes strongly align the organization to the corporate philosophy of the Board as articulated in the Vision and Mission statements; each theme was validated against the core values. Focus areas were identified reflecting the practical areas under which objectives would be implemented to strengthen the performance of the Board, and ultimately achieve the overall vision and mission and mandate of the Board.

The Second Strategic Plan 2013 – 2018 is intended to achieve visible and impactful results:

The Plan when implemented will propel the Board to world class levels providing efficient, effective and accessible regulatory service to its customers, and it will upgrade the quality of health care through strengthened regulation of training, registration, licensing, inspections and the professional practice in general.

1.3 Structure of the Document

This strategic plan is structured in the following order:

1. Section 1 has this Executive Summary; Section 2 - 4, the evaluation of the 2008 - 2013 Strategic Plan achievements and challenges; the MP&DB organizational assessment and the SWOT analysis; Section 5 - 6, the adopted strategic direction for 2013 - 2018 and detailed summary of the outputs of each strategic theme; Section 7, the Strategic implementation plan with costs and sources of funding while Section 8 outlines the proposed monitoring and evaluation mechanisms.

2 | Review of the 2008-2013, Strategic Plan



■ Prof. George Magoha Board Chair (Centre), Daniel Yumbya Board CEO and Technical Work group 1 (TWG1) during formulation of the Strategic Plan 2013-2018 at Simba Lodge, Naivasha.

2.0 Introduction

The previous five year strategic plan for the MP&DB ended on 30 June 2013 with the following as the areas of focus:

1. The Legal framework;
2. Communication and Strategic Partnerships;
3. Board Resources (HR, physical infrastructure, transport, finances);
4. Professional indemnity;
5. Education in Health Care (registration, licensing, CPD).

2.1 Achievements

Whereas the achievements of the 2008-2013 Strategic Plan is summarized here below, it is recognized that the full realization of these objectives, will be achieved in the 2013-2018 Strategic Plan.

Table 1: Achievements of the 2008-2013, Strategic Plan

Strategic Area	Objective	Achievement Status
Legal Framework	1. To seek mandate for the Board to oversee provision of quality healthcare in the country	1. 80%
	2. To restructure the composition of the Board	2. Drafted
Communication and Strategic Partnerships	1. Strategic partnerships	1. 100%
	2. Communication strategy	2. Drafted
Board's Resources	1. HR policy	1. Drafted
	2. Physical infrastructure	2. In progress
	3. Transport policy	3. 100%
	4. Financial mobilization	4. In progress
	5. Financial management system	5. In progress
	6. Investment policy	6. In progress
Education in Healthcare	1. To develop a blueprint for quality education for health professionals	1. 100%
	2. Develop framework for CPD implementation	2. 100%
Professional indemnity	To implement PI for medical and dental practitioners in active practice	Drafted

2.2 Challenges

The challenges to achieving full implementation of the 2008-2013 Strategic plan are summarized here below. These challenges will be pro-actively mitigated in the 2013-2018 Strategic Plan.

2.2.0 Communication of the Strategic plan

Several stakeholders interviewed through a questionnaire were unaware of the existence of the Strategic Plan and had no contribution to its actualization. This limited the stakeholder involvement needed for successful implementation of the objectives.

To mitigate this challenge, the new strategic plan has accommodated comprehensive advocacy, awareness and communication objectives to ensure stakeholder involvement. The implementation plan has incorporated several key technical and stakeholder workshops to ensure wide involvement in the execution of the plan and to maintain a high level of awareness about the Board's activities and strategic vision.

2.2.1 Strategic Plan Ownership and Buy-in

Clear ownership/champions of the plan objectives were not evident in the 2008-2013 Strategic Plan and as a consequence, some objectives did not achieve full realization.

In the new 2013-2018 Plan, the Chairman has committed to lead from the front to fully implement all objectives of the plan; the CEO will lead the operationalization of the strategic plan whose activities have been clearly laid out and the actors identified.

2.2.3 Financial and other Constraints

The Board was constrained by space, finances and resources which somehow inhibited the full realization of the 2008-2013 Strategic Plan.

The implementation plan for the 2013-2018 Strategic Plan clearly outlines the financial and human resources needed to execute the strategic objectives and capacity building options; for instance, outsourcing has been considered and accommodated. The Board will shoulder 95 percent of the cost of implementing the Strategic Plan and supplement funding through donor support. The proposed new office development which is a key output in the 2013-2018 period will be fast tracked to provide sufficient operational work space and thus allow retention of sufficient human resources to carry out Board activities with adequate capacity.

2.2.4 Monitoring and Evaluation (M&E)

The 2008-2013 Strategic Plan omitted regular checkpoints to monitor the implementation of the plan objectives. As a consequence, there was little opportunity to assess the progress status of each objective and where necessary, to inject corrective actions to ensure the plan was on track.

In the new 2013-2018 Strategic Plan, an M&E budget has been incorporated which will ensure that multiple evaluation checks are performed to assess progress of objectives and the Strategic Plan in general. Early and continuous M&E check points will allow adjustment and corrective actions to be made in a timely fashion.

3 | MP&DB Organizational Assessment

3.0 Introduction

The organizational assessment was conducted using the MOST tool, by four separate work groups each addressing a specific area of the organization.

The organizational assessment reveals that the primary Strengths in the organization existed in the areas of (i) strategy alignment to the corporate philosophy; (ii) Internal communication; (iii) clearly defined roles and responsibilities; (iv) annual operational planning; (v) information management and (vi) revenue generation management.

On the other hand, the areas reflecting weakness were primarily internal to the organization, recognizing especially the need for development and retention of staff, and need for quality service delivery to its internal and external stakeholders. There is also opportunity for improvement in the Board's enforcement capabilities; for instance, enforcement of training, registration, licensing and inspections rules and guidelines and enforcing professional practices.

The new 2013-2018 Strategic Plan has incorporated the areas identified as needing improvement under the respective strategic themes of Service Delivery Excellence, Regulatory Enforcement, and Legal Framework. The findings of the assessment are summarized below and appended in the Annexes to this report.

3.1 Organizational Strengths

Out of a score of 1 to 4 with 4 being the highest; the following areas were scored as 4:

1. Strategy alignment to the corporate philosophy
2. Internal communication
3. Defined staff roles and responsibilities
4. Annual operational planning
5. Information management
6. Revenue generation management

3.2 Organizational Weaknesses and Opportunities

The following areas were identified as areas experiencing weaknesses, hence requiring improvement. Each of these areas of weaknesses have been prioritized for action in the new 2013-2018 Strategic Plan to ensure they are strengthened and improved.

1. Infusing general knowledge about, and application of, the corporate philosophy internally and externally;
2. Strengthening internal decision making and formalizing the internal lines of authority and accountability;
3. Need for human resource policies and procedures for hiring, development and retention of staff;
4. Need for quality service delivery to internal and external stakeholders;
5. Stronger and more effective monitoring and evaluation of the Board's progress;
6. Need for automated financial and supply management and empowerment of the financial staff.

4 | Environmental Analysis

4.0 Introduction

The comprehensive institutional analysis of the MP&DB was undertaken on the basis of Strengths, Weaknesses, Opportunities as well as the Threats (SWOT), by four separate groups. These findings were analyzed in order to highlight the areas that needed to be handled most at the strategic level.

4.1 SWOT Findings

Table 2: SWOT Findings

STRENGTHS	OPPORTUNITIES
<ol style="list-style-type: none"> 1. Established statutory framework (legal) 2. Competent and committed Board membership (HR / Staff) 3. Functional organizational structure (HR) 4. Committed and hard working secretariat (HR / Staff) 5. Financial independence (finances) 6. Established business processes (Internal processes) 7. Supportive Government agencies (legal) 8. Improved ICT platform (infrastructure) 9. The Board has a legally owned piece of land with an existing office (infrastructure) 10. Well structured plans for development of modern office infrastructure (infrastructure) 	<ol style="list-style-type: none"> 1. There are many upcoming medical and dental schools which has increased resources and capacity (facilities / resources) 2. Increased awareness of the existence and functions of the Board by the public and other stakeholders (communication / advocacy) 3. Increased collaboration with other regulatory bodies in inspections, joint meetings and information exchange (partnerships) 4. There is an existence of an inspection checklist for private-based and faith-based institutions which can be used to standardize quality health care in both private and public institutions (quality healthcare / service delivery) 5. Improvement of customer satisfaction, for instance, through questionnaires, open days, suggestion box (customer service delivery) 6. Structured dissemination of information arising from disciplinary cases and complaints handled by the Board for awareness (communication) 7. Adoption of ICT (infrastructure) 8. Regular media engagements to educate the public and other stakeholders on the role of the Board (communication / advocacy) 9. Membership and partnership of the Board with regional and international organizations with similar mandates to share best practices (partnerships) 10. Adaptation to the Constitution and the devolved Government system in order to enhance regulatory services (Legal)
WEAKNESSES	THREATS
<ol style="list-style-type: none"> 1. Inadequate staffing capacity (HR/staff) 2. Overworked staff and overcrowded working environment (HR/staff) 3. Registration and licensing processes are prone to delay (processes) 4. Inadequate capacity to enforce and inspect (HR/staff) 5. Inadequate advocacy and legal capacities (advocacy/HR) 6. Lack of structured induction process for new Board members (internal processes) 7. Cumbersome and expensive disciplinary processes (regulation) 8. Reward system does not match effort (HR/Staff) 	<ol style="list-style-type: none"> 1. Illegal practice by quacks (regulation) 2. Alternative medicine practitioners who are not regulated by the Board (regulation) 3. Multiple regulatory authorities with conflicting roles (regulation) 4. Inadequate budgetary support from the Government (finance) 5. Increased litigation in the profession (litigation/legal) 6. Absence of mandatory professional indemnity legislation – those in Government (regulation) 7. Lack of clear legal guidance on inspection of Government health facilities (regulation) 8. Negative press publicity (advocacy) 9. Devolution (legal framework)

4.2 SWOT Prioritization

An analysis of the SWOT quadrants identified the areas of priority which will be addressed in the 2013 - 2018 Plan. A new area – Governance – was also identified which would focus on strengthening the Board’s effectiveness and leadership capabilities. The SWOT findings are summarized in Table 3, here below.

Table 3: SWOT Findings: Priority Areas

Priority	Area	Strategic Objectives
1	HR	Improving human resource utilization and increasing staff capacity
2	Regulation	Strengthening regulation of the profession and enforcement particularly in inspections and training as well as compliance
3	1. Legal framework 2. Communication	1. Working within the legal framework and managing litigation matters 2. Enhancing Board advocacy and improving internal and external communications
4	Infrastructure	Optimum utilization of Infrastructure (land, office systems)
5	Processes	Streamlining of internal processes and procedures
6	1. Finance 2. Partnerships 3. Service Delivery	1. Increased financial mobilization and management 2. Establishing stronger strategic collaborative partnerships 3. Focus on customer service delivery excellence

5 | The Strategic Direction for 2013–2018

5.0 Introduction

The MP&DB process of preparing the Strategic Plan involved widespread stakeholder consultations as well as systematic definition especially, of the following:

1. Review of corporate Vision and Mission statements,
2. Identification of strategic themes and goals,
3. Identification of strategic focus areas, objectives and measurable outcomes, and
4. Validation against the balanced scorecard performance parameters.

5.1 Review of Vision and Mission Statements

Strategic themes are the main, high level business strategies that form the basis for the organization's business model and are decomposed from the organization's vision and mission statements. Strategic theme also referred to as "pillars of excellence" apply to every part of the organization and represent areas in which MP&DB must excel in order to achieve its vision.

5.1.0 The Mission

In line with the foregoing, the Mission of MP&DB is:

To ensure the provision of quality and ethical healthcare through appropriate regulation of training, registration, licensing, inspections and professional practice.

5.1.1 The Vision

On the other hand, the vision is:

To be an efficient, effective and accessible world-class health regulatory body.

5.2 MP&DB's Mandate

The MP&DB is a Statutory authority established under Cap 253, Laws of Kenya, to regulate the practice of medicine and dentistry in the country.

The Board aims at offering Kenyans the most effective and efficient medical services by ensuring that medical practitioners and dentists are highly qualified and that they continuously develop their profession.

5.3 Strategic Themes, Goals and Focus Areas

Through a systematic review and reconstruction of the Board's mandate, vision and mission statements, three strategic themes and related goals were identified for MP&DB. The strategic goals were defined as the long-term direction that the organization wishes to pursue, as well as statements of its priorities in the medium to long term, as summarized in Table 4 and Table 5.

5.4 Overview of Strategic Themes and Focus Areas (2013–2018)

Table 4: Strategic Themes and Focus Areas

Strategic Themes	Theme 1: Service Delivery Excellence	Theme 2: Regulatory Enforcement	Theme 3: Legal Framework
<i>Strategic Alignment</i>	Aligned to the corporate philosophy aspirations for effectiveness, efficiency, professionalism, and world class regulatory authority	Aligned to the regulatory functions mandated to the Board	Aligned to the statutory permissions granted to the Medical Board under Cap 253
<i>Strategic Goal</i>	To provide efficient, effective and accessible world-class (regulatory) service to their customers	To ensure quality ethical health care through regulation of training, registration, licensing, inspections and professional practice	To appropriately align with relevant statutory laws and policies that supports the Board's legal operational mandate
<i>Focus Areas (2013-2018)</i>	<ol style="list-style-type: none"> 1. Finance 2. Physical Infrastructure 3. HR 4. Governance 5. Communications 6. Advocacy 7. Collaborative Partnerships 	<ol style="list-style-type: none"> 1. Professional indemnity 2. Inspections 3. Operational Processes 4. Compliance 5. Training 	<ol style="list-style-type: none"> 1. Cap 253 2. Litigation

Table 5: Strategic Themes, Focus Areas and Objectives

Strategic Theme	Focus areas	Objectives
Theme 1: Service Delivery Excellence Goal: To provide efficient, effective and accessible world-class (regulatory) service to their customers	Finance	<ol style="list-style-type: none"> 1. Enhance revenue generation 2. Optimize financial opportunities to develop the Board's infrastructure 3. Improve financial management
	Physical Infrastructure	Leverage the physical infrastructure to deliver efficient and effective services to our clients
	HR	Improve human resource utilization and staff capacity
	Governance	Strengthen the Board's management and leadership capabilities
	Communications	Enhance Board's internal and external communications
	Advocacy	Optimize effective engagement with the Board's stakeholders
	Collaborative partnerships	Strengthen collaborative and strategic partnerships
Theme 2: Regulatory Enforcement Goal: To ensure quality ethical health care through regulation of training, registration, licensing, inspections and professional practice	Professional indemnity	Strengthen professional accountability and responsibility
	Inspections	Strengthen inspections
	Operational processes	Streamline guiding processes and procedures
	Compliance	Improve institutional compliance
	Training	<ol style="list-style-type: none"> 1. Streamline students admissions criteria 2. Streamline curricular for medical and dental training 3. Streamline internship training 4. Strengthen CPD programs 5. Improve tracking of medical and dental practitioners
Theme 3: Legal Framework Goal: To appropriately align with relevant statutory laws and policies that supports the Board's legal operational mandate	Cap 253	Alignment to Cap 253 provisions and revisions
	Litigation	<ol style="list-style-type: none"> 1. Improve medical care 2. Increase awareness about patients rights 3. Improve practitioner retention

6 | Strategic Plan Outputs, 2013 – 2018

6.0 Service Delivery Excellence

The goal of this theme is to provide efficient, effective and accessible world-class regulatory service to MP&DB customers.

This theme focuses on seven focus areas that are geared to strengthen the Board's service capability in the areas of Finance, Physical infrastructure, HR, Governance, Communications, Advocacy, and Collaboration and Partnerships. A Summary of the focus areas, objectives, activities, key indicators as well as target dates are summarized in Table 6 here below. The strategic focus on Finance recognizes that the Board's financial capacity is limited, and must be strengthened to attain sustainable levels that can support its operational and physical infrastructure development goals.

The service delivery theme has rolled over two focus areas from the previous plan, that is, HR and Communication which were highlighted as areas of improvement in the Organizational and SWOT analysis. The Board will focus on improving staff utilization and capacity building and strengthening its communication capabilities internally and externally. In addition, the Board has recognized that in order to achieve service excellence to their customers, they must reach out to the public through purposeful advocacy which is a new focus area introduced in 2013-2018 Strategic Plan. The area of Governance will dwell on building the Board's leadership and management capabilities, while collaborative Partnerships will ensure that the Board is continuously researching and benchmarking its service standards against other organizations to attain world-class regulatory service to its customers.

Table 6: Summary of Service Delivery Focus Areas and Expected Outputs

Focus Area	Objective	Goal/Activities	Output & Key Indicators	Target Delivery
A. Finance	Enhance revenue Generation	Enhance investment opportunities in line with Government guidelines	Investment Policy	30-Mar-14
		Increased fund mobilizations from donors	Report on increased donor mobilizations 15% annual increase from the current baseline	30-Jun-14
		Reduced costs by 20% of total expenditure annually	Total expenditure reduced by 20% by June 2014	30-Jun-14
		Improved debt collection by 80% PA	Reduced outstanding debt by 80% PA	30-Jun-14
		Increased savings from generated revenue by 20% PA	20% increased annual savings from generated revenue	30-Jun-14
		Implement Innovative payment methods to achieve reduced transaction costs by 20% & increased revenue collections by 20% PA	Transaction costs reduced by 20% & revenue collections increased by 20% PA	30-Jun-14
	Optimize financial mobilizations for development of physical infrastructure	To raise KShs 50 million by end of FY 2014 for development of the office building	KShs 50 million targets achieved	FY. 2013 / 2014

Focus Area	Objective	Goal/Activities	Output & Key Indicators	Target Delivery
	Improve financial management	To raise KShs 60 million by end of financial year 2015 for development of the office building	KShs 60 million targets achieved	FY.2014/2015
		To raise KShs 60 million by end of financial 2016 for development of the office building	KShs 60 million targets achieved	FY.2015/2016
		Implement an FMS with requisite infrastructure	Implementation of FMS by June 30 2016	FY.2015/2016
B. Physical Infrastructure	Leverage the current infrastructure to deliver efficient and effective services to MP&DB clients	To complete the Phase I design and procurement process by Nov 2013	Phase I: Design and commissioning	30-Nov-13
		To complete the Phase II: Construction process by June 2015	Phase II: Construction	30-Jun-15
		To complete office fit out by September 2015	Phase III: Office equipping	30-Sep-15
		To occupy the new office by October 2015	Phase 4: Occupation	Oct 2015
C. Human Resources	Improve Human Resource utilization & staff capacity	To determine the organisations HR needs by March 2014	HR needs assessment report and recommendations by March 2014	30-Mar-14
		To Establish an HR policy by August 2014	HR policy by August 2014	30-Aug-14
D. Governance	Strengthen the Board's management and leadership capabilities	To establish the current governance levels and document the knowledge base required by each Board member to perform their duties effectively by March 2014	Criteria, procedures and process for Board member induction and capacity building	March 2014
		To implement a project implementation and M&E framework by March 2014	Project implementation and M&E framework	March 2014
		To establish policy, criteria for Board Member induction and to build the capacity of the Board to handle its mandate by June 2014	Policy framework for knowledge building, training	June 2014
		To establish operational procedures and processes for Board committees and full Board tribunal meetings by Jan 2015	Operational procedures and processes for Board committees and full Board tribunal meetings	Jan 2015
		To review and update the code of professional conduct and discipline	Updated code of conduct and discipline	Jan 2015
E. Communication	Strengthen the Board's internal & external communications	Establish an effective Board's Communication Strategy	Board's Communication Strategy	30-Jun-14
		Implement appropriate channels to strengthen the Board's internal and external communications	1. Communication plan 2. Adoption of various channels including modern technology, for example interactive website	30-Mar-14

Focus Area	Objective	Goal/Activities	Output & Key Indicators	Target Delivery
		Enhance the public awareness about the Board's mandate	<ol style="list-style-type: none"> Quarterly reports on activities for Board awareness and measures to assess growing awareness Open days, regular press briefs, questionnaires, service charter 	28-Feb-14
F. Advocacy	Strengthen engagement between the Board & stakeholders	Establish a framework for effective engagement with Board's stakeholders	Framework for effective stakeholder engagement	1-Mar-15
		Determine the need for an advocacy role for the Board and establish ToR for such role	Recommendation and ToR for advocacy role	30-Jun-14
G. Collaboration and Partnerships	Strengthen collaboration and strategic partnerships	Review benchmarking standards, best practices in research and resource and capacity building; review partnership organizations in at least two countries	Updated list of active collaborative partners with lessons learned/ recommendations for adoption	30-Mar-15

6.1 Legal Framework

The goal of this strategic theme is **to appropriately align the Board's activities with relevant statutory laws and policies in order to support the Board's legal operational mandate.**

The legal framework theme focuses on two areas mainly: (i) Alignment to Cap 253 provisions, and (ii) Litigation, as summarized in Table 7, here below.

The Board recognizes that to reduce medical litigation cases and related (avoidable) costs, there must be an improvement in medical care; the new plan through improved medical care, targets to reduce the number of cases of alleged malpractice by 50 percent.

Table 7: A summary of the Legal Framework Focus Areas and Expected Outputs

Focus Area	Objective	Goal/Activities	Output & key Indicator(s)	Target Delivery
A. Cap 253	Align to CAP 253 provisions and implement revisions	Complete the ongoing revisions of the Cap 253 for approval and publication	<ol style="list-style-type: none"> 3rd draft bill with stakeholders' comments 4th draft bill with technical work group comments Approved final bill by Board and submission to Attorney General Parliamentary Health Committee Review 	30-Nov-14 30-Jan-15 30-Mar-15 30-Jun-15
		Biannual reviews of rules and regulations to keep up with the changing environment	Bi-Annual report of changed rules & regulations to begin from gazettment of final bill	To commence from gazettment of the current revisions
	Improve medical care	<ol style="list-style-type: none"> Establish policy guidelines to improve medical care Develop minimum standard policy guidelines for clinical audit committees (CACs) 	<ol style="list-style-type: none"> Policy guidelines for Clinical Audit Committees Reduced number of cases of alleged malpractice by 50% 	30-Jun-15

Focus Area	Objective	Goal/Activities	Output & key Indicator(s)	Target Delivery
B. Litigation		1. Implement the National Patients Charter (NPC) 2. Create awareness on NPC by September 2013	Awareness created about NPC by September 2013	30-Sep-13
		Launch NPC to consumer groups and professional bodies September 2013	NPC launched and disseminated to at least 80% of the consumer groups and professional associations	30-Jun-14
		Interpret NPC into the Kiswahili national language and Braille by June 2016	NPC interpreted to Kiswahili and Braille by June 2016	30-Jun-16
		Distribute NPC to at least 80% of the consumer groups and professional associations (combine)	NPC disseminated to at least 80% of the consumer groups and professional associations by June 2014	30-Jun-14
	Improve practitioner retention	Encourage medical and dental practitioners compliance (retention)	Published list of medical, Dental practitioners and health facilities in good standing Increased number of retained doctors & health facilities by 80%	30-Jun-14

6.2 Regulatory Enforcement

The goal of this strategic theme and focus area, is **to ensure quality ethical health care through regulation of training, registration, licensing, inspections and professional practice.**

This theme focuses on five areas (as summarized in Table 8 here below) and aims to strengthen the Board's regulatory function through enforcement of appropriate indemnity cover, effective inspections, streamlining operational processes and training guidelines and strengthening adherence to compliance. The Board will ultimately achieve quality health care by focusing on these key areas.

Table 8: Summary of the Regulatory Enforcement Focus Areas and Expected Outputs

Focus Area	Objective	Goal/Activities	Output and key Indicators	Target Delivery
Professional indemnity	Strengthen professional accountability and responsibility	Implement 100% medical and dental professional indemnity cover for all practicing doctors (amended Cap 253 including Government doctors) Enforce PI cover to be submitted at license renewal	100% implemented PI cover for all practicing doctors	30-Jun-15
Inspection	Strengthen inspections	Strengthen inspection of all medical practitioners' and dental premises and training institutions	Quarterly report to reflect increased inspection coverage from a baseline of 40% with an annual increase of 10% to attain 90% by June 2018	30-Jun-14
		Develop inspection and accreditation guidelines for medical and dental training	Inspection and accreditation guidelines (3 meetings)	30-Jun-14
		Review checklist for joint inspection and approval of internship training centres	Updated checklist for inspection and approval of internship training centres	30-Jun-14
		Review checklist for joint inspection and approval of health facilities	Updated checklist for inspection and approval of health facilities	30-Jun-14
Compliance	Streamline guiding processes and procedures	Review registration and licensing processes for medical & dental practitioners and health institutions	Reviewed, published and disseminated processes for registration and licensing for medical & dental practitioners and health institutions	30-Jun-14
		Develop guidelines for registration of medical and dental students	Guidelines for medical and dental student registration	30-Jun-14
		Develop guidelines for attachment and examining of foreign trained practitioners	Guidelines for attachment and examining of foreign trained practitioners	30-Jun-15
		Develop guidelines for a common practice entry exam	Guidelines for common practice entry exam	30-Jun-18

Focus Area	Objective	Goal/Activities	Output and key Indicators	Target Delivery
	Improve institutional compliance	Enhance awareness of inspection criteria and requirements for compliance	Published checklist for inspection	30-Jun-15
		Document and publish compliance requirements for licence renewals	Published checklist for licence renewals	30-Jun-15
		Establish an enforcement mechanism for defaulters	Published enforcement procedures and enforcement policy	30-Jun-14
Training	Streamline students admissions criteria	Develop minimum standards and consistent admissions criteria for MBChB & BDS	Gazetted admissions criteria for MBChB & BDS	30-Oct-13
	Streamline curricular for medical and dental training	Implement a minimum standard consistent core curricular across training institutions for undergraduate and post-graduate students	Updated and published core curricular for undergraduate and post-graduate students	30-Jun-15
	Streamline internship training	Review of Internship Training Guidelines	Updated training guidelines for Internship Training	30-Jun-15
	Strengthen CPD programs	Review of CPD Guidelines	Updated CPD Guidelines	30-Dec-13
	Improve tracking of medical and dental practitioners	Establish a tracking mechanism for doctors and dentists in training, in internship and place of practice	Index registers of medical and dental as follows: <ol style="list-style-type: none"> 1. Register for undergraduate students 2. GP register 3. Specialist register 4. Foreign trained doctors register 5. Deceased doctors register 6. Migrated doctors register 7. Retired doctors register <ol style="list-style-type: none"> 1. Register for doctors who have left the practice of medicine 2. Private practice register 3. Register for Government practice doctors 4. Register for practitioners with pending disciplinary cases 5. Doctors distribution register per county 	30-Jun-14

7 | Strategic Plan Implementation

7.0 Introduction

To enable the Board to implement the Strategic Plan, an implementation plan has been developed containing activities that support realization of each objective (Refer to Annexes).

To enable the Board to plan financially, the cost of implementing each objective has been identified. The total cost of implementing the 2013 - 2018 Strategic Plan is estimated at approximately KShs 718,544,983. The Board will fund 95 percent of this cost (KShs 680,000,000) while 5 percent will be funded from donor resources.

7.1 Strategic Plan Costs

The total cost of implementing the 2013 -2018 Strategic Plan will be KShs 718,544,982.55, as summarized in Table 9 here below. Notably, the Board will shoulder 95 percent of this cost (KShs 681,874,982.55), of which approximately 60 percent of this amount will be supported from the Secretariat's operational budget (KShs 407,539,268.27).

Table 9: Strategic Plan Costs

Financial Year	Total Estimated Implementation Costs (in KShs)
2013 - 2014	161,152,864.95
2014 - 2015	229,374,705.82
2015 - 2016	145,235,717.23
2016 - 2017	89,471,997.34
2017 - 2018	93,309,697.21
Total	718,544,982.55

Figure 1: MP&DB Strategic Plan Costs (in KShs)

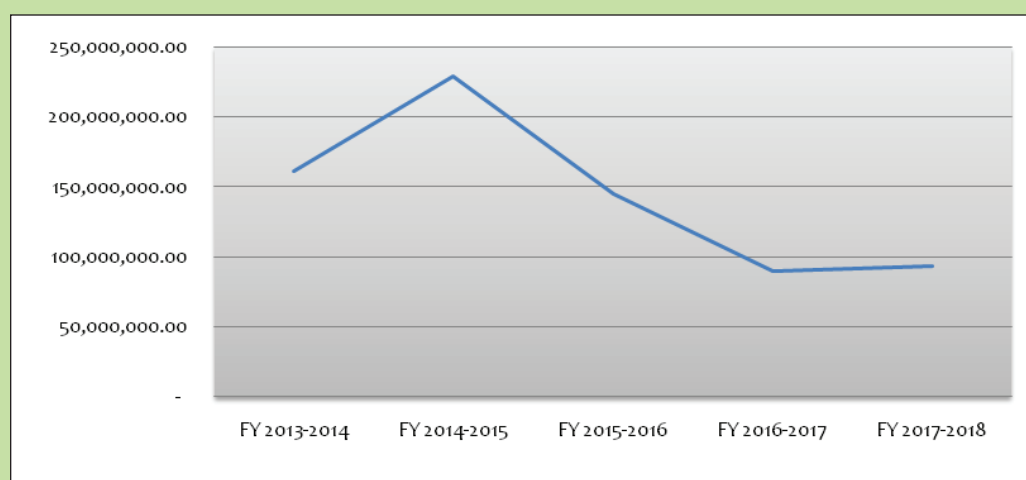


Table 10: Detailed Summary of Implementation Costs

Strategic Theme	Jul 2013 - Jun 2014	Jul 2014 - Jun 2015	Jul 2015 - Jun 2016	Jul 2016 - Jun 2017	Jul 2017 - Jun 2018	Totals	%
Service Delivery Excellence							
1. Finance	-	360,000.00	2,540,000.00	-	-	2,900,000.00	
2. Physical Infrastructure	75,432,380.95	139,379,047.62	56,474,285.71	-	-	271,285,714.29	
3. HR	1,230,000.00	420,000.00	-	-	-	1,650,000.00	
4. Governance	-	1,820,000.00	192,000.00	558,000.00	-	2,570,000.00	
5. Communications	700,000.00	-	-	-	-	700,000.00	
6. Advocacy	-	-	-	-	-	-	
7. Collaborative Partnerships	3,000,000.00	-	-	-	-	3,000,000.00	
Sub Total	80,362,380.95	141,979,047.62	59,206,285.71	558,000.00	-	282,105,714.29	39%
Legal Framework							
1. CAP 253	-	5,000,000.00	-	-	-	5,000,000.00	
2. Litigation	2,350,000.00	-	4,500,000.00	-	-	6,850,000.00	
Sub total	2,350,000.00	5,000,000.00	4,500,000.00	-	-	11,850,000.00	2%
Regulatory Enforcement							
1. Professional indemnity	-	150,000.00	-	-	-	-	
2. Inspections	1,350,000.00	3,000,000.00	-	-	-	4,350,000.00	
3. Operational Processes	1,500,000.00	2,500,000.00	-	-	-	4,000,000.00	
4. Compliance	-	-	-	-	-	-	
5. Training	1,650,000.00	1,900,000.00	-	-	-	3,550,000.00	
Sub total	4,500,000.00	7,550,000.00	-	-	-	12,050,000.00	2%
Other Costs							
1. Board Ops & Admin Expenses	72,940,484.00	73,845,658.20	80,529,431.52	87,913,997.34	92,309,697.21	407,539,268.27	
2. M&E Costs	1,000,000.00	1,000,000.00	1,000,000.00	1,000,000.00	1,000,000.00	5,000,000.00	
Sub Total	73,940,484.00	74,845,658.20	81,529,431.52	88,913,997.34	93,309,697.21	412,539,268.27	57%
Grand Total	161,152,864.95	229,374,705.82	145,235,717.23	89,471,997.34	93,309,697.21	718,544,982.55	100%

7.2 Strategic Plan Funding

95 percent of the Strategic Plan total costs will be funded by the Board, while 5 percent will be funded by Donor resources. 40 percent of the Board funded activities will go towards the office construction, whose funds (KShs 271,000,000) will be sourced exclusively from savings. 60 percent of the Board funded activities will come from already funded and approved operational / recurrent budget.

Table 11: MP&DB Strategic Plan Costs

Strategic Plan Cost Summary (Kshs)	
Total Implementation Cost	718,544,982.55
Source of Funds	
Board funded activities	681,874,982.55
Donor Funded activities	36,670,000.00
Total Funds	718,544,982.55

Figure 2: MP&DB Strategic Plan Costs

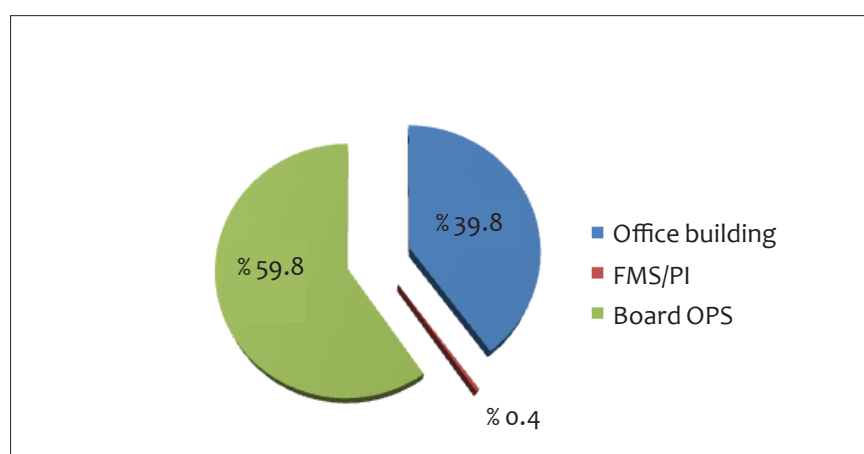


Table 12: Total Board Funding

Total Board Funding	681,874,982.55
Office Building	271,285,714.29
FMS/Professional Indemnity	3,050,000.00
Board Operations	407,539,268.27
Total	681,874,982.55

Figure 3: Funding sources

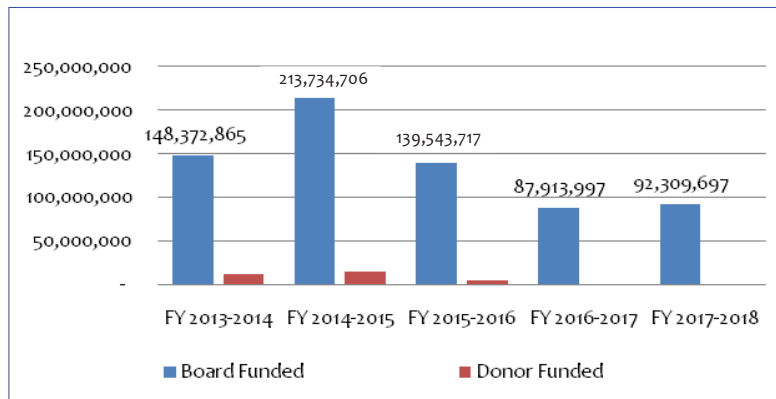
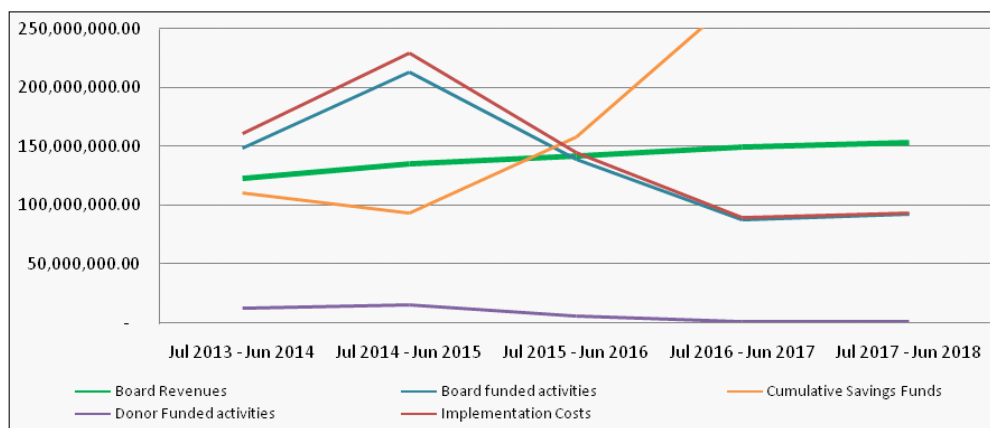


Table 13: Funding sources

Sources of Funds	Jul 2013 - Jun 2014	Jul 2014 - Jun 2015	Jul 2015 - Jun 2016	Jul 2016 - Jun 2017	Jul 2017 - Jun 2018	Totals
Boards Revenues	123,180,000.00	135,498,000.00	142,272,900.00	149,386,545.00	153,121,208.63	703,458,653.63
Board funded activities	148,372,864.95	213,734,705.82	139,543,717.23	87,913,997.34	92,309,697.21	681,874,982.55
Surplus / shortfall	(25,192,864.95)	(78,236,705.82)	2,729,182.77	61,472,547.66	60,811,511.42	21,583,971.08
Board Savings	50,239,516.00	61,652,341.80	61,743,468.48	60,914,547.66	60,811,511.42	295,361,385.36
Cumulative Savings Funds	109,576,651.05	92,992,287.03	157,464,938.27	279,852,033.59	401,475,056.43	401,475,056.43
Donor Funded activities	12,780,000.00	15,640,000.00	5,692,000.00	1,558,000.00	1,000,000.00	36,670,000.00
Implementation Costs	161,152,864.95	229,374,705.82	145,235,717.23	89,471,997.34	93,309,697.21	718,544,982.60

Figure 4: Strategic Plan 2013: Implementation Costs Vs Funding



8 | Monitoring and Evaluation

8.0 Introduction

Monitoring and evaluation mechanisms are essential for accountability to ensure periodic independent evaluation of the Strategic Plan performance. KShs 5,000,000 has been set aside for mandatory annual M&E checkpoint reviews during the 5-year duration of the plan. Performance contracts will be established with the secretariat staff responsible for implementing the various segments of the plan to hold them accountable for achieving full success of the Strategic Plan.

Quarterly and biannual reporting will be key to monitoring and tracking progress and implementing any adjustments and / or corrective actions.

8.1 Monitoring

Monitoring will comprise of routine tracking of key elements during the implementation of the plan and achievement of the intended outcomes. The aim is to determine whether the implementation is progressing to plan and budgetary requirements and whether any adjustments are needed to achieve the intended goals. The monitoring will include a coordinated reporting system.

Monitoring will provide feedback on the implementation progress and will dwell on the following:

1. Are we achieving what we intend? How? Why or why not?
2. What are the obstacles to implementation?
3. Are we coordinating effectively?
4. What are the implementation gaps and how will they be addressed?

The monitoring of the plan implementation will be handled as part of the Secretariat operations and will be reviewed continuously by the CEO. Quarterly and biannual reports will be submitted to the Board.

8.2 Evaluation

Evaluation will systematically and objectively assess the Strategic Plan implementation and results. The aim is to determine the relevance and fulfilment of objectives, efficiency, effectiveness, impact and sustainability with a view to documenting lessons learned and informing future improvements. Evaluation will dwell on the following:

1. What did we do?
2. What did we achieve? Did we achieve what we intended?
3. What have we learned?

The evaluation of the plan will be performed and reported to the Board annually. The evaluation process will help to determine any adjustments to the Strategic Plan implementation.

9 | Annexes

Annex 1: Strategic Plan 2013-2018

The following strategic plan elements will be the key focus areas for the 2013 - 2018 year:

Strategic Theme	Focus Area	Objective	Goal/Activities	Output and key Indicators	Target Delivery
Service Delivery Excellence	A. Finance	1. Enhance revenue Generation	Enhance investment opportunities in line with Government guidelines	Investment Policy	30-Mar-14
			Increased fund mobilizations from donors	Report on increased donor mobilizations	30-Jun-14
				15% annual increase from the current baseline	
			Reduced costs by 20% of total expenditure annually	Total expenditure reduced by 20% by June 2014	30-Jun-14
			Improved debt collection by 80% PA	Reduced outstanding debt by 80% PA	30-Jun-14
			Increased savings from generated revenue by 20% PA	20% increased annual savings from generated revenue	30-Jun-14
		Implement innovative payment methods to achieve reduced transaction costs by 20% and increased revenue collections by 20% PA	Transaction costs reduced by 20% and revenue collections increased by 20% PA	30-Jun-14	
		2. Optimize financial opportunities to develop the Board's infrastructure	To Raise KShs 50,000,000 by end of FY 2014 for development of the office building	KShs 50,000,000 targets achieved	FY.2013/2014
			To Raise KShs 60,000,000 by end of FY 2015 for development of the office building	KShs 60,000,000 targets achieved	FY.2014/2015
			To raise KShs 60,000,000 by end of FY 2016 for development of the office building	KShs 60,000,000 targets achieved	FY.2015/2016
	3. Improve financial management	Implement an FMS with requisite infrastructure	Implementation of FMS by June 30 2016	FY.2015/2016	
	B. Physical Infrastructure	1. Leverage the current infrastructure for development of a modern office facility that will deliver efficient and effective services to our client	To complete the Phase I design and procurement process by November 2013	Phase I: Design and commissioning	30-Nov-13
			To complete the Phase II construction process by June 2015	Phase II: Construction	30-Jun-15
			To complete office fit out by September 2015	Phase III: Office equipping	30-Sep-15
			To occupy the new office by October 2015	Phase IV: Occupation	Oct 2015

Strategic Theme	Focus Area	Objective	Goal/Activities	Output and key Indicators	Target Delivery
	C. Human Resources	1. Improve Human Resource utilization and staff capacity	To determine the organisations HR needs by March 2014	HR needs assessment report and recommendations by March 2014	30-Mar-14
			To establish an HR policy by August 2014	HR policy by August 2014	30-Aug-14
	D. Governance	1. Strengthen the Board's management and leadership capabilities	To establish the current governance levels and document the knowledge base required by each Board member to perform their duties effectively by March 2014	Criteria, procedures and process for Board member induction and capacity building	March 2014
			To implement a project implementation and M&E framework by March 2014	Project implementation and M&E framework	March 2014
			To establish policy, criteria for Board member induction and to build the capacity of the Board to handle its mandate by June 2014	Policy framework for knowledge building, training	June 2014
			To establish operational procedures and processes for Board committees and full Board tribunal meetings by January 2015	Operational procedures and processes for Board committees and full Board tribunal meetings	Jan 2015
			To review and update the code of professional conduct and discipline	Updated code of conduct and discipline	Jan 2015
	E. Communication	1. Strengthen the Board's internal and external communications	Establish an effective Board communication strategy	Board communication strategy	30-Jun-14
			Implement appropriate channels to strengthen the Board's internal and external communications	Communication plan adoption of various channels including modern technology for instance interactive website	30-Mar-14
			Enhance the public awareness about the Board's mandate	1. Quarterly reports on activities for Board awareness and measures to assess growing awareness 2. Open days, regular press briefs, questionnaires, service charter	28-Feb-14
	F. Advocacy	1. Strengthen engagement between the Board and stakeholders	Establish a framework for effective engagement with the Board's stakeholders	Framework for effective stakeholder engagement	1-Mar-15
			Determine the need for an advocacy role for the Board and establish ToR for such role	Recommendation and ToR for advocacy role	30-Jun-14
	G. Collaboration and Partnership	1. Strengthen collaboration and partnership with organizations of similar objectives	Review benchmarking standards, best practices in research and resource and capacity building; review partnership organizations in at least two countries	Updated list of active collaborative partners with lessons learned/ recommendations for adoption	30-Mar-15

Strategic Theme	Focus Area	Objective	Goal/Activities	Output and key Indicators	Target Delivery	
Legal Framework	A. Cap 253	1. Align to Cap 253 provisions and implement revisions	Complete the ongoing revisions of the Cap 253 for approval and publication	4 th draft bill with technical work group comments	30-Jan-15	
				Approved final bill by Board & Submission to AG	30-Mar-15	
				Parliamentary health committee review	30-Jun-15	
				3 rd draft bill with stakeholders comments	30-Nov-14	
			Bi annual reviews of rules and regulations to keep up with the changing environment	Bi-Annual report of changed rules and regulations to begin from gazettment of final bill	To commence from gazettment of the current revisions	
	B. Litigation	1. Improve medical care		1. Establish policy guidelines to improve medical care 2. Develop minimum standard policy guidelines for clinical audit committees (CAC)	1. Policy guidelines for CACs 2. Reduced number of cases of alleged malpractice by 50%	30-Jun-15
						2. Increase awareness about patients rights
		Launch the NPC to consumer groups and professional bodies by September 2013	NPC launched and disseminated to at least 80% of the consumer groups and professional associations	30-Jun-14		
			Interpret the NPC into Kiswahili and Braille by June 2016	NPC interpreted to Kiswahili and Braille by June 2016	30-Jun-16	
		Distribute NPC to at least 80% of the consumer groups and professional associations (combine)	NPC disseminated to at least 80% of the consumer groups and professional associations by June 2014	30-Jun-14		
3. Improve practitioner retention		Encourage medical and dental practitioners compliance (retention)	1. Published list of medical, dental practitioners and health facilities in good standing 2. Increased number of retained doctors and health facilities by 80%	30-Jun-14		
Regulatory Enforcement	A. Professional Indemnity	1. Strengthen professional accountability and responsibility	1. Implement 100% medical & dental professional indemnity cover for all practicing doctors (amended Cap 253 including Government doctors). 2. Enforce PI cover to be submitted at license renewal	100% implemented PI cover for all practicing doctors;	30-Jun-15	

Strategic Theme	Focus Area	Objective	Goal/Activities	Output and key Indicators	Target Delivery
	B. Inspection	1. Strengthen inspections	Strengthen inspection of all medical practitioners and dental premises and training institutions	Quarterly report to reflect increased inspection coverage from a baseline 40% with an annual increase of 10% to attain 90% by June 2018	30-Jun-14
			Develop inspection and accreditation guidelines for medical and dental training	Inspection and accreditation guidelines (3 meetings)	30-Jun-14
			Review checklist for joint inspection and approval of internship training centres	Updated checklist for inspection and approval of internship training centres	30-Jun-14
			Review checklist for joint inspection and approval of health facilities	Updated checklist for inspection and approval of health facilities	30-Jun-14
	C. Operational processes	1. Streamline guiding processes and procedures	Review registration & licensing processes for medical and dental practitioners and health institutions	Reviewed, published and disseminated processes for registration and licensing for medical and dental practitioners and health institutions	30-Jun-14
			Develop guidelines for registration of medical and dental students	Guidelines for medical and dental student registration	30-Jun-14
			Develop guidelines for attachment and examining of foreign trained practitioners	Guidelines for attachment and examining of foreign trained practitioners	30-Jun-15
			Develop guidelines for a common practice entry exam	Guidelines for common practice entry exam	30-Jun-18
	D. Compliance	1. Improve institutional compliance	Enhance awareness of inspection criteria and requirements for compliance	Published checklist for inspection	30-Jun-15
			Document and publish compliance requirements for licence renewals	Published checklist for licence renewals	30-Jun-15
			Establish an enforcement mechanism for defaulters	Published enforcement procedures and enforcement policy	30-Jun-14
	E. Training	1. Streamline students admissions criteria	Develop minimum standards and consistent admissions criteria for MBChB and BDS	Gazetted admissions criteria for MBChB and BDS	30-Oct-13
		2. Streamline curricular for medical and dental training	Implement a minimum standard consistent core curricular across training institutions for undergraduate and post graduate students	Updated and published core curricular for undergraduate and post graduate students	30-Jun-15
		3. Streamline internship training	Review of Internship training guidelines	Updated training guidelines for internship training	30-Jun-15
		4. Strengthen CPD programmes	Review of CPD guidelines	Updated CPD guidelines	30-Dec-13

Strategic Theme	Focus Area	Objective	Goal/Activities	Output and key Indicators	Target Delivery
		5. Improve tracking of medical and dental practitioners	1 Establish a tracking mechanism for doctors and dentists in training, in internship and place of practice	<ul style="list-style-type: none"> 1. Index registers of medical and dental as follows: 2. Register for undergraduate students 3. GP register 4. Specialist register 5. Foreign trained doctors register 6. Deceased doctors register 7. Migrated doctors register 8. Retired doctors register 9. Register for doctors who have left the practice of medicine 10. Private practice register 11. Register for Government practice doctors 12. Register for practitioners with pending disciplinary cases 13. Doctors distribution register per county 	30-Jun-14

Annex 2: Strategic Plan -Implementation Matrix

Strategic Theme	Focus Area	Objective	Goal/Activities	Output	Actors	Q1 2014	Q2 2014	Q3 2014	Q4 2014	Start Date	End date	Total Estimated Revenue & Savings (Ksh)	Total Estimated Implementation Cost (Ksh)
Service delivery excellence	A. Finance	1. Enhance revenue Generation	1. F&A to commence by <start date> tasked to achieve the financial objectives of the strategic plan;	1. Plan of action to achieve targets (a-f); to be approved by the Board 45 days after <start date>	Finance & Admin.					1-Aug-13	30-Mar-14		30-Mar-14
			2. To develop a plan of action to address each objective (a) to (f); plan to be Board approved	2. Quarterly Resource Mobilization report showing mobilization status to the Board;									
			A. Enhance investment opportunities options in line with Government guidelines;	1. Report recommendation outlining the investment options available; to be approved by the Board	Finance & Admin.					1-Oct-13	30-Mar-14		
		1. F&A Committee to commence at <start date> to research and recommend an appropriate investment policy by FY. 2015/2016 which includes available investment options that are in line with Government guidelines;	2. Investment Policy										
			B. Increased fund mobilizations from donors by 15% annually from the current baseline	1. Report on increased donor mobilizations	Finance & Admin.	50,000	50,000	50,000	50,000	1-Oct-13	30-Jun-14	150,000	
	1. To review donor partners list and implement methods to increase mobilizations												
	C. Reduced costs by 20% of total expenditure annually;	1. Report recommendation for reduction in expenditures; 2. Total expenditure reduced by 50% by June 2014	Finance & Admin.						1-Oct-13	30-Jun-14			
1. To commence at <start date> to interrogate all expenditure line items, identify areas of reduction and make recommendations for reduction to meet the targets;	2. To present report of findings to the Board for approval to implement reductions at least 90 days from <start date>												
	D. Improved debt collection by 80% P.A	1. Report recommendation for collection and reduction of debt; to be approved by Board	Finance & Admin.						1-Oct-13	30-Jun-14			
1. F&A committee to commence at <start date> to compile and analyze all outstanding debts and causes and trends for uncollected debt.	2. Reduced outstanding debt by 80% p.a												

Strategic Theme	Focus Area	Objective	Goal/Activities	Output	Actors	Q1 2014	Q2 2014	Q3 2014	Q4 2014	Start Date	End date	Total Estimated Revenue & Savings (Ksh)	Total Estimated Implementation Cost (Ksh)
			2. To recommend actions needed to collect the current debt and mechanism to mitigate future debt increases; 3. To present report to the Board to implement debt collection actions and implement mechanism to avert future debts.										
			E. Increased savings from generated revenue by 20% p.a 1. F&A to commence at <start date> to compile and analyze total savings, and sources of savings 2. To recommend mechanisms to ensure sustainable increased savings 3. To present report to the Board to implement savings mechanism	1. Report of findings and recommendation report to increase savings; 2. 20% Increased annual savings from generated revenue	Finance & Admin.					1-Oct-13	30-Jun-14		
			F. Implement Innovative payment methods to achieve reduced transaction costs by 20% & increased revenue collections by 20% P.A 1. F&A committee to commence at <start date> to review current payment methods and current transaction costs. 2. To review innovative payment methods available for use and comparative cost benefit analysis to achieve reduced 20% transaction costs & increase revenue collections by 20% per year; 3. To report recommended appropriate payment methods to the Board; 4. To implement approved payment methods;	1. Report of findings and recommendation to the Board 2. Transaction costs reduced by 20% & revenue collections increased by 20% P.A	Finance & Admin.					1-Oct-13	30-Jun-14		
		2. Optimize financial opportunities to develop the Board's infrastructure	A. Secure full financial mobilization for proposed new office infrastructure 1. F&A committee to develop a detailed action plan with associated costs by <start date> showing how they intend to raise funds for the proposed office. 2. To meet quarterly to track the progress of mobilization; 3. To report to the Board quarterly on mobilizations achieved to date;	1. F&A Committee plan of action to achieve targets AC; to be approved by the Board 45 days from <start date> 2. F&A committee quarterly report on financial mobilizations achieved.	Finance & Admin.					1-Jul-13	FY.2015/2016		

Strategic Theme	Focus Area	Objective	Goal/Activities	Output	Actors	Q1 2014	Q2 2014	Q3 2014	Q4 2014	Start Date	End date	Total Estimated Revenue & Savings (Ksh)	Total Estimated Implementation Cost (Ksh)
			A1. To Raise 50m by end of FY 2014 1. F&A to implement action plan commencing at <start date> to achieve Targets: Qtr 1- 3m; Qtr 2- 25m; Qtr3 14m; Qtr 4 8m	KShs 50m targets achieved	Finance & Admin.					1-Jul-13	FY.2013 / 2014		
			A2. To Raise KShs 60m by end of FY 2015 1. F&A to Implement action plan commencing at <start date> to raise KShs 60m by June 2015	KShs 60M targets achieved	Finance & Admin.					1-Jul-14	FY.2013/2014 FY.2014/2015		
			A3. To raise KShs 60m by end of FY 2016 1. F&A to Implement action plan commencing at <start date> to raise KShs 60m by June 2016	KShs 60M targets achieved	Finance & Admin.					1-Jul-15			
		3. Improve Financial management	A. Implement an FMS with requisite infrastructure 1. Appoint consultant to perform end to end project implementation to a technical qualified vendor commencing from <start date> 2. Prepare scope of works/Terms of reference (TOR) 3. To develop & present implementation approach with budget and time parameters; 4. To kick off the project upon Board approval;	1. Implementation vendor selected with approved TOR ; 2. Implementation approach for delivery of FMS by June 30 2016	Technical Consultant					1-Jul-15	FY.2015 / 2016		
		4. Leverage Board operations for implementation of Strategic Plan	Revenue		F&A	13,549,800	49,272,000	35,722,200		1-Jul-13	30-Jun-14	123,180,000	
			Board Expenses	Full Board & Committee reports	F&A	1,504,140	5,469,600	3,965,460	2,734,800	1-Jul-13	30-Jun-14		13,674,000
			Operational & Administrative Costs		F&A	6,519,313	23,706,594	17,187,280	11,853,297	1-Jul-13	30-Jun-14		59,266,484
			Savings		F&A	5,526,347	20,095,806	14,569,460	10,047,903	1-Jul-13	30-Jun-14	50,239,516	
	B. Physical Infrastructure	1. Leverage the physical infrastructure to deliver efficient and effective services to our clients	A) Implement the construction of a modern office facility that will deliver efficient and effective services to our client 1. Appoint consultant/ Project Team by <start date> with a qualified Project Manager, tasked with overseeing the end to end implementation of the New office. 2. Prepare scope of works/terms of reference for project delivery 3. To prepare an implementation plan with budget and time parameters for approval 4. To kick off the project upon approval.	1. Appoint project manager	Technical Consultant		428,571	428,571	428,571	1-Oct-13	30-Sep-15		1,285,714

Strategic Theme	Focus Area	Objective	Goal/Activities	Output	Actors	Q1 2014	Q2 2014	Q3 2014	Q4 2014	Start Date	End date	Total Estimated Revenue & Savings (Ksh)	Total Estimated Implementation Cost (Ksh)
			A1. To complete the Phase 1 design & procurement process by Nov 2013; 1. Shortlist & select winning design. 2. Contract the selected consultant team; 3. Review and implement any changes to the design & launch the model of the final design; 4. Prepare, issue and evaluate tenders and select winning main contractor; 5. Sign contract and launch ground breaking ceremony 6. Prepare the project procurement plan: fittings, finishes, furnishings, equipment etc.	1. Appointment of Consulting team; (possible 40% fees) 2. Final design & construction drawings 3. Issue tender for main contractor selection 4. Sign Contract agreement with main contractor; (possible 20% advance) 5. Ground breaking ceremony 6. Project procurement plan.	Technical Consultant		3,400,000			1-Oct-13	30-Nov-13		3,400,000
			A2. To complete the Phase 2 construction process by June 2015; 1. Project team to manage the construction to the program plan 2. To Schedule regular client meetings for completion & hand over of the office construction. 3. To purchase approved fittings, finishes, furnishings etc for the office	1. Program of works 2. Practical completion/occupancy certification 3. Procured materials	Technical Consultant				4,080,000	1-Jul-14	30-Jun-15		4,080,000
			4. To pay the contractor interim payment certificates	1. 20% possible advance payment to contractor 2. Certified Payments to contractor	Technical Consultant			40,000,000		1-Jul-14	30-Jun-15		66,666,667
			A3. To complete office fit out by Sept 2015; (d) to ensure practical completion and occupation by Oct 2015; 1. Receive the furnishings and office equipment at least 120 days before practical completion date 2. Establish a team to prepare for the official office opening ceremony; 3. Launch the new office grand opening	1. Purchase of office materials 2. Office fit out & Office opening ceremony	Technical Consultant					2-Jul-15	30-Sep-15		
			1. Improve Human Resource utilization & staff capacity	1. Appoint external consultant to commence from <start date> tasked to review and implement the HR objectives of the Strategic Plan; 2. To prepare scope of works/TOR & appoint by January 2014	Technical Consultant		950,000	280,000		1-Jan-14	30-Aug-14		1,230,000

Strategic Theme	Focus Area	Objective	Goal/Activities	Output	Actors	Q1 2014	Q2 2014	Q3 2014	Q4 2014	Start Date	End date	Total Estimated Revenue & Savings (Ksh)	Total Estimated Implementation Cost (Ksh)
			3. To execute the assignment & present recommendation report to the Board in April 2014 4. To implement approved recommendations and furnish completion report 30 days before <end date>										
			A. To determine the organisations HR needs by March 2014; 1. To perform an HR Needs assessment of the organization commencing on <start date> 2. To compile report of findings & recommendation for Board approval 90 days before <end date> 3. To implement approved recommendations by <end date>	1. HR needs assessment report & recommendations by June 2014	Technical Consultant					1-Jan-14	30-Jun-14		
			B. To Establish an HR policy by August 2014; 1. To draft HR policy for the organization commencing on <start date> 2. To seek Board's approval for the HR Policy at least 90 days before <end date> 3. To implement approved HR Policy by <end date>	1. HR Policy by August 2014	Technical Consultant					1-Jan-14	30-Aug-14		
			B. To Establish an HR policy by August 2014; 1. To draft HR policy for the organization commencing on <start date> 2. To seek Board's approval for the HR Policy at least 90 days before <end date> 3. To implement approved HR Policy by <end date>	1. HR Policy by August 2014	Technical Consultant					1-Jan-14	30-Aug-14		
	D. Governance	Strengthen the Board's management and leadership capabilities	1. F&A committee/ appoint technical consultant to commence on <Start date> to implement the governance objectives of the strategic plan. 2. To develop Scope of works/TOR 3. To develop an implementation proposal; 4. To meet Quarterly with F&A for progress and report to the Board. A. To establish the current governance levels and document the knowledge base required by each Board Member to perform their duties effectively by March 2014;	1. Appoint consultant/team 2. Recommendations report to implement objectives for 2014, 2015, 2016	Technical Consultant					1-Jul-14	30-Jun-14		

Strategic Theme	Focus Area	Objective	Goal/Activities	Output	Actors	Q1 2014	Q2 2014	Q3 2014	Q4 2014	Start Date	End date	Total Estimated Revenue & Savings (Ksh)	Total Estimated Implementation Cost (Ksh)
			(i) To review & document current organizational governance levels and current knowledge base of Board Members and establish knowledge base required for each Board member; (ii) to Prepare & implement report recommendation for knowledge base training for the existing and new Board members.	A. Criteria, procedures and process for Board member induction and capacity building; B. Policy framework for knowledge building, training C. Project implementation and M&E Framework;	Technical Consultant					1-Jul-14	30-Jun-15		
			B. To implement a project implementation & M&E Framework by March 2014; (i) To review current project implementation & M&E framework & establish requirements for desired framework. (ii) To develop & implement recommendations for PI&M&E framework for Board approval;										
			C. To establish policy, criteria for Board member induction & to build the capacity of the Board to handle its mandate by June 2014; (i) To review current policy & criteria for Board member										
			1.2 To establish operational procedures and processes for Board committees and full Board tribunal meetings by Jan 2015; (ii) To review the code of professional conduct and discipline	1. Operational procedures and processes for Board committees and full Board tribunal meetings;	Technical Consultant					1-Jan-17	30-Mar-18		
			1.3 To determine the need for and TOR for the advocacy role for the Board by June 2014;	1. Role assessment, definition and TOR for Advocacy role	Technical Consultant					1-Jan-14	30-Jun-14		
	E. Communication	Enhance Board's internal and external communication	1. Appoint consultant by <start date> tasked with implementing the communication objectives of the plan 2. Prepare scope of works/terms of reference 3. To prepare recommendation report 4. To prepare implementation/project close report	1. Appoint consultant/team	Technical Consultant		280,000		420,000	31-Oct-13	30-Jun-14		700,000
			A. Establish an effective Board Communication strategy 1. To be established to review current Board communication strategy & gaps 2. To recommend the most effective Board communication strategy for Board's approval 3. Implement approved communication strategy	1. Recommendation report for effective Board's communication strategy.	Technical Consultant					31-Oct-13	30-Jun-14		

Strategic Theme	Focus Area	Objective	Goal/Activities	Output	Actors	Q1 2014	Q2 2014	Q3 2014	Q4 2014	Start Date	End date	Total Estimated Revenue & Savings (Ksh)	Total Estimated Implementation Cost (Ksh)
			B. Implement appropriate channels to strengthen the Board's internal and external communications 1. Review current internal and external channels of communication & establish gaps; 2. Recommend appropriate channels for internal & external communication 3. Implement approved channels for communication	1. Implemented channels or communication plan	Technical Consultant					31-Oct-13	30-Mar-14		
			C. Enhance the public awareness about the Board's mandate 1. Review & establish the current public/stakeholder awareness level about the Board 2. Determine the desired awareness level about the Board and & recommend methods to achieve the desired level & how to measure this continuously. 3. Implement the approved methods and measurement criterias to ascertain success;	1. Quarterly reports on activities for Board awareness & measures to assess growing awareness	Technical Consultant					31-Oct-13		28-Feb-14	
	F. Advocacy	Optimize effective engagement with the Board's stakeholders	1. Engage consultant to implement advocacy objectives to Establish a framework for effective engagement with the Board's stakeholders	1) Framework for effective stakeholder engagement	Technical Consultant					1-Mar-14	1-Mar-15		
	G. Collaboration and Partnership	Strengthen collaborative and strategic partnerships	1. F&A team to review current organizational collaboration and partnerships & benchmarking standards used; in at least two countries 2. Research & recommend benchmarking standards in all categories appropriate for the Board 3. Implement recommended benchmarking standards	1. Updated list of active collaborative partners and list of research institutions for capacity building	Finance & Admin/secretariat			3,000,000		30-Mar-14	30-Mar-15		3,000,000
Legal framework	A. CAP 253	Alignment to CAP 253 provision and revisions	A. Complete the ongoing revisions of the Cap. 253 for approval and publication. 1. Appoint legal expert to Commence from <start date> to compile draft bill revisions for publication. 2. Prepare work shop for stakeholders to review 2nd draft bill; 3. Prepare 2nd bill with stakeholders comments	1a) 3rd draft bill with stakeholders comments	Legal Consultant					1-Sep-14	30-Nov-14		
			1. Prepare work shop for technical To review 4th draft bill; 2. Prepare 4th bill with technical WG comments	1b) 4 th draft bill with technical work group comments	Legal Consultant					30-Nov-14	30-Jan-15		

Strategic Theme	Focus Area	Objective	Goal/Activities	Output	Actors	Q1 2014	Q2 2014	Q3 2014	Q4 2014	Start Date	End date	Total Estimated Revenue & Savings (Ksh)	Total Estimated Implementation Cost (Ksh)
			1. Present final bill to the Board for approval 2. Prepare final bill for AG review	1c) Approved final bill by Board & Submission to AG	Legal Consultant					30-Jan-15	30-Mar-15		
			1. Prepare bill for approval by the parliamentary health committee	1d) Meeting with parliamentary health committee	Legal Consultant					30-Mar-15	30-Jun-15		
			B. Bi annual reviews of rules & regulations to keep up with the changing environment 1. To commence bi annual reviews from <start date> 2. To document outcome of reviews and prepare bi annual report recommendation of changed rules & regulations and recommended bill revisions for Board attention	1. Bi-Annual report of changed rules & regulations	Legal Consultant					30-Jun-15			
	B. Litigation	1. Improve medical care	A. Establish policy guidelines to improve medical care; 1. Develop minimum standard policy guidelines for clinical audit committees (CAC) 2. Meet with stakeholders to establish recommended guidelines for CAC to achieve improved medical care and to reduce malpractice cases 3. Implement Board approved guidelines for CAC; print and launch	1. Policy guidelines for Clinical Audit Committees 2. Reduced number of cases of alleged malpractice by 50%	PIC/ARC					1-Jul-14	30-Jun-15		
		2. Increase awareness about patients rights	B. Implement the National patients charter 1. Establish To create awareness on the National Patients' Charter (NPC) by Sept 2013 2. Launch the NPC to consumer groups & professional bodies by September 2013 3. Interpret the NPC into the Kiswahili national language & Braille by June 2016 4. Distribute NPC to at least 80% of the consumer groups and professional associations (combine)	1. Awareness created about the NPC by Sept 2013 1. NPC launched and disseminated to at least 80% of the consumer groups and professional associations 1. NPC interpreted to Kiswahili & Braille by June 2016 1. NPC disseminated to at least 80% of the consumer groups and professional associations by June 2014	PIC/PCC PIC/PCC PIC/PCC PIC/PCC			1,000,000		1-Aug-13	30-Sep-13		1,000,000
		3. Improve practitioner retention	C. Encourage medical and dental practitioners compliance (retention) 1. Compile the list of Medical & dental practitioners & health facilities who are in good standing	1. Published list of medical, Dental practitioners and health facilities in good standing 2. Increased number of retained doctors & health facilities by 80%	Secretariat		300,000	300,000		31-Dec-13	30-Jun-14		600,000

Strategic Theme	Focus Area	Objective	Goal/Activities	Output	Actors	Q1 2014	Q2 2014	Q3 2014	Q4 2014	Start Date	End date	Total Estimated Revenue & Savings (Ksh)	Total Estimated Implementation Cost (Ksh)
			2. Publish list of practitioners & facilities on the Board website who are in good standing. 3. Establish framework to maintain accurate register & web updates of practitioners & facilities who retain good standing status										
Regulatory framework	A. Professional Indemnity	Strengthen professional accountability and responsibility	A. Implement 100% medical & dental professional indemnity cover for all practicing doctors (amended Cap 253 including government doctors). 1. Work to commence on <start Date> to prepare regulatory procedures to implement PI for all practicing doctors; 2. Board to approve regulatory process & procedures 3. Create awareness of the new requirement & Publish regulatory requirement to all affected practitioners with effective date 4. Enforce the requirement during licence renewal	1. 100% implemented PI cover for all practicing doctors; PI cover to be submitted at licence renewal;	PPC					1-Jul-14	30-Jun-15		
	B. Inspection	Strengthen inspections	A. Strengthen inspection of all medical practitioners' and dental premises and training institutions. 1. Work commencing on <start date> to review current inspection coverage. 2. Recommendation report with mechanism to increase inspection coverage from the current 40% coverage by 10% every year. 3. Implement approved mechanism & report improved inspection figures to the Board quarterly 4. Publish a list of compliant & non compliant inspected Facilities B. Develop inspection and accreditation guidelines for medical and dental training 1. Consult with stakeholders to Review current inspection & accreditation modalities & establish gaps 2. Recommend effective guidelines for inspection & accreditation of medical and dental training 3. Publish & enforce guidelines	1. Report of findings on the current inspection levels & recommendation for improvement; 2. Quarterly report to reflect increased inspection coverage from a baseline 40% with an annual increase of 10% to attain 90% by June 2018; 2) Inspection and accreditation guidelines (3 Meetings)	PPC/ARC/ Education Committee				150,000	1-Jul-13	30-Jun-14		150,000
					PPC/ARC/ Education Committee	600,000				1-Jul-13	30-Jun-14	600,000	600,000

Strategic Theme	Focus Area	Objective	Goal/Activities	Output	Actors	Q1 2014	Q2 2014	Q3 2014	Q4 2014	Start Date	End date	Total Estimated Revenue & Savings (Ksh)	Total Estimated Implementation Cost (Ksh)
			C. Review checklist for joint inspection and approval of internship training centre's; 1. Consult with stakeholders to Review checklist for joint inspection and approval of internship training centre's 2. Establish gaps in the check list & recommend improvements 3. Board to approve recommended improvements to the checklist 4. Publish & enforce revised checklist	1. Updated checklist for inspection and approval of internship training centre's	PPC/ARC/ Education Committee	600,000				1-Jul-13	30-Jun-14	600,000	600,000
	C. Operational processes	Stream-line guiding processes and procedures	A. Review registration & licensing processes for Medical & dental practitioners & health institutions; 1. Work to commence <start date> to review current registration processes for practitioners & health Institutions. 2. Consult with stakeholders to define and document the required process flow & identify the human resource to support the process. 3. To get approval for new registration process 4. Publish and implement approved process	1) A reviewed, published & disseminated processes for registration & licensing	PPC/ARC			300,000	300,000	1-Jul-13	30-Jun-14		600,000
			B. Develop guidelines for registration of Medical and Dental students 1. To commence from <start date> to review current guidelines for registration of medical & dental students. 2. Consult with stakeholders to define and document the required new guidelines & identify the human resource to support the guidelines 3. To get approval for new registration guidelines 4. Publish and implement approved guidelines	2) Student registration guidelines	Educa-tion/ARC		300,000	600,000		1-Oct-13	30-Jun-14	900,000	900,000
			C. Develop guidelines for attachment and examining of foreign trained practitioners 1. To commence from <start date> to review retraining guidelines for practitioners	3) Guidelines for retraining of practitioners who are assessed below required competence level	ARC/ Education					1-Jul-14	30-Jun-15		30-Jun-15

Strategic Theme	Focus Area	Objective	Goal/Activities	Output	Actors	Q1 2014	Q2 2014	Q3 2014	Q4 2014	Start Date	End date	Total Estimated Revenue & Savings (Ksh)	Total Estimated Implementation Cost (Ksh)
			2. TWG1 to prepare draft of guidelines; To work with stakeholders to define and document the new guidelines or retraining & identify the human resource to support the process. 3. To get approval for new guidelines 4. Publish and implement approved guidelines										
			D. Develop guidelines for a common practice entry exam 1. To commence from <start date> to review need for guidelines for common practice entry exam. 2. To work with stakeholders to define and document the required guidelines & processes & identify the human resource to support the process. 3. To get approval for new exam guidelines 4. Publish and implement approved new guidelines	Guidelines for common practice entry exam	Education					1-Jul-17	30-Jun-18		
	D. Compliance	Improve institutional compliance	A. Enhance awareness of inspection criteria and requirements for compliance. 1. Establish WG from <start date> to review current level of awareness for inspection criteria & requirements for compliance 2. To determine the gaps in awareness and develop checklist for inspections to acquire licence renewal 3. To get approval to implement checklist for licence renewals 4. Publish and implement approved checklist	1) Published checklist for inspection	PPC					1-Jul-14	30-Jun-15		
			B. Document and publish Compliance requirements for licence renewals 1. To commence from <start date> to review current compliance requirements for license renewals. 2. To define and document compliance requirements checklist & processes & identify the human resource to support the process. 3. To get approval for new compliance checklist 4. Publish and implement approved new compliance checklist	2) Published checklist for licence renewals	PPC					1-Jul-14	30-Jun-15		

Strategic Theme	Focus Area	Objective	Goal/Activities	Output	Actors	Q1 2014	Q2 2014	Q3 2014	Q4 2014	Start Date	End date	Total Estimated Revenue & Savings (Ksh)	Total Estimated Implementation Cost (Ksh)
			C. Establish an enforcement mechanism for defaulters; 1. To review current enforcement mechanisms; 2. To develop enforcement mechanism 3. To get approval to implement enforcement; 4. Publish and implement	3) Documented enforcement procedures & published enforcement policy.	PPC/F&A					1-Jul-14	30-Jun-15		
	E. Training	Stream-line students admissions criteria	A. Develop minimum standards and consistent admissions criteria for MBChB & BDS 1. To commence from <start date> to review current admissions criteria and any gaps. 2. To define and document updated admissions criteria 3. To get approval for admissions criteria 4. Publish and implement	1) Gazetted admissions criteria for MBChB & BDS	Education/ Secretariat		150,000			1-Oct-13	30-Oct-13		150,000
		Stream-line curricular for medical and dental Training	B. Implement a minimum standard consistent core curricular across training institutions for undergraduate and post graduate students; 1. To finalize current core curricular across training institutions 2. To print and launch revised core curricular changes	2) Updated & published core curricular for undergraduate and post graduate students	Education					1-Jul-14	30-Jun-15		
		Stream-line internship training	C. Review of Internship Training Guidelines 1. To review current internship training guidelines and determine gaps. 2. To work with stakeholders to determine required changes 3. To get approval for revised guidelines 4. Publish and implement	3) Updated training guidelines for Internship Training	ARC					1-Jul-14	30-Jun-15		
		Strengthen CPD programs	D. Review of CPD Guidelines 1. To review current CPD guidelines and determine gaps. 2. To work with stakeholders to determine required changes 3. To get approval for revised guidelines 4. Publish and implement	4) Updated CPD Guidelines;	Education	1,500,000				1-Jul-13	30-Dec-13	1,500,000	1,500,000
		Improve tracking of Medical and dental practitioners	E. Establish a tracking mechanism for doctors and dentists in training, in internship and place of practice 1. To work with ICT team to review data requirements for tracking mechanism	5) Index registers of medical and dental; refer to index appendix	Secretariat					1-Jul-13	30-Jun-14		

Strategic Theme	Focus Area	Objective	Goal/Activities	Output	Actors	Q1 2014	Q2 2014	Q3 2014	Q4 2014	Start Date	End date	Total Estimated Revenue & Savings (Ksh)	Total Estimated Implementation Cost (Ksh)
			2. To develop various registers and get approval for implementation 3. Publish and implement										
Total Cost												161,152,865	

Annex 3: MOST Assessment Instrument Scores

The scores for the organizational assessment are shown in the MOST table below.

Management Component	Stages of Development and their Characteristics				Current Stage	Evidence: How to Get to No.4
	I	II	III	IV		
Mission / Mandate						
1. Existence and knowledge	No formal mission/mandate statement exists, or the existing missions statement that is inconsistent with the current organizational purpose and the needs it is intended to serve for the professional beneficiaries	The mission/mandate statement exists, is consistent with the organizational purpose, and is sometimes cited by stakeholders, the council members and senior secretariat staff	The mission/mandate statement is frequently cited by key stakeholders; the council members, secretariat staff, partner agencies, and professional beneficiaries	The mission/mandate statement is widely known and regularly reviewed to assure that it reflects the current organizational purpose and the needs of the intended clients- including its intended professional beneficiaries	II	Improve in stakeholder involvement Increase awareness of the mission/mandate statements
Values						
2. Existence and application	Organizational values and ethical principles have not been defined	Organizational values and ethical principles have been defined and are sometimes cited by stakeholders, the council members and senior secretariat staff	Organizational values and ethical principles are frequently cited by the council members and secretariat staff at all levels	Organizational values and ethical principles are widely known, and the council members and secretariat staff are held accountable for adhering to them	II	Effective communication & advocacy strategies
Strategy						
3. Links to Mission/Mandate and values	Strategies are developed in response to funders requirements or the preferences of a few decision-makers, without reference to the mission/mandate and values	Strategies are sometimes developed with reference to the mission and values, but more often in response to other requirements, influences, preferences and mandates	Strategies are almost always developed within the general context of the mission/mandate and values	Because strategies are developed to conform to the mission and values, strategic planning is viewed as an opportunity to reaffirm or revise the mission/mandate	IV	
4. Links to intended Professional Beneficiaries and other key stakeholders	Strategies are developed without reference to the needs of the intended professional beneficiaries or other stakeholders	Strategies are developed based on assumptions about the needs of the intended professional beneficiaries and other stakeholders	Strategies are developed based on accurate information about the needs of intended professional beneficiaries and other key stakeholders	Strategies are developed with the participation of the intended professional beneficiaries and other stakeholders	IV	Stakeholders are involved in setting up Board strategies
5. Links to Potential Professional Beneficiaries	Strategies are developed without knowledge of the current or potential demand for council's services	Strategies are developed on the basis of anecdotal knowledge of the demand for the council's services	Strategies are developed on the basis of occasional assessments of the demand for services, as well as analysis of the services already provided by other bodies	A mechanism is in place for regularly scanning current and potential demand, evaluating other bodies' services, and using these findings to develop strategies for meeting internal and external client needs	IV	
Structures						
6. Lines of Authority and Accountability	There are no formal documents that define current lines of authority and accountability	An organizational chart or similar document defines lines of authority and accountability.	The manual of governance and management policies and procedures	The manual of governance and management policies and procedures and	II	An organization chart or similar document defines lines of authority and accountability.

Management Component	Stages of Development and their Characteristics				Current Stage	Evidence: How to Get to No.4
	I	II	III	IV		
		It is included in the organization's manual of governance and management policies and procedures	and similar documents are sometimes used when issues arise pertaining to lines of authority and accountability	similar documents are regularly updated, widely communicated and consistently used to guide or resolve issues pertaining to performance, lines of authority and accountability		The lines of authority are assumed as everyone reports to the CEO
7. Communication	There is no formal communication mechanism, Important information is communicated mainly by ad hoc word of mouth	Communication Mechanisms are used only to convey legally essential Information from the council, and senior secretariat and stakeholders' management to the rest of the profession, staff and general public	Clearly structured communication mechanisms are sometimes used to share information to council members, committees, secretariat staff, and the general public	Clearly structured communication mechanisms are used consistently to share information in a timely manner to the council members, committees, secretariat staff, and the general public	IV	There are clearly structured communication mechanisms are used consistently to share information in a timely manner to the members, committees, secretariat e.g. notice of meetings or circulars sent to doctors e.g. for renewals
8. Role & Responsibilities (Note: this component pertains to the overall governance of the council as a whole, its committees, and to secretariat staff)	Roles and responsibilities are not clearly defined. Work is assigned on an ad-hoc basis, according to the perceived needs of the moment	Roles and responsibilities are in the process of being defined e.g. through loose documents and semi-formal communications. Most work is still assigned on an ad-hoc basis	Roles & responsibilities are defined in the detailed policy and procedures manuals. They are beginning to be used as the basis for assigning work.	Roles & responsibilities are defined in the detailed policy and procedures manuals which are consistently used as the basis for assigning work. Such administrative procedures documents are regularly reviewed to be sure that council members and staff assignments serve organizational strategies	IV	Roles and responsibility are defined in the detailed policy and procedures manuals which is consistently used as basis for assigning work (performance contracting duties are well defined)
9. Decision-Making	The full governance committee/ council makes all significant decisions without discussing them with individual members or committees, and secretariat staff	The full governance committee/ council makes all significant decisions after listening to the views of selected committees/ staff/ members	Council committees and mid-level secretariat staff members are encouraged to initiate, explore and recommend significant decisions regarding their own work and the work of their teams	All committees and secretariat staff are expected to initiate significant decisions regarding their work of their teams, and to monitor the effective carrying out of those decisions once approved	II	The Full Board makes all significant decisions after listening to the views of selected staff members, i.e. the CEO
Systems						
10. Planning	Most council activities are unplanned and decided on an ad-hoc basis	Operational plans are developed for some orders from above projects, programs or activities, often to comply with others' requirements	An operational plan is developed annually, somewhat independently of the council's broader long term strategies	The annual operational plan is designed to support the council's carefully developed, documented, formally approved and widely disseminated broader long term strategies	IV	The annual operational plan is designed to support the Board's carefully developed, documented, formally approved and widely disseminated broader long term strategies, as seen in the strategic plan, to the annual work

Management Component	Stages of Development and their Characteristics				Current Stage	Evidence: How to Get to No.4
	I	II	III	IV		
						plan and finally to the individual's work plan
11. Human Resources Management	There are no policies on job dissatisfaction, salaries, hiring, promotion, grievances, or work hours for the council's employees. There are no procedures for performance evaluation, staff development, or maintenance of employee data	The council has recognized the need for a formal HR system. It is working to clarify HR policies and procedures	HR policies and procedures are in place, and council managers are beginning to use them to hire, develop and retain talented and committed staff	HR policies and procedures are in place, and council members and secretariat managers use them consistently to hire, develop and retain talented and committed staff	II	Currently we have identified the HR needs of the staff and the Board. In developing the Board's HR policy, we have borrowed ideas from other the Ministry of Health Human Resource Policy, the Nursing Council of Kenya Organizational structure is in place Devolution We need more staff at county level
12. Monitoring & evaluation	The council's work is monitored and its results are evaluated by external evaluators when due diligence and other reasons demand it.	The council monitors its own work to determine adherence to planned activities. Results are evaluated by external teams when due diligence and other reasons demand it	The council regularly monitors its own to determine progress toward achieving goals and objectives. It objectively evaluates results at the end of each project and program	The council regularly monitors its progress, evaluates results, and uses the findings to report on its achievements, improve services, and plan the next phase of its work	III	Provisions have been put in place to improve a HR department. We have evaluated ourselves and established our strengths and weaknesses
13. Information Management: Data Collection	Routing professional cadre, service and financial data are often inaccurate/ incomplete, and reports are rarely submitted on schedule or up to date	The council has introduced systems that are beginning to improve the accuracy, completeness and timeliness of routine professional, service and financial reports	Organizational systems yield routine professional cadre, service and financial data that are generally considered accurate, complete and timely	Organizational systems provide cross-checking to guarantee the accuracy and completeness or routine professional cadre, service and financial data. There are clear, enforced consequences for late or inaccurate reports	IV	The Board has a database for all practitioners and private medical/ dental institutions, maintaining of a retention register, list of defaulters. Number of complaints is increasing because the public is aware of the mandate of the Board From the list of defaulters, the Board has been able to follow-up payments and are beginning to yield results
14. Quality Assurance	The council emphasizes compliance with legal duty and the number of activities undertaken, rather than the quality of services	The council acknowledges the importance of high quality services. It is considering activities that will help the professional cadre, council members and secretariat staff regularly access and improve quality	Some parts of the council have undertaken activities to assess and improve the quality of services. A few interested committees/ members and secretariat staff have taken responsibility for conducting these activities	There is an established on going system for assessing and improving the quality of services across the whole council. Trained committees, council members and secretariat staff are regularly using this system	II	Training opportunities offered to the staff, timely reports from committees' e.g. PIC, CPD returns. There is evidence of teamwork between the Board secretariat and Board member

Management Component	Stages of Development and their Characteristics				Current Stage	Evidence: How to Get to No.4
	I	II	III	IV		
						Regular inspections to monitor training e.g. medical and dental schools and internship training centers
15. Revenue Generation	The council operates with a single source of revenue usually registration dues/subscriptions or one large funder-whose mandate or limitations shapes the council's strategies and programs.	The council acknowledges the need for diversified funding. It has devised but not yet implemented a strategy for obtaining revenue from diverse sources.	The council has begun to implement its diversification strategy and has already obtained significant revenue from diverse sources to cover current needs.	The council follows a long-term revenue-generating strategy, balancing diverse sources of revenue to meet current and future needs.	IV	<p>Deliberate cost cutting measures at 50% in the total expenditure</p> <p>Investment approach in the Treasury Bills.</p> <p>The sale of Board publications i.e. Code of Professional Conduct and Discipline, Fees Guidelines, Internship Guidelines.</p> <p>Fees attached to the review of the curriculums, sale of tribunal proceedings etc.</p> <p><u>Future</u></p> <p>Mpesa pay bill, online applications, professional indemnity (insurance), temporary removal from the register.</p>
16. Financial Management	Council budgets are developed without input from program managers. The finance system does not accurately track expenditures, revenues, and cash flow.	Council budgets are first developed by financial committee/ staff and then usually seek input from each other committees and technical managers. The finance system tracks expenditures, revenues and cash flow by line item (e.g. salaries, utilities, materials) without links to program outputs or services	Financial committees and staff develop budgets in conjunction with other committees and program managers. The finance system tracks expenditures, revenues and cash flow by line item, with some links to program outputs and services.	Program committees and managers work with financial committees and staff to develop budgets that support programmatic decisions for the professional cadre. The finance system presents an accurate, complete picture of expenditures, revenue and cash flow in relation to program outputs and services	III	<p>There is tracking income and expenditure by the Accountant, Internal Auditor, FAC, CEO, DMS and Chairman. There exists daily, weekly, monthly, quarterly, annually by the Auditor General and submission of the same to parliament.</p> <p>Empowering of personnel in training.</p> <p><u>Future</u></p> <p>The process of acquisition of a Financial Management System (FMS) is underway</p>
17. Supply Management (Note: Supplies in this case applies to all of the council's inputs and outputs relating to its core work, both physical	There is no system in place to procure, track or regulate supplies used by the council. Incoming supplies are simply received and stocked when they arrive	A supply system has been designed to allow the council to track the flow and use of supplies. Committees and secretariat staff have not yet been trained to use the system.	Supply system allows council to forecast and procure supplies in relation to their demands and use. Some committees and secretariat staff are trained to use the system.	Trained committees and staff consistently use the supply system to forecast future requirements, reduce gaps, control budgets and cash flow	III	

Management Component	Stages of Development and their Characteristics				Current Stage	Evidence: How to Get to No.4
	I	II	III	IV		
(e.g. cadre data, health information or office) and non physical (e.g. IT, phone communications, member services, etc)	and distributed or otherwise attended upon demand.		The supply system allows the council to forecast, procure and release supplies in relation to their demand and use. Some committee members and staff have been trained to use the system.	, assure proactive demand response and prevent supply stock outs.		There is a system in place (tender committee) and outsourced services from the UoN due to lack of capacity. Board members and staff have been trained by PPOA on public procurement and disposal procedures

Annex 4: List of Stakeholders and Participants

List of stakeholders and participants who attended the KMP&DB *Strategic Plan*, 2013-2018, Review workshop, on the 25th June, 2013 at the Panafric Hotel, Nairobi.

	Name	Designation	Organization
1	Prof. George Magoha	Chairman	Medical Practitioners and Dentists Board
2	Dr. Francis M. Kimani	Director of Medical Services	Ministry of Health
3	Prof. Alice Mutungi	Vice Chair	Medical Practitioners and Dentists Board
4	Mr. Daniel Yumbya	Chief Executive Officer	Medical Practitioners and Dentists Board
5	Dr. Elly Nyaim Opot	Board Member	Medical Practitioners and Dentists Board / Kenya Medical Association
6	Dr. David Kiima	SDDMS/DMH, Board Member	Medical Practitioners and Dentists Board / Ministry of Health
7	Prof. Barasa Khwa Otsyula	Board Member	Medical Practitioners and Dentists Board
8	Prof. Zipporah Ngumi	Board Member	Medical Practitioners and Dentists Board
9	Dr. Stephen Ochiel	Board Member	Medical Practitioners and Dentists Board
10	Dr. Joel Ole Kiyapi	Board Member	Medical Practitioners and Dentists Board
11	Prof. Evelyne Wagaiyu	Board Member	Medical Practitioners and Dentists Board
12	Dr. Samson Wanjala	Board Member	Medical Practitioners and Dentists Board
13	Dr. Mahendra Pancholi	Board Member	Medical Practitioners and Dentists Board
14	Dr. Fatmah Abdallah	Board Member	Medical Practitioners and Dentists Board
15	Dr. Josephine Omondi	Board Member	Medical Practitioners and Dentists Board
16	Mr. Munge Murage	Legal Consultant	Medical Practitioners and Dentists Board
17	Mr. James Mwenda	Senior Parliamentary Counsel	AG Chambers
18	Dr. Stephen Irungu	Chief Dental Officer	Ministry of Health
19	Ms. Elizabeth Oywer	Registrar	Nursing Council of Kenya
20	Dr. Makau Matheka	Deputy Chief Dental Officer	Ministry of Health
21	Ms. Sophie Ngugi	Standards Officer	Nursing Council of Kenya
22	Ms. Perez Wawire	Registration/ Licence Officer	Clinical Officer's Council
23	Mr. Nachiro Mwatsama	Lab. Technologist	Kenya Medical Laboratory and Technologists Board
24	Mr. Michael Wangai	Chief Executive Officer	Kenya Medical Laboratory and Technologists Board
25	Zubeda Bonareri Gichana	Radiation Protection Officer	Radiation Protection Board
26	Joyce Atinda	Registrar	Kenya Nutritionists & Dieticians Institute
27	Prof. Kiama Wangai	Convener, Medical Legal	Law Society of Kenya
28	Bernice Muya	Legal Manager	Law Society of Kenya
29	Mrs. Patricia N.	Vice Chairperson	Kenya National Commission on Human Rights
30	Ms. Margaret Muthee	Economic, Social and Cultural rights	Gender and Equality Commission
31	Ms. Susan Wangari Waweru	Advocate	MMC Africa
32	Ms. Alice Mwangera	Chief Executive Officer	Morris Moses Foundation
33	Ms. Jennifer Mwikhoma	Head of Programmes	Morris Moses Foundation
34	Margaret Obondo	Program Officer	Consumer Federation of Kenya
35	Mr. Franklin Juma	Chief Executive Officer	Centre of Patients Rights
36	Dr. Jane Wamai	Hon. National Chair	Kenya Dental Association
37	Dr. Jenipher Ober-Oluoch	Paediatric Dentists	Kenya Dental Association
38	Dr. Abdi Mohamed	Chairman	Kenya Medical Association
39	Peter Matoke	National Chairman	Association of Medical Engineering of Kenya

	Name	Designation	Organization
40	Raphael Gikera	Editor	Association of Kenya Medical Laboratory Scientific Officers
41	Dr. Jenipher Ober-Oluoch	Council Member	Kenya Dental Association
42	Dr. Wambui Waitthaka	National Treasurer	Kenya Medical Pharmacists and Dentists Union
43	Executive Director	Executive Director	FIDA
44	Victoria Agina Ojoo	Regional Officer Manager	Centre for study adolescents
45	Elsie Lardner	Projects Coordinator	Kenya Healthcare Federation
46	Dr. Esther Munyoro	Chairperson	Palliative Care Unit
47	Dr. Asaph Kinyanjui	Education & Research Officer	Kenya Hospices and Palliative Care Association
48	Mr. Valentine Magero	Director	Rams Africa
49	Ms. Eveline Opondo	Programs Director	IPAS
50	Tess Mutua	Advocate	Health Rights Advocacy Forum (HERAF)
51	Ms. Jean Mathenge	Consultant	Protocol Solutions
52	Ms. Adero Leah	Project Manager	Protocol Solutions
53	Prof. Loice W. Gathece	Dean	UoN, Dental School
54	Dr. Okello Agina	Dean	Kenyatta University
55	Prof. Paul Ayuo	Dean	Moi University, Medical School
56	Dr. Caroline Kibosia	Dean	Moi University, Dental School
57	Prof. Wilson Odero	Dean	Maseno University
58	Dr. George Mugenya	Lecturer/ Surgeon	Egerton University
59	Rose Otaye	Resource Person/ Counselor	CMTS EA/OOP ACU
60	Sospeter Oyano	Accountant	Medical Practitioners and Dentists Board
61	Mr. John Kariuki	Senior Licence & Registration Officer	Medical Practitioners and Dentists Board
62	Mr. Duncan Mwai	ICT Officer	Medical Practitioners and Dentists Board
63	Ms. Anne Ondieki	Licence Officer	Medical Practitioners and Dentists Board
64	Ms. Rose Wafukho	Program Officer	Medical Practitioners and Dentists Board
66	Ms. Christine Muriu	Logistics Officer	Medical Practitioners and Dentists Board

