



# KENYA MEDICAL PRACTITIONERS AND DENTISTS COUNCIL

## STRATEGIC PLAN 2023/2024 – 2027/2028



KENYA  
VISION 2030



## *Enhancing Quality Healthcare*

### Vision

Excellence in regulation of training and practice of medicine and dentistry

### Mission

To regulate the training and practice of medicine and dentistry through registration, licensing and inspections for provision of people-centred, quality and ethical healthcare

### Core values

Excellence

Professionalism

Integrity and Impartiality

Collaboration and Partnerships

# Foreword



The Kenya Medical Practitioners and Dentists Council (KMPDC) is a body corporate established under Section 3 of the Medical Practitioners and Dentists Act (CAP. 253, Laws of Kenya), enacted in 1977. Under the Act, the Council is mandated to regulate the training, practice and licensing of medicine, dentistry and oral health, and to regulate healthcare institutions within the Republic of Kenya.

KMPDC plays a significant role in supporting government efforts to provide universal health coverage and the implementation of health-related policies as espoused in the Sustainable Development Goals and the Kenya Vision 2030.

I take note that the operations of KMPDC are thus anchored on the government's Bottom-Up Economic Transformation Agenda (BETA) which form the core pillars of its development priorities the ongoing reforms in the health sector and the Kenya Health Policy 2014-2030. Notably, the Policy aims to ensure that the country attains the highest possible standards of health, and in a manner responsive to the needs of the population.

In this regard, one of the key enablers to achieving high standards of health is the health workforce of which medical and dental practitioners are vital actors. That said, high standards of health care call for well-regulated professions. The KMPDC Strategic Plan 2023/2024-2027/2028 is a vehicle that will drive the KMPDC implementation of strategic objectives and strategies necessary for robust regulation of the practice of medicine and dentistry.

In outlining the desirable strategic direction, this Strategic Plan describes the vision, mission, key focus areas, strategic objectives and strategies that the Council will implement over the next five years. The Plan is structured into three broad key result areas namely: Corporate Governance, Regulation and Enforcement, and Strategic Operations. It is envisaged that during this Plan period, the Council shall continue to engage key stakeholders that have been identified though a stakeholder analysis presented in this Plan. The objective is to achieve maximum involvement in enhancing quality healthcare.

I call upon all stakeholders and the development partners to support and cooperate with us in achieving our goal of quality healthcare for the people of Kenya.

*Nakhumicha S. Wafula*

**Cabinet Secretary**  
Ministry Of Health

# Preface



Attainment of the highest standard of health care for the Kenyan populace is the key goal that transcends all health sector policies and laws. In particular, the Kenya Health Policy 2014-2030, Kenya National e-Health Policy 2016-2030, Sessional Paper No. 2 of 2017, and the Kenya Universal Health Coverage Policy 2020-2030, provide blueprints for the provision of the highest attainable standards of healthcare.

The State Department for Public Health and Professional Standards through KMPDC develops and ensure compliance on professional standards on the registration and licensing of Medical and Dental practitioners, Community Oral Health Officers and medical facilities.

Further, the Council periodically issues practice guidelines on emerging issues for adoption by medical, dental and Community oral health practitioners; health facilities and training institutions. All these are geared towards ensuring that Kenyan citizens and residents receive safe and high-quality healthcare.

This strategic plan provides elaborate strategies that will ensure that the stipulated health standards are maintained across board. By upholding these standards KMPDC not only supports Kenya's healthcare goals and the governments Bottom up Economic Agenda; it also contributes to the broader vision set out by the AU for a healthier African populace by 2063.

I urge all of us to embrace this plan with enthusiasm and determination. Let's harness our collective strength, creativity, and passion to turn our vision of Excellence in regulation of training and practice of medicine and dentistry into reality.

*Mary Muthoni Muriuki, HSC*

**Principal Secretary**

State Department for Public Health and Professional Standards

# About This Plan



The Kenya Medical Practitioners and Dentists Council rolled out its first strategic Plan in the 2003-2008 period. Throughout this period and the subsequent planning periods, the Council has registered considerable success in implementation of programmes that have laid a solid foundation for regulation of medicine and dentistry practice. The *KMPDC Strategic Plan 2023/2024 – 2027/2028* builds on past achievements as well as strategic lessons learnt to forge the strategic direction provided for the upcoming plan period.

Further, the existing environment of high stakeholder expectations and the need to continuously realign KMPDC functions with national government health sector initiatives such as Universal Health Coverage as well as the Kenya Vision 2030 requires a refocus of strategic direction.

I am cognisant of the fact that identified strategic initiatives must be appropriately aligned to the wider government policy agenda, as articulated in the Kenya Vision 2030, the Fourth Medium Term Plan and the Kenya Health Policy 2014-2030. To this end, programmes and targets in this Plan will be delivered under three Key Result Areas: Corporate Governance; Regulation and Enforcement, and Strategic Operations.

To guarantee successful implementation of the identified strategies, the Plan provides the basis for resource mobilisation and utilisation for enhanced accountability and organisational performance. Furthermore, and to facilitate continuity and flexibility in the implementation of the activities set out in this Plan, the Council will develop an annual monitoring process. The monitoring process is critical as a means of taking stock of milestones achieved and any challenges experienced while implementing the Plan.

I commit that, in implementing this Strategic Plan, we shall be guided by our core values of Excellence, Professionalism, Integrity and Impartiality, and Collaboration and Partnership. It is my belief that these values shall propel the Council towards its Vision of “Excellence in regulation of training and practice of medicine and dentistry”. Ultimately, the driving objective is to contribute to the achievement of Universal Health Coverage through quality healthcare.

*Prof. Stanley O. Khaingwa*

**Chairperson**

Kenya Medical Practitioners And Dentists Council

# Acknowledgements



The successful development of this Strategic Plan has been the product of tireless efforts and dedication of key actors and stakeholders. The Kenya Medical Practitioners and Dentists Council wishes to express utmost gratitude to all who provided valuable contribution towards the development of the *KMPDC Strategic Plan 2023/2024 – 2027/2028*.

I wish to appreciate the Government of Kenya through the Ministry of Health for its stewardship of the sector. I would like to appreciate the Council Members for providing support, guidance and oversight in the process, as well as all stakeholders who provided unwavering engagement and input when called upon.

I also wish to recognise Mr. Waweru Kamau (Director, Planning, State Department of Economic Planning), Mr. Stephen Macharia (Director, Planning, Ministry of Health), and Ms. Maureen Kang'ee (Ministry of Health) for the invaluable technical advice and support that was evident throughout the strategic plan development process.

Further, let me acknowledge the Technical Working Group for the KMPDC Strategic Plan 2023-2028 for technical and logistical support provided by members under the able leadership of Dr Stella N. Kanja. The TWG members comprised of Dr Margaret Mbugua, Mr. John K. Mburu, Mr. Simon N. Kiraithe, Adv. Eunice N. Muriithi, Dr Wangechi King'ori, Mr. Duncan Mwai, Mr. Lesinko Nabulu, Mr. James Ndiwa, Mr. Kelvin Lamu, Ms. Lilian M. Maithya, Ms. Esther Mwangangi, Adv. Esther Mutheu, Mr. Maroko Ragwanda, Mr. Christopher Mutua, Ms. Sarah Were, Mr. Austine Odie, Ms. R. Gathoni Mwangi, Mr. Mohamed-Qadar Ahmed, CPA Philip ole Kamwaro, Adv. Michael R. Onyango, Dr John A. Otieno and Ms. Rose Wafukho.

The Council recognises that this document would not have been completed without the individual and collective contribution and support of all those concerned. Asanteni sana.

*Dr David G. Kariuki*

**Chief Executive Officer/ Registrar**  
Kenya Medical Practitioners And Dentists Council



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## Definition of Concepts and Terminologies

<b>Analysis</b>	A deep scrutiny and examination of data and information.
<b>Activity</b>	One of the steps required to complete a process.
<b>Activities</b>	Groups of related tasks.
<b>Baseline</b>	The actual performance level from the most recent reporting period.
<b>Calendar year</b>	The period of 365 (or 366 days in a leap year) running from 1st January to 31st December of the same year
<b>Community Oral Health Officers (COHOs)</b>	Health professionals with a basic qualification of Diploma in Community Oral Health or BSc. Oral Health that are registrable under Cap. 253
<b>Consensus</b>	A group decision or action that all members agree to support.
<b>Core values</b>	Belief, preference, or philosophy held and is a primary determinant of the KMPDC organisation culture and ethical behaviour.
<b>Dental Practitioners/ Dentists</b>	Health professionals with a basic qualification of BDS, DDS or its equivalent that are registrable under Cap. 253.
<b>Digitalisation</b>	Adaptation of a system or process to be operated with the use of computers and the internet.
<b>Digitisation</b>	Conversion of text, pictures, or sound into a digital form that can be processed by a computer.
<b>Environmental assessment</b>	An analysis and evaluation of the strategic environment.
<b>Environment</b>	Comprises factors which affect the operations of KMPDC and have an impact on its success.
<b>Financial year</b>	The period of 365 (or 366 days in a leap year) running from 1st July of one year to 30th June of the next year.
<b>Globalisation</b>	A process of interaction and integration among the public, other organisations, and governments of different nations, driven by international trade and investment, and aided by information technology.

<b>Goal</b>	A long-term result to be achieved on moving toward a vision.
<b>Growth</b>	Measurable increase in input, or output of an organisation, process, or activity.
<b>Healthcare</b>	Organised efforts made by trained and licensed professionals to maintain or restore physical, mental or emotional well-being of an individual or community.
<b>Implementation</b>	A set of management and operational processes required to add to, or modify, an existing strategy, process or operating system, such that the change is accepted.
<b>Input</b>	Materials, information, people, finances, or conditions needed beforehand to achieve objectives.
<b>Key result area</b>	An outline of the organisation's areas of focus. It refers to the general areas of outputs or outcomes for which the organisation is responsible.
<b>Medical Practitioners</b>	Health professionals with a basic qualification of MBChB, MBBS or its equivalent that are registrable under Cap. 253
<b>Medical or Dental Specialists / Sub-specialists</b>	Medical or Dental Practitioners who have additional postgraduate qualifications in the recognised specialties or sub-specialties that are registrable under Cap. 253
<b>Mission Statement</b>	A statement of purpose that provides the rationale for the existence of an organisation.
<b>Objectives</b>	A framework that ensures employees work together, focusing their efforts making contributions that leads them to the desired outcome.
<b>Output</b>	The products, services or immediate results, tangible or intangible, resulting directly from implementation of activities or applying inputs.
<b>Outcome</b>	The intermediate or short-term results generated relative to the objective of the intervention. It describes the actual change in conditions or situation as a result of an intervention.

<b>Performance indicator</b>	A measure, for which data is supplied, that helps quantify the achievement of a desired strategic objective or outcome.
<b>Performance management</b>	The process of ensuring that a set of activities and outputs meets goals in an effective and efficient manner.
<b>Planning</b>	The process of thinking and organising activities to achieve a future goal.
<b>Policy</b>	A regulation adopted by KMPDC.
<b>Practice of medicine/ dentistry</b>	Activities undertaken by any person, health professional or organisation involved in the prescription and/or administration of any procedure or treatment, with the aim of alleviating or preventing physical or mental ill health, restoring functionality or promoting habits that prevent ill health.
<b>Public Organisation</b>	An institution that provides services to the society
<b>Risk</b>	A situation that exposes one to danger
<b>Risk analysis</b>	The identification of risks and the level of consequences.
<b>Scope of practice</b>	Delineates the extent of a practitioner's practice and describes their roles, responsibilities, functions and activities, based on the individual practitioner's credentials, competence, performance and professional suitability.
<b>Stakeholder</b>	Individual person, group, association, or external organisation that has a significant interest in, and/or impact on an organisation.
<b>Strategic direction</b>	A set of processes and competencies required to specify the goals and objectives and develop and manage the initiatives to attain them.

<b>Strategic issue</b>	The fundamental policy choices, critical challenges, gaps, or opportunities that must be addressed or tapped for the organisation to achieve its vision. They are the foundation upon which strategies are developed.
<b>Strategic goals</b>	General qualitative statements on what the organisation is hoping to achieve in the long-term.
<b>Strategic pillars</b>	The key areas of focus.
<b>Strategic objective</b>	A broadly defined outcome that must be achieved to make a strategy succeed
<b>Strategy</b>	Broad abstraction which is descriptive of the means for achieving the desired outcome.
<b>Strategic plan</b>	A long-term, comprehensive document that summarises the outputs of longer-term strategic thinking and planning.
<b>Strategic planning</b>	The process of converting the results of strategic thinking as a set of potentially actionable strategies into an integrated plan of action that can be implemented.
<b>Target</b>	A result to be achieved within a given timeframe through the application of available inputs
<b>Tasks</b>	Actions of work.
<b>Training institutions</b>	In this document, "training institutions" refers to: <ul style="list-style-type: none"> <li>i) all entities that offer training at undergraduate or postgraduate level whose qualification is registrable under CAP. 253 (including universities and colleges);</li> <li>ii) all health facilities that serve as teaching hospitals, internship training centres, collegiate training sites and fellowship training centres, and</li> <li>iii) all entities that serve as CPD Providers.</li> </ul>

## Abbreviations and Acronyms

<b>2023-2028</b>	The period running from 1st July 2023 to 30th June 2028
<b>ADR</b>	Alternative Dispute Resolution
<b>AMCOA</b>	Association of Medical Councils of Africa
<b>BCP</b>	Business Continuity Plan
<b>BDS</b>	Bachelor of Dental Surgery
<b>CANECSA</b>	College of Anaesthesia in East, Central and Southern Africa
<b>CAP. 253</b>	Medical Practitioners and Dentists Act (Chapter 253, Laws of Kenya)
<b>CBO</b>	Community-based organisation
<b>CC&amp;PR Dept.</b>	Corporate Communication and Public Relations Department
<b>CEO</b>	Chief Executive Officer
<b>COG</b>	Council of Governors
<b>COHO</b>	Community Oral Health Officer
<b>COPECSA</b>	College of Pathologists of East, Central and Southern Africa
<b>COSECSA</b>	College of Surgeons in East, Central and Southern Africa
<b>Covid-19</b>	Coronavirus Disease 2019
<b>CPD</b>	Continuous professional development
<b>CRA</b>	Corruption risk assessment
<b>CRM</b>	Customer Relations Management
<b>CUE</b>	Commission for University Education
<b>D&amp;EC</b>	Disciplinary and Ethics Committee
<b>D&amp;ED</b>	Disciplinary and Ethics Department



<b>DCI</b>	Directorate of Criminal Investigations
<b>Dept.</b>	Department
<b>Dir.</b>	Directorate
<b>Dir. C&amp;PE</b>	Compliance and Public Education Directorate
<b>Dir. Corp. Serv.</b>	Corporate Services Directorate
<b>Dir. Int. Audit</b>	Internal Audit Directorate
<b>Dir. Legal Serv.</b>	Corporation Secretary and Legal Services Directorate
<b>Dir. R&amp;L</b>	Registration and Licensing Directorate
<b>Dir. Standards</b>	Standards Directorate
<b>Div.</b>	Division
<b>e-Board</b>	Electronic Board
<b>EAC</b>	East African Community
<b>ECSA</b>	East, Central and Southern Africa
<b>ECSAPACH</b>	East, Central and Southern Africa College of Paediatrics and Child Health
<b>ECSACOG</b>	East, Central and Southern Africa College of Obstetricians and Gynaecologists
<b>ECSACOP</b>	East, Central and Southern Africa College of Physicians
<b>ERP</b>	Enterprise Resource Planning
<b>F&amp;A Dept.</b>	Finance and Accounts Department
<b>FBO</b>	Faith- based organisation
<b>FY</b>	Financial year
<b>GOK</b>	Government of Kenya
<b>HODs</b>	Heads of Directorates, Departments and Divisions
<b>HRH</b>	Human resources for health

<b>HRM&amp;AD</b>	Human Resource Management and Administration Department
<b>HTICD</b>	Health and Training Institutions Compliance Department
<b>IAMRA</b>	International Association of Medical Regulatory Authorities
<b>iCMS</b>	Integrated CPD Management System
<b>ICT</b>	Information and Communication Technology
<b>ICT Dept.</b>	Information and Communication Technology Department
<b>ILF&amp;GPC</b>	Inspections, Licensing, Finance and General-Purpose Committee
<b>ISO</b>	International Organization for Standardization
<b>KMPDC</b>	Kenya Medical Practitioners and Dentists Council
<b>KPIs</b>	Key performance indicators
<b>KRA</b>	Key result area
<b>MChB/ MBBS</b>	Bachelor of Medicine and Bachelor of Surgery
<b>MPDB</b>	Medical Practitioners and Dentists Board
<b>MTEF</b>	Medium Term Expenditure Framework
<b>MTP IV</b>	Fourth Medium Term Plan of Kenya Vision 2030
<b>NGOs</b>	Non-governmental organisations
<b>NIS</b>	National Intelligence Service
<b>NPS</b>	National Police Service
<b>OSH</b>	Occupational safety and health
<b>PAD/ Prof. Ass. Dept.</b>	Professional Assessment Department
<b>PEAD</b>	Public Education and Advocacy Division

<b>PESTEL</b>	Political, Economic, Sociocultural, Technological, Ecological and Legal
<b>PFM Act</b>	Public Finance Management Act
<b>PHC</b>	Primary health care
<b>PPDA</b>	Public Procurement and Disposal Act
<b>PPP</b>	Public-private partnership
<b>PSC</b>	Public Service Commission of Kenya
<b>QA</b>	Quality assurance
<b>Q1/ Q2/ Q3/ Q4</b>	Quarter 1/ Quarter 2/ Quarter 3/ Quarter 4 in a financial year
<b>SCAC</b>	State Corporations Advisory Committee
<b>SCM Dept.</b>	Supply Chain Management Department
<b>SDGs</b>	Sustainable Development Goals
<b>SOPs</b>	Standard operating procedures
<b>SP</b>	Strategic plan
<b>SRC</b>	Salaries and Remuneration Commission
<b>SRQA Dept.</b>	Strategy, Research and Quality Assurance Department
<b>TAR&amp;HRC</b>	Training, Assessment, Registration and Human Resource Committee
<b>TAT</b>	Turnaround time
<b>TORs</b>	Terms of reference
<b>TWG</b>	Technical Working Group
<b>UN</b>	United Nations
<b>UHC</b>	Universal Health Coverage
<b>Y1/ Y2/ Y3/ Y4/ Y5</b>	Financial years 2023/2024, 2024/2025, 2025/2026, 2026/2027 and 2027/2028 respectively

# Executive Summary

The Kenya Medical Practitioners and Dentists Council is a body corporate established under Section 3 of the Medical Practitioners and Dentists Act (CAP. 253) with the mandate to regulate the training and practice of medicine, dentistry and community oral health within the Republic of Kenya. The Council is also mandated by CAP. 253 to regulate operations of health facilities within the country.

The existing environment of high public stakeholder expectations and the need to continuously realign KMPDC functions with national government health sector initiatives such as Universal Health Coverage, Bottom-up Economic Transformation Agenda (BETA) as well as the Kenya Vision 2030 requires a refocus of strategic direction.

KMPDC has so far implemented four strategic plans with the fourth one covering the 2018-2023 period. During the 2018-2023 period, the KMPDC registered significant success in implementation of programmes.

The 2018-2023 plan addressed three key strategic pillars, namely Service Delivery Excellence, Regulation and Enforcement, and Legal Framework. KMPDC implemented 85.2% of the set strategies, with the strategic pillar on Service Delivery Excellence scoring 87.3%, the Regulatory and Enforcement Strategic Pillar scoring 83.8% and the Legal Framework Pillar scoring 84.5%.

Some of the key achievements include: a strengthened regulatory framework through the amendment of subsidiary legislation in line with the 2019 amendment of CAP. 253; standardised undergraduate training and internship training; strengthened specialist training through the collegiate training system, and improved efficiency and accessibility of KMPDC services through automation of processes. Additional achievements include: implementing an e-Board platform for Council and Committee meetings; developing

and implementing the Customer Relationship Management system; improving the work environment, and constructing a staff wellness facility.

The implementation of the previous Strategic Plan was faced with several challenges including: inadequate financial resources and bureaucracy involving the procurement process and approvals hindering the establishment of regional offices; inadequate staffing levels, and insecurity in some parts of the country which made enforcement of the KMPDC mandate difficult among others.

Owing to the success of the 2018-2023 Strategic Plan, and to build on the achievements made so far, the KMPDC strategic direction for the 2023-2028 period will be driven by the Vision of *“Excellence in regulation of training and practice of medicine and dentistry”*, while the Mission shall be *“To regulate the training of medicine and dentistry through registration, licensing and inspections for provision of people-centred quality and ethical healthcare”*. The Strategic Plan shall be guided by the following Core Values: *Excellence, Professionalism, Integrity and Impartiality, and Collaboration and Partnership*.

The Strategic Plan identifies three key strategic issues to be addressed. These are adherence to accepted governance standards, best practices and laws; compliance with set regulations and standards; and efficiency and effectiveness in KMPDC operations. The strategic issues surrounding KMPDC were translated into



*Implementation of this Strategic Plan is estimated to cost KSh. 1,450.75 million during the financial years 2023/2024 to 2027/2028. The largest portion of this will be spent optimising compliance with set standards and regulations with a focus to enhancing quality healthcare. The indicative cost for this is KSh. 721.32 million over the five years*

the strategic goals of enhancing corporate governance to ensure that KMPDC maintains governance structures; optimising compliance with set standards and regulations with a focus to enhancing quality healthcare, and strengthening the integrated support systems and structures for more efficient KMPDC operations. To address the strategic issues and achieve the strategic goals herein, KMPDC has structured this Strategic Plan into three key result areas namely: Corporate Governance, Regulation and Enforcement, and Strategic Operations.

The Strategic Plan is organised into eight chapters each addressing different sections as follows: Chapter One provides an overview of the Strategic Plan, Strategy as an imperative for organisational success, the context of strategic planning, history of KMPDC and the methodology of developing the Strategic Plan.

Chapter Two provides the KMPDC strategic direction, mandate, vision, tagline, mission, strategic goals and core values. Chapter Three highlights the situational analysis and stakeholder analysis, external and internal environment, summary of opportunities and threats, summary of strengths and weaknesses, and an analysis of past performance.

In turn, Chapter Four identifies strategic issues, goals and key result areas while Chapter Five details the strategic objectives and strategies. Chapter Six contains the implementation, coordination and risk framework that details the implementation and action plan.

Chapter Seven details the resource requirements and mobilisation strategies while Chapter Eight highlights the monitoring, evaluation and reporting framework.

Implementation of this Strategic Plan is estimated to cost KSh. 1,450.75 million during the financial years 2023/2024 to 2027/2028. The largest portion of this will be spent optimising compliance with set standards and regulations with a focus to enhancing quality healthcare. The indicative cost for this is KSh. 721.32 million over the five years.

The other major component of the estimated budget will be in strategic operations that entails strengthen the integrated support systems and structures for more efficient KMPDC operations with focus on responsiveness of services delivered. This is projected to cost KSh. 594.33 million spread over the five years.

It is noted that the bulk of the funding shall be provided by The National Treasury. The Council shall also engage other stakeholders, the private sector and development partners to support some of the programmes in the Plan. At the same time, efforts shall be made to improve the efficiency in resource utilisation, minimising duplication of efforts, and optimising opportunities for inter-agency linkages in programme implementation during the Strategic Plan period.



## *Chapter One:*

# *Introduction*

This chapter describes the importance of strategic planning for Kenya Medical Practitioners and Dentists Council (KMPDC), the context of strategic planning, history of KMPDC and the methodology used in developing the KMPDC Strategic Plan 2023/2024-2027/2028.

## 1.1. Strategy as an imperative for organisational success

This Strategic Plan will serve as a roadmap to guide KMPDC in achieving set goals, adapting to changing environment, and maintaining a competitive edge. This Strategic Plan also prioritises initiatives based on the potential to contribute to the success of KMPDC. Adopting this strategic approach will enable KMPDC to anticipate changes, identify trends, and adjust its plans accordingly. This Strategic Plan also entails a risk assessment and management framework to enable KMPDC to identify potential risks and develop mitigation plans to minimise negative impacts. This Strategic Plan demonstrates the commitment by KMPDC to achieve identified strategic objectives and ultimately the given mandate.

## 1.2. The context of strategic planning

The dynamic healthcare landscape calls for a regulatory environment that is responsive to emerging realities. Health regulatory bodies exist to protect healthcare consumers from health risks and to standardise and supervise healthcare. In this regard, there is need to ensure that health professionals and facilities comply with health policies to support safe and affordable healthcare. In addition, regulation plays a key role in ensuring high safety standards necessary for quality healthcare.

### 1.2.1. United Nations 2030 Agenda for Sustainable Development

The United Nations (UN) 2030 Agenda recognises that global health threats, among other factors, have the capacity to reverse gains made in socioeconomic development. For example, due to globalisation, there is an increased risk of the spread of infectious diseases leading to pandemics that cause massive disruptions in health service delivery as well as healthcare education and training systems. The UN 2030 Agenda further recognises that achieving Universal Health Coverage (UHC) is instrumental in promoting

physical, mental and social wellbeing, and extending life expectancy.

Attainment of UHC largely depends on the availability of a skilled, equipped and adequately supported health workforce. To this end, existing health workforce training programmes should produce adequate and quality health workforce with the right skills mix and competencies that meet local and international job market requirements. That said, there is need to align training programmes to meet UHC targets and to address emerging issues. In addition, there is need to harmonise training and education curriculum (technical, soft skills and professional ethics), licensure examinations, and eligibility requirements.

In supporting the UN 2030 Agenda, KMPDC has incorporated training in primary health care, including preventive and promotive health care, in both the core curricula for undergraduate training and internship training guidelines. The objective is to strengthen health systems and improve preparedness for complex health emergencies. Further, it is envisaged that Continuous Professional Development (CPD) Providers shall include preventive and promotive health care in their training activities. Furthermore, KMPDC facilitates increase in the density of skilled health workers through recognition of new training institutions and expansion of specialist training through the collegiate system.

### 1.2.2. African Union Agenda 2063

The African Union (AU) Agenda 2063 is a strategic blueprint for the future of the African continent, emphasising transformative and sustainable growth, integrated development, and a shared vision of an inclusive African society. The AU Agenda 2063 recognises that good health is fundamental for socio-economic development and aspires to expand access to quality healthcare services for all Africans.

Aligning with the aspiration of AU Agenda 2063, KMPDC shall ensure that the regulated cadres of medical practitioners, dentists and Community Oral Health Officers (COHOs) in Kenya meet stipulated professional



standards, ensuring that Kenyan citizens and residents receive safe and high-quality healthcare.

By upholding these standards and promoting CPD, KMPDC not only supports Kenya's healthcare goals; it also contributes to the broader vision set out by the AU for a healthier African populace by 2063.

### 1.2.3. East African Community Vision 2050

The East African Community (EAC) Vision 2050 recognises health as one of the key enablers that will drive the attainment of sustainable development in the EAC partner states and improve their position continentally and globally. Notably, EAC Partner States seek to enhance collaboration and cooperation to strengthen health systems through increased health financing, and the recruitment, development, training and retention of the health workforce.

The EAC Vision 2050 lays emphasis on harmonising and strengthening health and health-related legislation, regulations, policies, strategies, and plans, among others. Further, the EAC Vision 2050, which amalgamates and harmonises the Partner States' vision, aligns with the AU Agenda 2063, the UN Agenda 2030 and the Sustainable Development Goals (SDGs).

To support efforts towards the achievement of EAC Vision 2050, KMPDC purposes to review the existing legal framework to provide for the direct registration and recognition of Kenya-trained foreign nationals, and to participate in the process of harmonising the standards of undergraduate and postgraduate (specialist and sub-specialist) medical and dental training programmes within EAC.

### 1.2.4. Constitution of Kenya, 2010

The right to health is a fundamental human right guaranteed in the Constitution of Kenya. Article 43 (1) (a) of the Constitution provides that every person has the right to the highest attainable standard of health, which includes the right to healthcare services, including reproductive healthcare.

Article 43 (2) further provides that a person shall not be denied emergency medical treatment. The realisation of the right to the highest attainable standard of health care calls for the concerted involvement of all the key stakeholders in the health sector.

The devolution of health services, as stipulated in the Fourth Schedule of the Constitution, is a crucial step to ensure that the right to health is attained. In line with the Fourth Schedule, health service delivery is shared by both the National Government and the forty-seven (47) county governments. Specifically, the national government is responsible for policy making, regulation and setting standards, and key cross-cutting preventive services, like immunisation and communicable disease control, and managing the national referral hospitals.

On the other hand, county governments are responsible for: Developing county health services, including the management of health facilities and pharmacies at the county level, and ambulance services; Promotion of primary health care; Provision of community health services; Provision of health education; Implementation of preventative health programmes including vector control, and Reproductive health services.

KMPDC recognises that one of the key enablers of the "highest attainable standard of health" is health regulation. The principal goal of health regulation is to ensure that the highest quality of healthcare is provided to the public, which is well encapsulated in the KMPDC tagline "*Enhancing quality healthcare*".

To this end, during this strategic planning period, KMPDC, in collaboration with key stakeholders, will endeavour to:

- Develop and implement the ethical guidelines for health facilities;
- Develop and implement standards for health facilities;
- Review the Medical Practitioners and Dentists (Professional Fees) Rules, 2016;
- Develop and implement operational fee guidelines for health facilities.

### 1.2.5. Kenya Vision 2030, Bottom-up Economic Transformation Agenda and Fourth Medium-Term Plan

The Kenya Vision 2030 aspires for the overall improvement of the livelihoods of Kenyans. As part of this, the country aims to provide an efficient, high-quality healthcare system of the best standard. The Vision has now entered the Fourth Medium-Term Plan (MTP IV) which runs from 2023 to 2027.

In cognisance of the fact that a healthy nation is a wealthy nation, the government came up with five sectors under the Bottom-Up Economic Transformation Agenda (BETA) which form the core pillars of its development priorities. The pillars are Agriculture; Healthcare; Housing and settlement; Micro, small and medium enterprise economy; and Digital superhighway and creative economy. The BETA identified key areas in the health sector to aid in the achievement of universal health coverage.

The objectives are to:

- Address the issue of health commodity security to ensure access, affordability, transparency and accountability;
- Digitise health services to increase access, portability of services and health information management;
- Enhance health financing, and
- Prioritise healthcare workers recruitment and deployment across the country to bridge the gap according to the WHO recommendations of 23 essential healthcare workers per 10,000.

Given the foregoing, and working in collaboration with National and County governments and other health regulatory bodies, KMPDC commits to continue supporting government efforts towards universal health coverage through enhancing quality health service delivery by ensuring that:

- The core curricula for the training of medical, dental, and oral health practitioners incorporate aspects of primary health care, including preventive and promotive health care, leadership, and management in health;
- Training in primary health care is emphasised during the mandatory internship training for medical, dental, and oral health graduates;
- Persons registered and licensed to practice medicine, dentistry and oral health under CAP. 253 are appropriately trained and suitably qualified;
- Registered and licensed health facilities meet the required standards;
- Appropriate supportive supervision is offered to registered and licensed practitioners and health facilities to ensure adherence to the expected standards;
- Appropriate disciplinary measures are taken against practitioners and health facilities that do not meet the expected standards or exhibit professional misconduct, and
- There is continuous engagement with the public in developing and disseminating policies and guidelines.



*In cognisance of the fact that are healthy nation is a wealthy nation, the government came up with five sectors under the Bottom-Up Economic Transformation Agenda (BETA) which form the core pillars of its development priorities. The pillars are Agriculture; Healthcare; Housing and settlement; Micro, small and medium enterprise economy; and Digital superhighway and creative economy*

### 1.2.6. Health Sector Policies and Laws

The attainment of the highest standard of health care for the Kenyan populace is the key goal that transcends all health sector policies and laws. In particular, the Kenya Health Policy 2014-2030, Kenya National e-Health Policy 2016-2030, Sessional Paper No. 2 of 2017, and the Kenya Universal Health Coverage Policy 2020-2030, provide blueprints for the provision of the highest attainable standards of healthcare.

The Health Act, 2017 at Section 15 (1) provides the functions of the National Government ministry responsible for health, which include:

- ⦿ Develop, through regulatory bodies, standards of training and institutions providing education to meet the needs of service delivery;
- ⦿ Set guidelines for the designation of referral health facilities;
- ⦿ Through respective regulatory bodies to develop and ensure compliance on professional standards on the registration and licensing of individuals in the health sector, and
- ⦿ Coordinate the development of standards for quality health service delivery, and provide for accreditation of health services, among others,

It is noted that the aforementioned functions fall under the mandate of the KMPDC as a regulatory body.

Recognising that regulation, through developing, implementing, and reviewing standards and guidelines, plays a critical role in quality assurance, KMPDC seeks to:

- ⦿ Develop standards, guidelines and legislation that govern the adoption and use of e-Health by medical, dental and community oral health professionals and health facilities;
- ⦿ Incorporate e-Health in the core curricula used for pre-service and in-service training of medical, dental and community oral

health professionals;

- ⦿ Introduce common pre-registration examination for medical, dental and community oral health graduates;
- ⦿ Develop, implement and continually review scopes of practice for medical, dental and oral health practitioners, and
- ⦿ Periodically issue practice guidelines on emerging issues for adoption by medical, dental and oral health practitioners; health facilities and training institutions.

### 1.2.7. International affiliations

KMPDC is a member of the International Association of Medical Regulatory Authorities (IAMRA) whose purpose is to promote effective medical regulation worldwide by guiding the medical profession and supporting best practice, innovation, collaboration, and knowledge sharing in the interest of public safety. KMPDC aligns with the vision of IAMRA of ensuring that “everyone around the world is treated and cared for by safe and competent doctors”.

KMPDC, as a founder member of the Association of Medical Councils of Africa (AMCOA), encourages other peer regulators in Africa to contribute to respective country attainment of the AU Agenda 2063 aspiration, through:

- ⦿ Lobbying for harmonisation of standards of training for health professionals in the continent, through harmonised core curricula and standards for training institutions;
- ⦿ Lobbying for reciprocity of recognition of registered healthcare workers (HCWs) migrating to other countries within the continent;
- ⦿ Lobbying of the reciprocity of recognition of CPD programmes and activities within the continent;
- ⦿ Sharing of information on professional conduct of registered health professionals; and
- ⦿ Lobbying for harmonisation of standards for classification of health facilities within the continent.

### 1.3. History of Kenya Medical Practitioners and Dentists Council

The Kenya Medical Practitioners and Dentists Council, previously known as the *Medical Practitioners and Dentists Board (MPDB)*, was established through the enactment in 1977 of the Medical Practitioners and Dentists Act, Chapter 253 Laws of Kenya.

CAP. 253 was enacted to make provisions for the registration of medical practitioners and dentists and for purposes connected therewith.

With time, the KMPDC mandate was expanded, as provided in the 2019 amendment of CAP. 253, to include the:

- ⦿ Registration and licensing of health institutions;
- ⦿ Regulation of training, licensing, and practice of Community Oral Health Officers (COHOs), and
- ⦿ Power to take disciplinary action for any form of misconduct by a health institution.

Notably, the amended Act also renamed MPDB to KMPDC and reduced its membership from eighteen (18) to nine (9) members, comprising of:

- ⦿ A chairperson appointed by the President and who is a specialist medical or dental practitioner of good standing and has at least ten years' experience, five of which shall be in a managerial position;
- ⦿ The Director General for Health or a designated representative;
- ⦿ Four persons appointed by the Cabinet Secretary, including: one person who is a representative of universities in Kenya which have the power to grant a qualification which is registerable under this Act; one person who is a representative of the Kenya Medical Association; one person who is a representative of Kenya Dental Association, and one person who is a representative of oral health practitioners, and

- ⦿ Three persons appointed by the Cabinet Secretary, including: one person nominated by Kenya National Commission on Human Rights, one person who is a representative of the private sector in health, and one person with knowledge and expertise in finance or audit.

In addition, the Act provided that the Chief Executive Officer, who would be the Registrar, an ex officio member and the secretary to the Council. Further to enumerating the specific functions of KMPDC and the Council Committees, the 2019 amendment to the Act gave the Council the authority to hire technical, professional and other staff for the proper discharge of its functions.

In March 2020, KMPDC was categorised as a 'Regulatory State Corporation' under Category PC 6A by the State Corporations Advisory Committee (SCAC). Subsequently, the KMPDC underwent structural reorganisation to align the organisation structure with the given mandate and functions.

### 1.4. Methodology of developing the Strategic Plan

#### 1.4.1. Initiation

The process commenced through appointment of a cross-functional team, involving representatives from key departments. This team brought together a range of perspectives to ensure a comprehensive approach, as the scope and objectives of the strategic plan were established during this phase, outlining the areas of focus and the desired outcomes. Key stakeholders were identified and engaged to ensure their input throughout the process.

A review of the previous strategic plan was conducted to assess its effectiveness and achievements. This assessment provided valuable insights into what worked and what needed improvement.





*KMPDC revisited its core identity, which included updating and/or refining the vision, mission, and core values based on feedback from internal stakeholders and their alignment with the organisation's mandate and customer expectations. KMPDC identified key result areas (KRAs) that represented the critical domains in which it intends to achieve significant outcomes during the strategic planning period*

Additionally, a comprehensive situational analysis was performed, considering both the internal strengths and weaknesses of the organisation and the external opportunities and threats in the environment. The vision, mission, and core values of KMPDC were also reviewed to ensure alignment with the current strategic direction.

#### **1.4.2. Development**

Based on the insights gained during the review, KMPDC revisited its core identity, which included updating and/or refining the vision, mission, and core values based on feedback from internal stakeholders and their alignment with the organisation's mandate and customer expectations. Further, KMPDC identified key result areas (KRAs) that represented the critical domains in which it intends to achieve significant outcomes during the strategic planning period.

Furthermore, for each key result area, specific strategic objectives were formulated. The objectives provide actionable direction for KMPDC to work towards. Strategies were then developed to guide the execution of the objectives. These strategies were designed to be Specific, Measurable, Achievable, Relevant, and Time-bound (SMART).

#### **1.4.3. Validation**

Active engagement with both internal and external stakeholders was undertaken through collection of feedback from various stakeholders, including employees, partners,

customers, and other regulatory bodies. This engagement helped ensure that the Strategic Plan aligned with the expectations and needs of key stakeholders. The Strategic Plan was shared with stakeholders for input and discussion, fostering alignment and consensus on the proposed strategic direction.

A feasibility assessment was carried out to determine the practicality of implementing the proposed strategies. This assessment involved evaluating the organisation's available resources, capabilities, and potential challenges. The validated and refined components of the Strategic Plan were compiled into a comprehensive document that effectively communicates KMPDC vision, mission, core values, key result areas, objectives, and strategies.

#### **1.4.4. Finalisation**

In the finalisation stage, the Strategic Plan was presented to the Council for approval and endorsement. The Council reviewed the Plan to ensure its alignment with overall goals and mission.

To execute the approved Plan, an action plan, assigning responsibilities for executing each strategy, has been developed. In addition, a monitoring and evaluation framework has been established to track progress toward achieving the strategic objectives. It is envisaged that periodic reviews shall be conducted to assess performance, identify challenges, and make necessary adjustments.

*Chapter Two:*  
*Strategic Direction*

This chapter covers the KMPDC mandate, vision, mission, strategic mission, core values, and quality statement.

## 2.1. Mandate

Broadly stated, the mandate of KMPDC is to regulate the training and practice of medicine, dentistry and oral health, and to regulate the operations of healthcare institutions within the Republic of Kenya. Section 4 of CAP. 253 provides for specific functions of KMPDC, which are to:

- ⦿ Establish and maintain uniform norms and standards on the learning of medicine and dentistry in Kenya;
- ⦿ Approve and register medical and dental schools for training of medical and dental practitioners;
- ⦿ Prescribe the minimum educational entry requirements for persons wishing to be trained as medical and dental practitioners;
- ⦿ Maintain a record of medical and dental students;
- ⦿ Administer internship qualifying examinations, preregistration examinations, and peer reviews as deemed appropriate by the Council;
- ⦿ Inspect and accredit new and existing institutions for medical and dental internship training in Kenya;
- ⦿ License eligible medical and dental interns;
- ⦿ Determine and set a framework for professional practice of medical and dental practitioners;
- ⦿ Register eligible medical and dental practitioners;
- ⦿ Regulate the conduct of registered medical and dental practitioners and take such disciplinary measures for any form of professional misconduct;
- ⦿ Register and license health institutions;
- ⦿ Carry out inspection of health institutions;
- ⦿ Regulate health institutions and take disciplinary action for any form of misconduct by a health institution;
- ⦿ Accredit continuous professional development providers;

- ⦿ Issue certificate of status to medical and dental practitioners and health institutions, and
- ⦿ Do all such other things necessary for the attainment of all or any part of its functions.

## 2.2. Vision

The KMPDC vision for the 2023/24-2027/28 strategic planning period is: **Excellence in regulation of training and practice of medicine and dentistry**

## 2.3. Tagline

It is noted that the tagline, necessary to rallying key actors to the vision during the 2023/24-2027/28 strategic planning period, is: **Enhancing quality healthcare**

## 2.4. Mission

The KMPDC mission for this strategic planning period is: **To regulate the training and practice of medicine and dentistry through registration, licensing, and inspections for provision of people-centred, quality and ethical healthcare**

## 2.5. Strategic Goals

Strategic direction is anchored on a clear understanding of the strategic issues surrounding KMPDC. The strategic issues have been translated into three strategic goals as follows:

- ⦿ Enhance corporate governance to ensure that KMPDC adheres to accepted standards, best practices and laws;
- ⦿ Optimise compliance with set standards and regulations with a focus to enhancing quality healthcare; and
- ⦿ Strengthen the integrated support systems and structures for more efficient KMPDC operations with focus on responsive services delivery.



Council members led by the Chair, Prof. Stanley Khainga, pose for a photo with the CEO, Dr. David Kariuki and the Strategic Plan Technical Working Group during a retreat to review development of the 2023-2028 Strategic Plan in June 2023



## 2.6. Core values

KMPDC core values are:

### Excellence:

KMPDC is committed to exceptional performance in the execution of set mandate and functions;

### Professionalism:

KMPDC is committed to providing services of the highest attainable standard by instilling required knowledge, skills, values, and attitudes to undertake set mandate;

### Integrity and Impartiality:

KMPDC shall maintain high standards of honesty, accountability, transparency, fairness and just treatment of all persons without favouritism or discrimination to foster trust with all stakeholders; and

### Collaboration and Partnerships:

KMPDC commits to work jointly with key stakeholders in the execution of its mandate.

## 2.7. Quality Policy Statement

KMPDC will at all times protect the well-being of patients, healthcare professionals, and the public by maintaining a culture of regulatory excellence. KMPDC will also uphold the highest ethical standards, foster professionalism, and adhere to internationally recognised best practices.



*The KMPDC Vision*  
**Excellence in regulation  
of training and practice  
of medicine and dentistry**



*The KMPDC Mission*  
**To regulate the training  
and practice of medicine  
and dentistry through  
registration, licensing,  
and inspections for provision  
of people-centred, quality  
and ethical healthcare**



*The KMPDC Tagline*  
**Enhancing quality healthcare**

*Chapter Three:*

# *Situational Analysis and Stakeholder Analysis*

This chapter provides KMPDC situational and stakeholder analysis, and highlights the achievements and lessons learnt during the previous strategic planning period.

## 3.1. Situational Analysis

A situational analysis, which provides a solid foundation for strategic planning, was conducted to assess the internal and external factors that may affect KMPDC in the execution of its mandate. The analysis involved examination of the KMPDC internal and external environments.

### 3.1.1. External Environment

KMPDC acknowledges that the external environment is complex and dynamic, with various interrelated factors that can affect its. An analysis of the external environment has enabled KMPDC to identify opportunities for growth, manage risks, and to formulate strategies that align with prevailing conditions.

In addition, KMPDC recognises that the external environment is subject to change. In this regard, KMPDC will regularly monitor the environment and adapt where necessary, to ensure sustained success.



*KMPDC acknowledges that the external environment is complex and dynamic, with various interrelated factors that can affect its. An analysis of the external environment has enabled KMPDC to identify opportunities for growth, manage risks, and to formulate strategies that align with prevailing conditions*

#### 3.1.1.1. Macroenvironment

The KMPDC macroenvironment is characterised by Political, Economic, Social, Technological, Ecological, and Legal factors. An analysis of these factors is summarised in section 3.1.2.

#### 3.1.1.2. Microenvironment

KMPDC has analysed the immediate operating environment necessary for the achievement of identified strategic objectives. The key variables in this analysis include customer profiles, the regulatory framework, stakeholder interests among others. From this analysis, KMPDC has identified opportunities and threats for this strategic planning period.

### 3.1.2. Summary of Opportunities and Threats

Table 3.1 outlines the opportunities and threats facing KMPDC under Political, Economic, Social, Technological, Ecological and Legal (PESTEL) factors.

Table 3.1: Summary of Opportunities and Threats

CATEGORY	OPPORTUNITIES	THREATS
<b>Political</b>	<p>Goodwill and support from Parliamentary Committees on Health.</p> <p>Decentralisation will enable KMPDC take services closer to the people.</p> <p>Alignment of operations with the manifestos of the ruling party.</p>	<p>Political instability in some of the regional member countries leads to displacement of persons with the refugees straining the health system in the neighbouring countries.</p> <p>Conflict of roles between the KMPDC roles and those of the county governments including county governments demanding for single business permits from health facilities registered and licensed by KMPDC.</p> <p>Political interference such as political leaders inciting community members against KMPDC officers, especially in enforcing compliance by healthcare facilities.</p>
<b>Economic</b>	<p>Continued funding from the government.</p> <p>Development Partners willing to collaborate and support KMPDC activities.</p> <p>Regulating the unregulated cadres.</p>	<p>Directives by the government to cut down on spending, as a result of budget cuts, affects the achievement of KMPDC goals and objectives.</p> <p>Delayed release of funds by the government affects the implementation of planned activities by KMPDC.</p> <p>Directive by the government that all public health facilities should not pay for their operating licences hence loss of revenue to KMPDC.</p> <p>Restricted movement of persons and goods due to Covid-19 led to economic downturn hence closure of health facilities.</p> <p>The fees charged by KMPDC depreciates due to inflation.</p>
<b>Socio Cultural</b>	<p>Partnerships and Collaborations with other Government agencies with similar mandates to advance social cultural issues.</p>	<p>Cultural bias leads to the perception that some gender cannot hold authority or perform certain duties leading to violence against KMPDC staff.</p> <p>Accessibility of some facilities especially in insecurity prone areas makes it difficult for enforcement of regulations.</p> <p>Alternative or traditional therapists who peddle unproven remedies.</p>

CATEGORY	OPPORTUNITIES	THREATS
<b>Technological</b>	<p>Harness innovation and technological advancements.</p> <p>The digital media provides a wide platform for creating stakeholder awareness on regulation matters.</p>	<p>Cyber-crime and information systems security concerns.</p> <p>Innovative technologies that may disrupt healthcare provision and regulatory function.</p>
<b>Ecological</b>	<p>KMPDC to ensure that the healthcare providers develop policies and procedures for safe disposal of obsolete medical and non-medical equipment and supplies.</p> <p>Health professionals need to be prepared to deal with the negative effects of climate change on the health of the populations served.</p>	<p>Climate change is the biggest health threat to humanity as it affects the social and environmental determinants of health hampering access to clean air, safe drinking water, sufficient food and secure shelter.</p> <p>Local, regional, or global biosecurity breaches that result in crisis which have the potential to compromise quality of healthcare by imposing a strain in the health care systems (case in point SARS-CoV-2).</p>
<b>Legal</b>	<p>Robust country legal framework that provides opportunities for amendments and revision of laws to address emerging issues.</p>	<p>Overlapping roles between KMPDC and other regulatory bodies.</p> <p>Lack of a framework for the regulation of some healthcare cadres.</p> <p>Lack of a framework for KMPDC to carry out background checks on persons seeking registration or licensure under CAP. 253 who may later pose a threat to national security.</p> <p>Unregulated cadres posing a challenge to achievement of quality healthcare.</p>

### 3.1.3. Internal Environment

Analysis of the internal environment has been summarised under: Governance and administrative structures; Internal business processes, and Resources and capabilities.

#### 3.1.3.1. Governance and Administrative Structures

KMPDC has put in place both governance and administrative structures to ensure smooth operations and continuity of service. The objective is to ensure that a culture of productivity and quality performance is embedded in KMPDC.

## Legislative Structures

KMPDC is a body corporate established under Section 3 of the Medical Practitioners and Dentists Act, CAP. 253, Laws of Kenya. The mandate of KMPDC is to regulate the training and practice of medicine, dentistry and oral health, and to regulate operations of health institutions within the Republic of Kenya. Procedures for the implementation of the provisions of the establishing Act are laid out in subsidiary legislation, including:

- ⦿ Medical Practitioners and Dentists (Inquiry and Disciplinary Proceedings) (Procedure) Rules, 2022;
- ⦿ Medical Practitioners and Dentists (Inspection and Licensing) Rules, 2022;
- ⦿ Medical Practitioners and Dentists (Training, Assessment and Registration) Rules, 2022;
- ⦿ Medical Practitioners and Dentists (Mental Health Treatment and Rehabilitation Institutions) Rules, 2022;
- ⦿ Medical Practitioners and Dentists (Medical Institutions) (Amendment) Rules, 2021;
- ⦿ Medical Practitioners and Dentists (Forms and Fees) (Amendment) Rules, 2021;
- ⦿ Medical Practitioners and Dentists (Referral of Patients Abroad) Rules, 2017;
- ⦿ Medical Practitioners and Dentists (Professional Fees) Rules, 2016;
- ⦿ Medical Practitioners and Dentists (Advertising) Rules, 2016;
- ⦿ Medical Practitioners and Dentists (Medical Camp) Rules, 2016;
- ⦿ Medical Practitioners and Dentists (Fitness to Practice) Rules, 2016; and
- ⦿ The Public Health (Checklist Forms) Rules, 2016.

In line with its mandate of establishing and maintaining uniform standards of training and practice, KMPDC has developed various policy documents and guidelines. These create uniformity and preserve professionalism in the practice of medicine and dentistry. Some of the guiding documents include:

- ⦿ The Code of Professional Conduct and Discipline, 6th Edition;
- ⦿ The Kenya National Patients' Rights Charter, 2013;
- ⦿ National Training and Quality Assurance Standards for Medical Schools and Teaching Hospitals in Kenya;
- ⦿ National Training and Quality Assurance Standards for Dental Schools and Teaching Hospitals in Kenya;
- ⦿ Bachelor of Medicine and Bachelor of Surgery (MBChB) Core Curriculum;
- ⦿ Bachelor of Dental Surgery (BDS) Core Curriculum;
- ⦿ National Guidelines for Internship Training of Medical and Dental Officer Interns;
- ⦿ National Guidelines and Logbook for Medical Officer Interns;
- ⦿ National Guidelines and Logbook for Dental Officer Interns;
- ⦿ National Guidelines for inspection and accreditation of Medical Specialist Training Institutions and Teaching Hospitals; and
- ⦿ Continuous Professional Development (CPD) Guidelines.

KMPDC equally has internal standards operating procedures and policies that guide day-to-day activities. These procedures and policies eliminate bias and subjectivity of the personnel involved in the realisation of KMPDC mandate. KMPDC has SOPs and internal policy documents on assessment, registration, licensing, inspections and disciplinary processes, among others.

## Governance Structures

The policy and oversight management of KMPDC is vested with the Council. The Council operates through standing committees namely Training, Assessment, Registration and Human Resource Committee (TAR&HRC); Disciplinary and Ethics Committee (D&EC); Inspections, Licensing, Finance and General-Purpose Committee (ILF&GPC), and Audit and Risk Committee (ARC).

KMPDC policy decisions and day-to-day operations are handled by the CEO through respective heads of Directorates and Departments. In this regard, KMPDC is organised into six (6) Directorates and two (2) Departments reporting to the CEO as indicated in the organogram shown in Figure 1. This organogram has taken care of staff requirements necessary to drive KMPDC in the aspired strategic direction.

### 3.1.3.2. Internal Business Processes

KMPDC has internal core and supporting business processes. Notably, the core business processes are as stipulated in the Act. The processes are summarised as follows:

- Regulation of training of medicine and dentistry in Kenya by establishing and maintaining uniform norms and standards of learning and through the approval and registration of medical and dental schools, internship training centres and CPD providers;
- Registration and licensing of eligible interns, medical and dental practitioners, community oral health officers and health institutions;

1. Prof. Stanley Khainga
2. Dr. David Kariuki
3. Dr. Patrick Amoth. EBS
4. Dr. Rose Jepchumba Kosgei
5. Dr. Timothy Theuri
6. Prof. Stephen Oduor Ogendo
7. Dr. Elizabeth Gitau-Maina
8. Hon. Sara Talaso Bonaya
9. Mr. Ashford Kathaara
10. Mr. Kiptanui Musa
11. Mr. Livingstone Bumbe

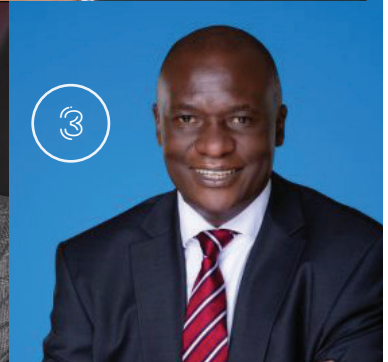
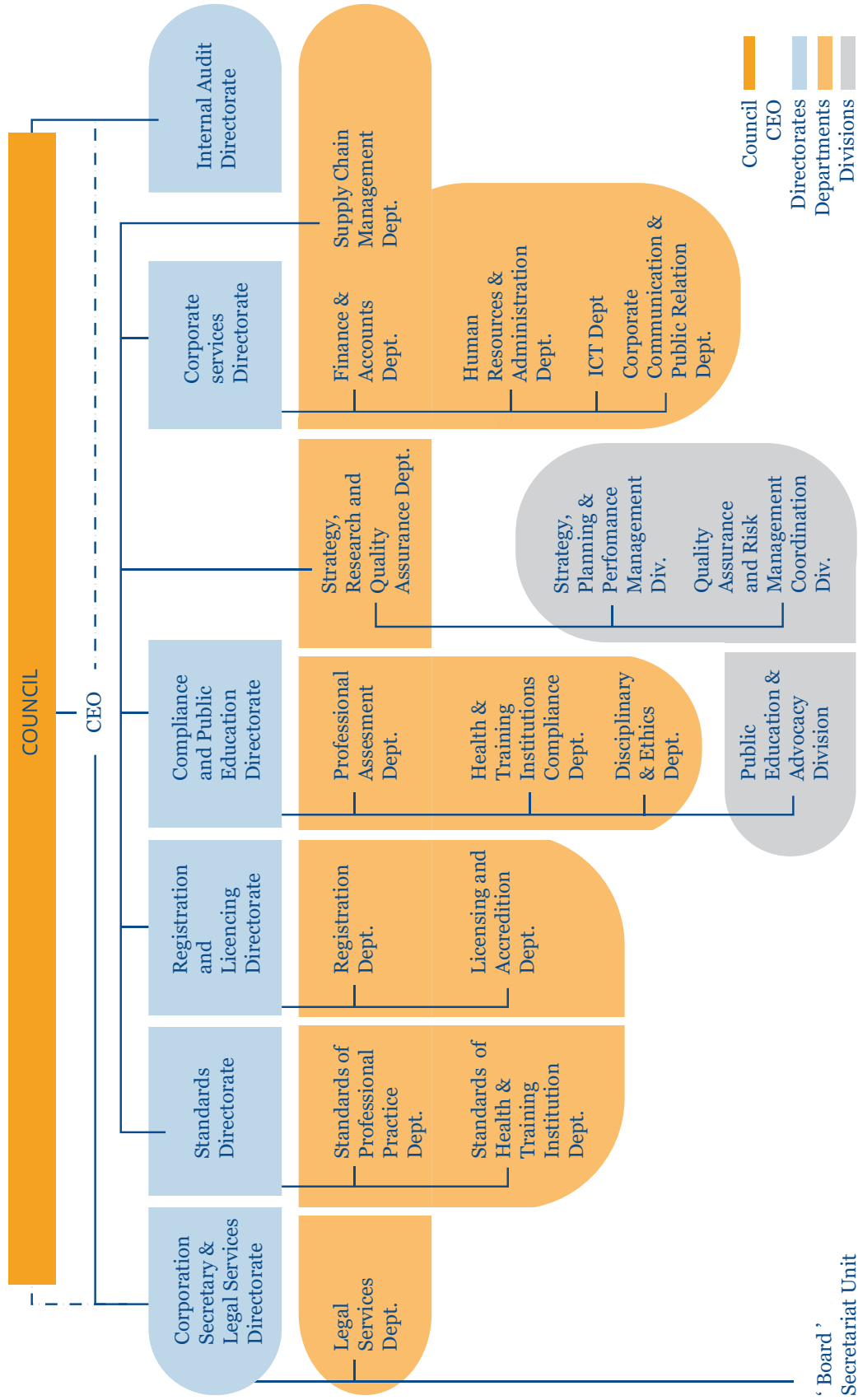




Figure 3.1: KMPDC Organisation structure



- ⦿ Establishment of a framework for professional practice of medical and dental practitioners, community oral health officers and health institutions and enforcement of disciplinary measures for any form of professional misconduct or disrepute, and
- ⦿ Ensuring compliance with the set standards for training, professional practice and regulations through inspections, spot checks and issuance certificate of status.

To execute the internal business processes effectively, KMPDC management is structured into six (6) directorates and two (2) departments that report directly to the CEO, as shown in Figure 1. The Directorates and Departments carry out both core and support business processes as follows:

#### **Standards Directorate**

Responsible for establishing and maintaining uniform norms and standards on the learning of medicine and dentistry; prescribing the minimum educational entry requirements for persons wishing to be trained as medical, dental and community oral health practitioners, and determining and setting a framework for professional practice of medical, dental and community oral health practitioners in Kenya.

#### **Registration and Licensing Directorate**

Undertakes the registration and licensing of eligible medical, dental and community oral health practitioners and interns, and health institutions.

#### **Compliance and Public Education Directorate**

Responsible for approval medical and dental schools for training of medical, dental and community oral health practitioners; conduct of internship qualifying examinations, preregistration examinations, and peer reviews as deemed appropriate by the Council; inspection and accreditation of new and existing institutions for medical, dental and community oral health internship training in Kenya; regulation of the conduct of registered medical, dental and community oral health

practitioners and taking such disciplinary measures for any form of professional misconduct; carrying out inspection of health institutions, and regulating health institutions and taking disciplinary action for any form of misconduct by a health institution.

#### **Corporation Secretary and Legal Services Directorate**

Responsible for professionalising the services of the Council in accordance with the law by giving guidance to the Council on its duties and responsibilities and on matters of governance; coordinating timely preparation and circulation of Council and Committee papers, and ensuring that Council Members are aware of all relevant laws affecting the organisation. The office is also responsible for all legal matters affecting KMPDC.

#### **Corporate Services Directorate**

Responsible for formulating and coordinating the implementation of sound Financial, Human Resource and Administration, Information Communication and Technology, and Corporate Communication policies and strategies for effective management of the Council resources and enhancement of the Council image.

#### **Internal Audit Directorate**

Provides the Council with independent, objective assurance and consulting services to add value to and improve operations. The directorate also helps the Council to accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of its risk management, control and governance processes.

#### **Strategy, Research and Quality Assurance Department**

Provides advisory functions to the top management and ensure that KMPDC adopts and implements effective strategies in planning, resource, performance management, quality assurance and risk management as well as ensuring adherence to statutory and regulatory requirements.



*KMPDC equally has internal standards operating procedures and policies that guide day-to-day activities. These procedures and policies eliminate bias and subjectivity of the personnel involved in the realisation of KMPDC mandate. KMPDC has SOPs and internal policy documents on assessment, registration, licensing, inspections and disciplinary processes, among others*

*To execute the internal business processes effectively, KMPDC management is structured into six (6) directorates and two (2) departments that report directly to the CEO. The Directorates and Departments carry out both core and support business processes*

### **Supply Chain Management Department**

Offers sound advice to the CEO on matters pertaining to procurement by developing and guiding the implementation of policies for supply chain management function in line with the Public Procurement and Asset Disposal Act, 2022 and the Public Procurement and Asset Disposal Regulations of 2020 to support the mandate of regulation of training and practice of medicine and dentistry as well as the standards and operations of health institutions through acquisition of goods and services of the desired quality at KMPDC.

#### **3.1.3.3 Resources and Capabilities**

KMPDC relies on the internally generated revenue and exchequer funding as the main sources of funding. These funds are utilised for activities that are aimed at the realisation of set mandate.

KMPDC has invested in tangible resources for longevity and posterity, which include the KMPDC Complex and the lease of the regional offices. KMPDC has also invested in the purchase of equipment, supplies, software and utility items that ensure smooth operations and optimum performance.

KMPDC has a well constituted human resource base informed by the approved staff establishment. Currently, KMPDC has a total of eighty-one (81) staff in-post against an approved establishment of one hundred and forty-nine (149) as detailed in section 6.2.2. The existing skills mix facilitates the execution of functions of KMPDC. To enhance human resource performance, efforts are in progress to fill the sixty-eight (68) vacant positions in the staff establishment.

KMPDC has social resources derived from the collaboration with other health regulatory bodies, training institutions, enforcement agencies, regional and international organisations, among other stakeholders.

### 3.1.4. Summary of Strengths and Weaknesses

Table 3.2 below summarises the strengths and weaknesses identified in analysis of the KMPDC internal environment.

Table 3.2: Summary of Strengths and Weaknesses

FACTOR	STRENGTHS	WEAKNESSES
<b>Governance and Administrative Structures</b>	<ul style="list-style-type: none"> <li>Established under an Act of Parliament.</li> <li>Committed top leadership.</li> </ul>	<ul style="list-style-type: none"> <li>Conflicting legal mandates with other regulatory bodies and Government Agencies.</li> <li>Weak enforcement on compliance with standards.</li> </ul>
<b>Internal Business Processes</b>	<ul style="list-style-type: none"> <li>Established Policies, Procedures, Processes.</li> <li>Established Institutional Risk Management Framework.</li> <li>Innovations in operations.</li> </ul>	<ul style="list-style-type: none"> <li>Cyber-attacks.</li> <li>Lack of a communication, media and branding strategy.</li> </ul>
<b>Resources and Capabilities</b>	<ul style="list-style-type: none"> <li>Skilled and dedicated Human Resource.</li> <li>Established regional offices.</li> <li>Credible reputation.</li> <li>Established collaborations and partnerships with other health regulatory bodies.</li> </ul>	<ul style="list-style-type: none"> <li>Delay in disbursement of exchequer funds.</li> <li>Low staffing levels.</li> </ul>

### 3.1.5. Analysis of Past Performance

Analysis of the performance of KMPDC during the 2018-2023 strategic planning period in terms of key achievements, challenges and lessons learnt provides a baseline to reflect on future performance. The findings of the performance analysis are indicated in the sections that follow.

#### 3.1.5.1 Key Achievements

KMPDC achieved 85.2% of the strategies set out in the Strategic Plan 2018-2023, with the strategic pillar on Service Delivery Excellence scoring 87.3%, the Regulatory and Enforcement Strategic Pillar scoring 83.8% and the Legal Framework Pillar scoring 84.5%.

### Achievements during the period include:

- ⦿ Annual Publication of Registers of licensed Medical Practitioners, Dentists, Community Oral Health Officers and Health institutions, including the online interactive register updated in real-time.
- ⦿ Inspection of 13,108 health facilities by KMPDC as of December 2022.
- ⦿ Strengthened the regulatory framework through amendment of the subsidiary legislation in line with the 2019 amendment of CAP. 253, including: the Medical Practitioners and Dentists (Medical Institutions) (Amendment) Rules, 2021; Medical Practitioners and Dentists (Forms and Fees) (Amendment) Rules, 2021; Medical Practitioners and Dentists (Inspections and Licensing) Rules, 2022; Medical Practitioners and Dentists (Disciplinary and Ethics) Rules, 2022; Medical Practitioners and Dentists (Training, Assessment, and Registration) Rules, 2022, and the Medical Practitioners and Dentists (eHealth) Rules, 2021 developed and forwarded to MOH for gazettelement.
- ⦿ Standardised undergraduate training by review of the core curricula for Bachelor of Medicine and Bachelor of Surgery (MBChB) and Bachelor of Dental Surgery (BDS), and development of the draft core curricula for Community Oral Health.
- ⦿ Standardised internship training by: Review of the National Guidelines for Internship Training of Medical and Dental Officer Interns, the National Guidelines and Logbook for Medical Officer Interns, and the National Guidelines and Logbook for Dental Officer Interns (reviewed in 2019 and 2022); Review of the inspection checklists for Medical and Dental Internship Training Centres in 2019, 2021 and 2022; Inspection and accreditation of Internship Training Centres: eighty-five (85) Medical and nine (9) Dental Internship Training Centres; Operationalisation of the automated Internship Management System (for placement, evaluation, tracking and reporting of Interns) in 2021, and Development of the Standard Operating Protocols on Internship Training (2022).
- ⦿ Strengthened specialist training through the collegiate system: Development, review and adoption of core curricula for specialist training by the East, Central and Southern Africa (ECSA) Colleges for: Anaesthesia, General Surgery, Internal Medicine, Pathology, Orthopaedic Surgery, Plastic and Reconstructive Surgery, and Paediatrics and Child Health; Development of the National Guidelines for Inspection and Accreditation of Medical and Dental Specialist Training Institutions (2019); Review of the checklist for inspection of specialist training institutions (2019); Inspection and accreditation of thirty-six (36) collegiate training sites, including twenty-five (25) training sites for General Surgery, fourteen (14) of which are also training sites for Orthopaedic Surgery and one (1) for Plastic and Reconstructive Surgery under the College of Surgeons of Eastern, Central and Southern Africa (COSECSA), five (5) training sites for Anaesthesia and Critical Care under the College of Anaesthesiologists of Eastern, Central and Southern Africa (CANECSA), four (4) training sites for Internal Medicine under the Eastern, Central and Southern Africa College of Physicians (ECSACOP), and two (2) training sites for Obstetrics and Gynaecology under the Eastern, Central and Southern Africa College of Obstetricians and Gynaecologists (ECSACOG); and Inspection and accreditation of three (3) Sub-specialist Training Sites, including one (1) Cardiology training site, one (1) Paediatric anaesthesia training site, and one (1) Tropical medicine and infectious diseases training site.
- ⦿ Streamlined continuous professional development by: Review of the Continuous Professional Development (CPD) Guidelines (2022); Accreditation and licensure of one hundred and eighty-six (186) CPD Providers, and Full implementation of the Integrated CPD Management System (ICMS).

- ⦿ Entrenched professionalism through the development and adoption of the Scope of Practice for General, Specialist and Sub specialist Medical Practitioners (2022) and the Scope of Practice for General, Specialist and Sub-specialist Dental Practitioners (2022).
- ⦿ Improved efficiency and accessibility of Council services through automation of processes including: Online service portals for renewal of licenses for practitioners and health facilities; Automation of Finance, Human Resource and Procurement processes; Online portal for Council examinations (Internship qualifying and pre-registration examinations), and Operationalisation of online platforms for appearance at Peer review assessments, and Disciplinary and Ethics hearings.
- ⦿ Resolution of Disciplinary and Ethics Cases: Determination of 71.6% (331 out of 462) cases lodged between 2018 and December 2022.
- ⦿ HR policy instruments: Development and implementation of Human Resource policy instruments as per SCAC guidelines, including: KMPDC Organisation Structure, Grading and Staff Establishment (2021); KMPDC Human Resource Policy and Procedures Manual (2021), and KMPDC Career Guidelines for Staff (2021).

In addition, to achievement recorded from the implementation of the Strategic Plan 2018-2023, KMPDC recorded the following extra achievements:

- ⦿ Development and publication of the Medical Practitioners and Dentists (Mental Health Treatment and Rehabilitation Institutions) Rules, 2022.
- ⦿ Implementation of E-Board for Council Meetings.
- ⦿ Implementation of Customer Relationship Management System to enhance customer service.
- ⦿ Digitised inspection checklists and data collection instruments.
- ⦿ KMPDC advised on and supplemented training of family health doctors returning from Cuba geared towards increasing the number of specialists for the country.
- ⦿ KMPDC was categorised as a 'Regulatory State Corporation', under Category PC 6A by the State Corporations Advisory Committee (SCAC) in March 2020.
- ⦿ As a state corporation, KMPDC was placed under mandatory performance contracting.
- ⦿ Participated in Covid-19 Management and specifically on: National Coordination Centre for Quarantine and Isolation facilities, Inspection and Licensing of 270 suitable treatment, and quarantine isolation facilities approved to offer Covid-19 services to affected citizens, National assessment of the county's readiness levels to handle the pandemic through two Technical Assistance teams in July 2020 and July 2021, and verification of over 300 facilities in the forty-seven (47) counties.
- ⦿ Supported improved health facility infrastructure, Infection Prevention and Control, and highlighted recommendations for more action to strengthen the areas of human resources, capacity building, reliability of oxygen supply as well as supporting the County governments coordination on the pandemic, Develop KMPDC health emergency response framework to enable the government and the nation to manage future health threats and risks, Advised and actively participated in the establishment of Covid-19 emergency respond centres in the country to help in the national and county governments in the fight against the pandemic.
- ⦿ Improve the work environment and established a staff wellness facility.
- ⦿ Secretariat and logistic support to the Health Workforce Conference, 2022 on Harmonisation of Training Curricula for the Health Workforce and the Intersectoral Committee on Health Workforce Training and Education Reforms.

### 3.1.5.2. Challenges

KMPDC faced the following challenges in the implementation of the Strategic Plan 2018-2023:

- ⦿ Legislations that allow for conflict and overlap in Laws in governing the regulation of healthcare in Kenya.
- ⦿ Inadequate financial resources and delay in approvals by Department of Public Works hindered the establishment of offices in all the 47 counties. In addition, the inadequate financial resources also hindered recruitment of human resource support for the implementation of KMPDC mandate; effective monitoring and evaluation; full implementation of ERP, brand strategy, call centre and capacity building for employees.
- ⦿ The Health Laws (Amendment) Act, 2019 expanded the mandate of KMPDC which resulted in financial and human resource constraints since it had not been factored in the Strategic Plan 2018-2023.
- ⦿ Security concerns in some regions in the country, thereby making enforcement of KMPDC mandate difficult.
- ⦿ Delay in gazettelement of registered health facilities and amended Rules hindered the implementation of the some of the set targets.
- ⦿ Some of the key activities that were scheduled during the 2018-2023 period but did not take place include:
- ⦿ Conduct of Disciplinary and Ethics Committee (D&EC) hearings to determine cases lodged against practitioners and health facilities;
- ⦿ Inspections of training institutions;
- ⦿ Gazettelement of e-health Rules;
- ⦿ Development of guidelines for registration and licensing of new facilities;
- ⦿ Establishment of Alternative Dispute Resolution processes and procedures;
- ⦿ Development of common entrance certification exams for the regulated professionals;

- ⦿ Implementation of paperless online services for indexing and application for first-time registration and examinations;
- ⦿ Attainment of ISO 17024:2012 Certification;
- ⦿ Definition of a stakeholder engagement model;
- ⦿ Establishment of brand strategy and awareness campaign, and
- ⦿ Hosting of the Association of Medical Councils of Africa (AMCOA) annual conference due to the onset of Covid-19 pandemic.

### 3.1.5.3. Lessons Learnt

The lessons learnt during the implementation of the Strategic Plan 2018-2023 include:

- ⦿ Teamwork, proper coordination, committed leadership and strategic resilience are key to achievement of strategic goals and strategies;
- ⦿ A robust monitoring, evaluation and learning framework is key in guiding and gauging strategic direction;
- ⦿ Appropriate resource allocation to key strategic objectives and development of resource mobilisation strategies may ease the problem of budgetary constraints;
- ⦿ Risk analysis should consider the possible emergence of disasters and emergencies like Covid-19 pandemic which may disrupt the operations of KMPDC, and
- ⦿ It is of strategic importance to adopt and embrace advancements in information and communication technology (ICT).

## 3.2. Stakeholder Analysis

A stakeholder analysis resulted in the stakeholder mapping and stakeholder expectations as shown in Table 3.3 below:

Table 3.3: Stakeholder Analysis

NAME OF STAKEHOLDER	ROLE	STAKEHOLDER'S EXPECTATION FROM KMPDC	THE EXPECTATION OF KMPDC FROM THE STAKEHOLDER
<b>Medical, Dental and Oral Health Practitioners</b>	Compliance Implementation of policies and regulations	Efficient delivery of service. Readily accessible and prompt services. Information on KMPDC services and guidelines.	Compliance to the set rules and regulations. Offer quality services to the public.
<b>Health facilities</b>	Compliance. Implementation of policies and regulations	Seamless services. Standardisation of services. Information on KMPDC services and guidelines.	Provision of quality healthcare services to the public.
<b>Employees/ staff of the council/ Council Members</b>	Service delivery	Conducive working environment. Continuous support, professional development and improved welfare. Industrial harmony. Oversight and support.	Prudent use of available resources. Efficiency and effectiveness in performance of duties. Implementation of the Strategic Plan and other policies.
<b>Ministry of Health (MOH)</b>	Oversight	Technical assistance to support delivery of quality healthcare to the public.	Support in policy and guidelines development.
<b>The Public</b>	Consumption of services Feedback	Information on KMPDC services and guidelines. Impartiality in service delivery. Responsiveness in quality services.	Participation in stakeholder fora. Feedback on healthcare service delivery



NAME OF STAKEHOLDER	ROLE	STAKEHOLDER'S EXPECTATION FROM KMPDC	THE EXPECTATION OF KMPDC FROM THE STAKEHOLDER
<b>The Executive</b>	Regulation  Financial support	Exemplary service delivery.	Collaboration and cooperation.  Guaranteed facilitation to support delivery of KMPDC mandate
<b>The National Assembly/ The Senate/ relevant Parliament committees</b>	Regulation	Enforcement of the laws.  Advisory on health-related matters and practice.	Pass proposed laws in a timely manner.
<b>The Judiciary</b>	Interpretation of Laws  Conflict resolution	Compliance of the Acts and Regulations.	Give clear guidance on the enforcement of laws.
<b>Council of Governors (COG)</b>	Compliance  Implementation of policy documents and regulations	Collaboration and support and cooperation.	Collaboration, support and cooperation
<b>County Governments/ County Assemblies/ County Public Service Boards (CPSBs)</b>	Compliance  Implementers of policy documents and regulations	Collaboration and support and cooperation.	Collaboration, support and cooperation.
<b>Professional associations</b>	Collaboration  Implementation of policies and regulations	Clear guidelines.  Professionalism in execution of KMPDC mandate	Active participation in KMPDC activities.  To enhance self-regulation of healthcare profession  Cooperation.

NAME OF STAKEHOLDER	ROLE	STAKEHOLDER'S EXPECTATION FROM KMPDC	THE EXPECTATION OF KMPDC FROM THE STAKEHOLDER
<b>Other health regulatory bodies</b>	Collaboration	Execution of the Council Mandate as prescribed in the Act.  Collaborations.	To execute their mandate as prescribed in their Act.
<b>National Government Administrative officers</b>	Collaboration	Execution of the Council Mandate as prescribed in the Act.	Support in enforcement of compliance.
<b>Commission for University Education (CUE)</b>	Collaboration	Clear guidelines on the training requirements for medical, dental and oral health practitioners.	Collaboration in the approval of training programmes and accreditation of training institutions for medical, dental and oral health practitioners.
<b>Kenya National Bureau of Statistics (KNBS)</b>	Provision of data	Provision of data on practitioners and health facilities.	Accurate health data.
<b>Development Partners</b>	Collaboration, partnerships and funding	Support and delivery on engagements.	Support and cooperation, and participation in stakeholders' fora.
<b>Suppliers</b>	Provision of quality supplies	Clear specifications/ guidelines for goods/services to be supplied.	
		Prompt payment upon delivery of goods and services.  Adherence to procurement laws.	

NAME OF STAKEHOLDER	ROLE	STAKEHOLDER'S EXPECTATION FROM KMPDC	THE EXPECTATION OF KMPDC FROM THE STAKEHOLDER
<b>Independent commissions and offices</b>	Regulation	Prompt and efficient service delivery.	Collaboration in ensuring quality healthcare.
<b>Patient rights organisations/ Civil society</b>	Represent consumers	Fair and speedy dispensation of malpractice cases lodged	Understand our mandate and the process of dispensation of cases.
<b>The National Treasury</b>	Regulation Funding	Effective management of financial resources. Effective management of government assets.	Provision of adequate budgetary support. Timely release of funds. Continuous engagement on emerging financial gaps that may arise from time to time.
<b>Office of Auditor General</b>	Provision of audit services	Cooperation during annual financial audit process. Effective management of financial resources. Effective management of government assets.	Support in recommending requisite controls. Provision of adequate time to address audit queries.
<b>Academia/ training/ research institutions</b>	Compliance Implementation of policies and regulations Facilitate decision making	Continuous support in curriculum implementation and review for pre- and in-service training and CPD. Clear guidelines. Fair assessment of training facilities. Collaboration in research projects.	Effective implementation of curricula and guidelines. Feedback. Participation in stakeholder fora. Research based solutions.
<b>Media</b>	Dissemination of information	Timely response to queries. Periodic briefs on operations and achievements.	Fair and balanced reporting. Media coverage of KMPDC activities.

NAME OF STAKEHOLDER	ROLE	STAKEHOLDER'S EXPECTATION FROM KMPDC	THE EXPECTATION OF KMPDC FROM THE STAKEHOLDER
<b>Faith Based Organisations (FBOs)/ Community Benefit Organisations (CBOs)</b>	Compliance Implementation of policies and regulations	Information on KMPDC services and guidelines Support in ensuring provision of quality healthcare.	Adherence to set standards.
<b>International health and regulatory bodies</b>	Collaboration	Information sharing. Collaboration to ensure quality healthcare.	Collaboration. Information sharing on licensure requirements and restrictions.
<b>Industrial relations organisations</b>	Compliance Collaboration	Standards for safe and appropriate work and training environment.	Industrial harmony. Adherence to labour laws.
<b>Private sector alliance</b>	Compliance Implementation of policies and regulations	Seamless services by KMPDC. Standardisation of services. Information.	Provision of quality health services to the public.
<b>Insurance industry</b>	Compliance Implementation of policies and regulations	Clear guidelines on professional fees and scope of practice. Access to up-to-date information on registered and licensed practitioners.	Timely responsiveness. Feedback. Participation in stakeholder fora.

## *Chapter Four:*

# *Strategic Issues, Goals & Key Result Areas*

This chapter outlines the strategic issues relating to KMPDC, the strategic goals and identified key result areas for the strategic planning period.

## 4.1. Strategic Issues

Following the review of the implementation of the previous strategic plan, and various analyses, KMPDC has identified the key strategic issues to be addressed in this Strategic Plan. The key strategic issues for KMPDC are Adherence to accepted governance, standards, best practices and laws; Compliance with set regulations and standards, and Efficiency and effectiveness in KMPDC operations.

Corporate governance ensures that there exists appropriate decision-making processes and controls so as to secure the interests of all stakeholders. Some of the key issues to be addressed will include the KMPDC legal framework, Council systems and structures, partnerships and collaborations and monitoring and evaluation.

Further, complying with set standards and regulations by practitioners and health institutions is crucial in assuring quality healthcare. Moreover, KMPDC operations should run seamlessly to support the delivery of set mandate. These strategic issues will be addressed to ensure the successful implementation of the KMPDC mandate.

## 4.2. Strategic Goals

Strategic direction is anchored on a clear understanding of the strategic issues surrounding KMPDC and translating the issues into strategic goals. On corporate governance, KMPDC will ensure maintenance of governance structures that will enhance adherence with accepted ethical standards, best practices and laws.

KMPDC shall also optimise compliance with set standards and regulations with a focus to enhancing quality healthcare. Further, integrated support systems and structures will be strengthened for more efficient KMPDC operations. The objective is to ensure timely and responsive service delivery.

## 4.3. Key Result Areas

To address the strategic issues and achieve the strategic goals herein, KMPDC has structured this Strategic Plan into three key result areas namely: Corporate Governance; Regulation and Enforcement, and Strategic Operations.

### Key Result Area 1: Corporate Governance

This key result area will focus on: enhancing the KMPDC legal framework; realigning KMPDC systems and structures; promoting partnerships and collaborations, and enhancing monitoring and evaluation.

### Key Result Area 2: Regulation and Enforcement

The emphasis of this KRA includes: enhancing management of KMPDC records, applications, inspections and assessments; strengthening enforcement; improving awareness of the KMPDC mandate, services, policies and guidelines, and standardising training and assessment of medical, dental and oral health practitioners. The achievement of this KRA will ultimately lead to enhanced quality healthcare.

### Key Result Area 3: Strategic Operations

The main thrust of this KRA is to: improve human resource operational capacity; enhance the KMPDC corporate image; harmonise the KMPDC strategy and planning function; improve the KMPDC operational efficiency in service delivery through automation; expand revenue streams; enhance coordination of the supply chain management function, and automate the internal audit function.

This KRA also provides a roadmap in the decentralisation of KMPDC functions with the aim of improving services to the public.

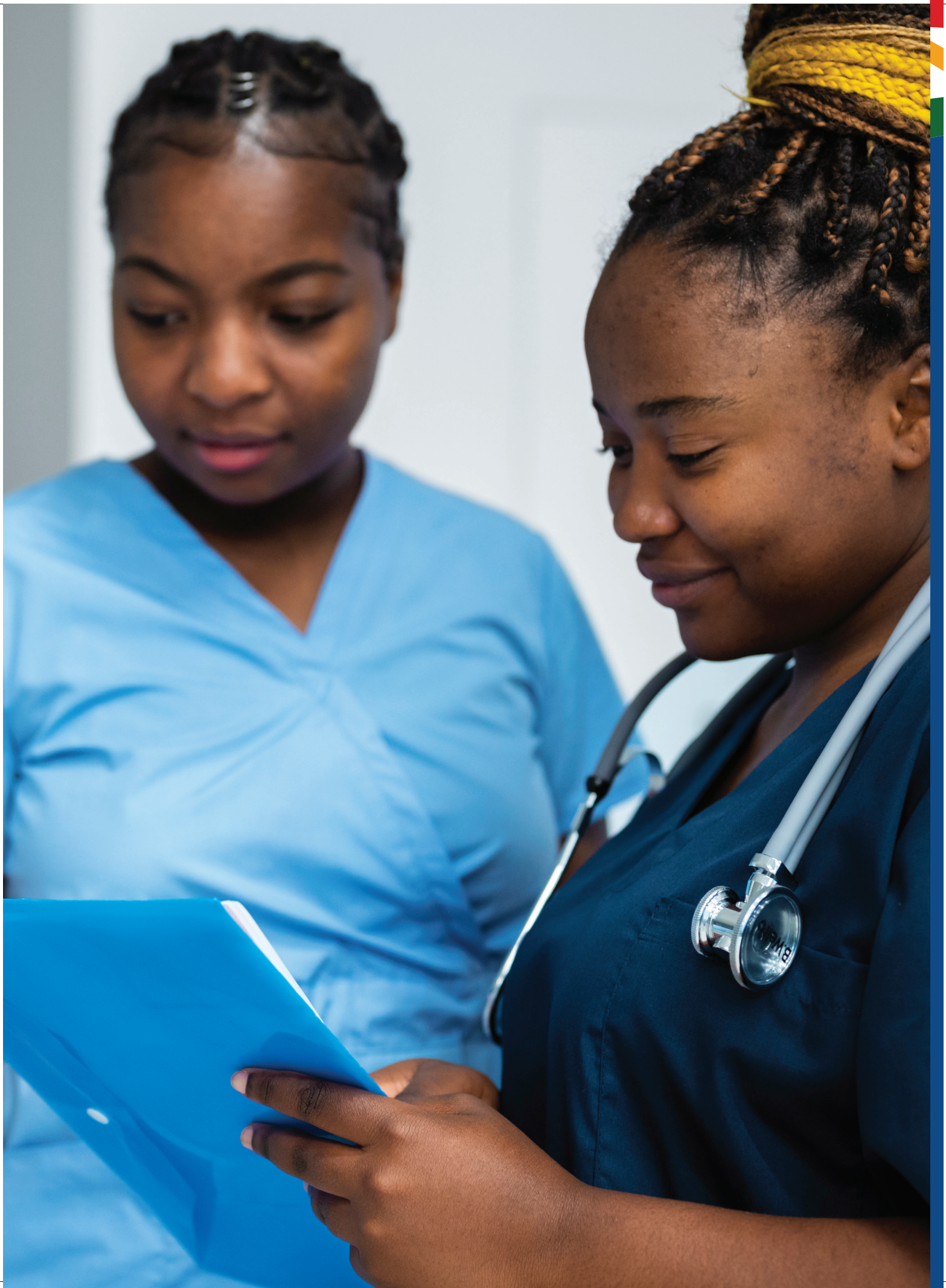
Table 4.1: Strategic issues, Goals and Key result areas

STRATEGIC ISSUE	STRATEGIC GOAL	KEY RESULT AREA
<b>Adherence to accepted governance standards, best practices and laws</b>	Enhance corporate governance to ensure that KMPDC adheres to accepted standards, best practices and laws	KRA 1: Corporate Governance
<b>Compliance with set regulations and standards</b>	Optimise compliance with set standards and regulations with a focus to enhancing quality healthcare	KRA 2: Regulation and Enforcement
<b>Efficiency and effectiveness in KMPDC operations</b>	Strengthen the integrated support systems and structures for more efficient KMPDC operations with focus on responsiveness of services delivered by the staff at all levels	KRA 3: Strategic Operations




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*Strategic direction is anchored on a clear understanding of the strategic issues surrounding KMPDC and translating the issues into strategic goals. On corporate governance, KMPDC will ensure maintenance of governance structures that will enhance adherence with accepted ethical standards, best practices and laws. KMPDC shall also optimise compliance with set standards and regulations with a focus to enhancing quality healthcare*





*Chapter Five:*

*Strategic  
Objectives  
and Strategies*

This chapter outlines the KMPDC Strategic Model for the 2023/24-2027/28 strategic planning period.

## 5.1. Strategic Objectives

To address the strategic issues and achieve the strategic goals herein, KMPDC has structured this Plan into three key result areas namely: Corporate Governance, Regulation and Enforcement, and Strategic Operations.

Table 5.1 below outlines the annual projections of the outcomes in these key result areas.

KMPDC Staff empowering the public to know how to verify medical, dental practitioners, community oral health officers, medical camps and facilities using a SMS short code during an exhibition



Table 5.1: Outcomes annual projections

STRATEGIC OBJECTIVE	OUTCOME	OUTCOME INDICATOR	ANNUAL PROJECTIONS				
			Y1	Y2	Y3	Y4	Y5
<b>KRA 1: Corporate Governance</b>							
SO1: Strengthen KMPDC's legal framework.	Improved legal compliance	Level of compliance	20%	30%	50%	75%	100%
	Improved management of cases	Operational case tracking system	-	25%	50%	75%	100%
SO2: Re-align KMPDC systems and structures to enhance governance and performance.	Improved quality of service delivery	ISO 17024:2012 accreditation certificate	80%	100%	-	-	-
SO3: Promote KMPDC partnership and collaborations.	Increase development partner donor funding	Donor funding accounts for 10% of the total KMPDC budget	10%	30%	50%	75%	100%
<b>KRA 2: Regulation and Enforcement</b>							
SO1: Enhance management of KMPDC records, applications, inspections and assessments.	Reduced turnaround time (TAT) for applications and registrations	TAT for processing applications and registrations reduced from 14 to 7 working days	20%	40%	60%	80%	100%
SO2: Strengthen enforcement in compliance with set standards	Increased efficiency of inspection of health facilities and training institutions	Annual online inspection reports	-	-	-	25%	100%

STRATEGIC OBJECTIVE	OUTCOME	OUTCOME INDICATOR	ANNUAL PROJECTIONS				
			Y1	Y2	Y3	Y4	Y5
SO3: Improve awareness of KMPDC mandate, services, policies and guidelines	Increased awareness of Council mandate, functions and services	Proportion of registered Practitioners with active annual practice licences	70%	80%	90%	95%	100%
		Proportion of registered health facilities with active annual operating licences	5%	65%	75%	90%	100%
SO4: Improve the process of determination of D&EC cases.	Increased compliance with D&EC resolutions	Level of compliance with D&EC resolutions	40%	50%	60%	80%	100%
		Improve efficiency in determination of D&EC matters	25%	50%	100%	100%	100%
SO6: Standardise the training and assessment of medical, dental and oral health practitioners.	Standardise postgraduate training	Proportion of training institutions that have adopted the postgraduate core curricula	-	10%	30%	70%	100%

STRATEGIC OBJECTIVE	OUTCOME	OUTCOME INDICATOR	ANNUAL PROJECTIONS				
			Y1	Y2	Y3	Y4	Y5
<b>KRA 3: Strategic Operations</b>							
SO1: Enhance KMPDC human resource capacity.	Improved human resource capacity	Proportion of practitioners and institutions complying with licensing requirements	70%	80%	90%	95%	100%
SO4: Enhance KMPDC Corporate Image	Enhanced KMPDC Corporate Image	Number people accessing KMPDC social media platforms and website increased from 9,000 to 40,000	25%	40%	50%	75%	100%
SO8: Improve KMPDC operational efficiency in service delivery	Improved KMPDC operational efficiency in service delivery	Proportion of automated KMPDC services	70%	80%	90%	95%	100%
SO9: Expand revenue streams	Expanded revenue streams	Progressively increase KMPDC revenue by 20%	12.5%	25%	50%	75%	100%

## 5.2. Strategic Choices

KMPDC considered various strategies necessary to achieve the identified strategic objectives. The strategies are as shown in Table 5.2 below.

Table 5.2: Key result areas, Strategic objectives, and Strategies

KEY RESULT AREAS	STRATEGIC OBJECTIVES	STRATEGIES
<b>Corporate Governance</b>	Strengthen KMPDC's legal framework.	Ensure compliance with the Constitution, Laws and all statutory requirements.  Strengthen the regulatory functions of KMPDC.  Improve tracking and follow up of court matters.
	Re-align KMPDC systems and structures to enhance governance and performance.	Strengthen the Council supervisory role.  Enhance good governance practices.  Adopt the use of online contract and court matters management system.
	Promote KMPDC partnership and collaborations.	Strengthen partnership engagements to augment KMPDC's capacity to deliver its institutional mandate.
<b>Regulation and Enforcement</b>	Enhance management of KMPDC records, applications, inspections and assessments.	Digitise KMPDC records including practitioner's files, health facility files and D&EC Case files.  Establish an online platform for applications for registration, licensing and KMPDC examinations.  Operationalise online system for the inspection of health facility and training institutions.  Digitalise the peer review assessment, examinations, and internship logbook and evaluation process.
	Strengthen enforcement in compliance with set standards	Augment enforcement in closure of non-compliant health facilities and enhance collaboration with enforcement agencies (DCI, NIS, NPS, Ministry of Interior) and county governments.  Develop and implement the Disciplinary and Ethics sanctions guidelines.

KEY RESULT AREAS	STRATEGIC OBJECTIVES	STRATEGIES
<b>Regulation and Enforcement</b>	Strengthen enforcement in compliance with set standards	Institute mechanisms for verification and authentication of qualifications for registration or licensing purposes  Enforcement of D&EC resolutions.  Decentralise KMPDC services to counties.
	Improve awareness of KMPDC mandate, services, policies and guidelines	Enhance public advocacy and sensitisation across all levels.  Promote good clinical practice.
	Improve the process of determination of D&EC cases.	Institute Alternative Dispute Resolution (ADR) measures into the D&EC process.
	Support impaired practitioners to provide safe care	Facilitate linkage of impaired practitioners to support services.
	Standardise the training and assessment of medical, dental and oral health practitioners.	Strengthen the training and assessment of medical, dental and oral health practitioners.
<b>Strategic Operations</b>	Enhance KMPDC human resource capacity.	Recruit staff to fill gaps as per the approved staff establishment.  Conduct rationalisation of existing staff complement to ensure efficiency in service delivery.  Improve employee performance by developing and implementing an employee incentive scheme.
	Ensure a healthy, safe working environment and improve employee welfare	Develop and implement workplace policy on employee safety, training, welfare, flexi time/ space.
	Improve employee compensation and benefits	Conduct job evaluation exercise and recommend commensurate pay structure.  Review the KMPDC Human Resource Instruments (HR Policies and Procedures manual, Grading structure and Career guidelines).
	Enhance KMPDC Corporate Image	Conduct a perception and media audit of KMPDC.  Harmonise communication and media handling.  Build and sustain the KMPDC brand identity.  Enhance customer experience by establishing a contact centre.

KEY RESULT AREAS	STRATEGIC OBJECTIVES	STRATEGIES
<b>Strategic Operations</b>	Improve the KMPDC strategy and planning function	Align policy documents, strategies and programmes.  Monitor implementation of the Strategic Plan.
	Enhance KMPDC research capacity	Develop and implement policy frameworks for conducting research.  Build staff capacity on research.
	Improve KMPDC operational efficiency in service delivery	Streamline ICT operations to ensure efficiency.  Improve ICT ecosystem.  Develop and implement Business Continuity Plan (BCP).
	Expand revenue streams	Develop and implement the KMPDC resource mobilisation policy.  Engage The National Treasury and National Assembly to increase exchequer allocation.
	Improve budgetary control	Implement and use of the Financial Management module (ERP) for effective management, monitoring and control of the budget.  Strengthen internal audit mechanisms to ensure effective budgetary control.  Strengthen stewardship in the management of public resources.
	Institutionalise Risk Based Internal Audit plans	Develop and Implement an Internal Audit Management System.
	Enhance coordination of the Procurement function	Activate the supplier's portal to enable seamless bidding process.  Implement KMPDC procurement, inventory and disposal policy.  Develop and implement asset management system.



*Chapter Six:*

# *Implementation & Coordination Framework*

This Chapter outlines the implementation and coordination framework for the Strategic Plan.

## 6.1. Implementation Plan

The implementation plan of this Strategic Plan will be operationalised within these three main components: Action Plan, Budget and Performance Contracting.

### 6.1.1. Action Plan

To execute this Strategic Plan, KMPDC has developed an elaborate action plan detailing the Strategic Issues, Strategic Goals, Key Results Areas (KRA), Outcomes, Strategic Objectives, Strategies, Key Activities, Expected Output, Output Indicators, Annual Targets, Annual Budgets and Responsibility for execution of identified activities.

This Action Plan is as shown in Table 6.1 below.

The council conducts regular inspections to ascertain that medical facilities are maintaining the required standards. Medical facilities operating below the set standards are closed until they are reinspected



Table 6.1: Implementation Matrix

<b>Strategic Issue:</b> Adherence to accepted governance standards, best practices and Laws <b>Strategic Goal:</b> Enhance corporate governance to ensure that KMPDC adheres to accepted standards, best practices and Laws <b>KRA 1: CORPORATE GOVERNANCE</b>									
<b>Outcome:</b> Improved adherence to accepted governance standards, best practices and Laws									
STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET				
					Y1	Y2	Y3	Y4	Y5
<b>Strategic objective 1: Strengthen KMPDC's legal framework</b>									
Ensure compliance with the Constitution, Laws and all statutory requirements	Conduct annual legal audits	Legal audit completed	Annual legal audit reports	5	1	1	1	1	1
	Implement recommendations of the legal audits	Recommendations implemented	Implementation report	4	-	1	1	1	1
Strengthen the regulatory functions of KMPDC	Review of the existing Laws to strengthen the regulatory functions	The Act (CAP. 253) and subsidiary legislation reviewed or developed	Amended Act (CAP. 253) and subsidiary legislation	100%	20%	20%	20%	20%	20%
	Develop and review a court matters management policy	Policy developed and adopted	Approved court matters management policy	1	1	0	1	0	1
Improve tracking and follow up of court matters	Implement the court matters management policy and system	Court matters management database	Quarterly reports on court matters	20	4	4	4	4	4

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET				
					Y1	Y2	Y3	Y4	Y5
<b>Strategic objective 2: Re-align KMPDC systems and structures to enhance governance and performance</b>									
Strengthen the Council's supervisory role	Develop and implement the Council's Board Charter; Committee Charters; Council code of conduct and ethics; Whistle-blower policy.	Council Charter, Committee Charters, and Council code of conduct and ethics developed and reviewed	Approved Council Charter, Committee Charters and Council code of conduct and ethics	9	3	-	3	-	3
		Review and adoption of developed governance documents by the Council	Report on review workshop	2	1	0	0	1	0
		Board evaluations conducted	Annual board evaluation report	5	1	1	1	1	1
		Governance audit conducted	Annual governance audit report	5	1	1	1	1	1
		Obtain ISO 17024:2012 accreditation	KMPDC achieves ISO 17024:2012 accreditation	100%	100%	-	-	-	-
Enhance good governance practices	Maintain ISO 17024:2012 accreditation by conducting periodic ISO audits	ISO audits conducted	Annual ISO audit reports	4	-	1	1	1	1

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET				
					Y1	Y2	Y3	Y4	Y5
Adopt the use of online court matters and contract management system	Develop and implement the contract management system	Contract management policy Contract register	Approved contract management policy Annual contract register	3 5	1 1	- 1	1 1	- 1	1 1
<b>Strategic objective 2: Re-align KMPDC systems and structures to enhance governance and performance</b>									
	Operationalise the online court matters and contract management system	Court matters and contract management system developed	Functional court matters and contract management system	1	1	-	-	-	-
<b>Strategic objective 3: Promote KMPDC partnership and collaborations</b>									
Strengthen partnership engagements to augment	Develop a policy on partnerships and collaborations	Policy developed and adopted	Approved policy on partnerships and collaborations	3	1	-	1	-	1
KMPDC's capacity to deliver its institutional mandate	Implement the policy on partnerships and collaborations	Policy implemented	Annual reports on implementation status	5	1	1	1	1	1

**Strategic Issue:** Compliance with set regulations and standards

**Strategic Goal:** Optimise compliance with set standards and regulations with a focus to enhancing quality healthcare

**KRA 2: REGULATION AND ENFORCEMENT**

**Outcome:** Improved compliance with set regulations and standards

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET				
					Y1	Y2	Y3	Y4	Y5
<b>Strategic objective 1: Enhance management of KMPDC records, applications, inspections and assessments</b>									
Digitise KMPDC records including practitioner's files, health facility files and D&EC Case files	Develop a records management policy	Records management policy developed	Approved records management policy	1	-	-	-	-	-
	Assess records to determine the storage capacity required	Assessment of the storage capacity required conducted	Report on assessment of storage capacity required	1	-	-	-	-	-
	Acquire adequate storage to accommodate digitised records	Digitised records of practitioners, health facilities and D&EC cases	Percentage of documents digitised	2	-	-	-	-	-
			Report on percentage of staff trained on records digitisation	3	1	1	-	-	1
	Digitised records	100%	Digitised records	100%	-	100%	-	-	-

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET				
					Y1	Y2	Y3	Y4	Y5
<b>Strategic objective 1: Enhance management of KMPDC records, applications, inspections and assessments</b>									
Establish online platforms for applications for registration, licensing and KMPDC examinations.	Expand the scope of the online service portal (OSP) to include all application and registration processes	OSP for all applications and registration	Functional OSP for all application and registration processes	10 (4 reg., 6 app.) 100%	2	3	2	3	-
		All users trained	Staff training reports	10	-	3	3	3	1
			Sensitisation of clients	10	-	3	3	3	1
Operationalise online system for the inspection of health facilities and training institutions	Develop and implement online inspection checklists and reporting tools for health facilities and training institutions	Mapping and geo-tagging of facilities	Facility database modified to include geo-codes	100%	1	-	-	-	-
			Report on facility mapping exercise	1	-	1	-	-	-
		Functional online inspection checklists and reporting tools	Operational online inspection checklists and reporting tools for health facilities	11 100%	-	100%	-	-	-

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET				
					Y1	Y2	Y3	Y4	Y5
<b>Strategic objective 1: Enhance management of KMPDC records, applications, inspections and assessments</b>									
Operationalise online system for the inspection of health facilities and training institutions	Develop and implement online inspection checklists and reporting tools for health facilities and training institutions	Functional online inspection checklists and reporting tools	Operational online inspection tools checklists and reporting tools for training institutions	22 100%	-	9	7	6	-
						40%	32%	28%	
Digitalise the peer review application process, and Digitisation of the internship logbook and evaluation process	Develop and implement online platform for application of peer review process and internship logbook	Assessment platform operationalised (peer review assessment, internship assessment and logbook)	Reports on percentage of staff trained on online inspection tools	4	-	1	1	1	1
Digitalise the peer review application process, and Digitisation of the internship logbook and evaluation process	Develop and implement online platform for application of peer review process and internship logbook	Assessment platform operationalised (peer review assessment, internship assessment and logbook)	Online annual inspection reports	3	-	-	1	1	1
Digitalise the peer review application process, and Digitisation of the internship logbook and evaluation process	Develop and implement online platform for application of peer review process and internship logbook	Assessment platform operationalised (peer review assessment, internship assessment and logbook)	Functional online peer review application and internship assessment platform	4	2	1	1	-	-
Digitalise the peer review application process, and Digitisation of the internship logbook and evaluation process	Sensitise interns, internship coordinators and supervisors, and peer reviewers on the online platforms	Sensitisation videos	Percentage of interns, internship coordinators, supervisors, and peer reviewers sensitised	100%	-	100%	100%	-	-



STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET					
					Y1	Y2	Y3	Y4	Y5	
<b>Strategic objective 1: Enhance management of KMPDC records, applications, inspections and assessments</b>										
Digitalise the peer review application process, and Digitisation of the internship logbook and evaluation process	Sensitise interns, internship coordinators and supervisors, and peer reviewers on the online platforms	Sensitisation videos	Workshop for internship coordinators and supervisors	5	1	1	1	1	1	1
<b>Strategic objective 2: Strengthen enforcement in compliance with set standards</b>										
Augment enforcement in closure of non-compliant health facilities and enhance collaboration with enforcement agencies and county governments.	Develop compliance enforcement tools	Compliance enforcement tools developed	Approved closure notices and seals	2	-	-	-	-	-	-
	Develop framework for collaboration with enforcement agencies (DCI, NIS, NPS, Ministry of Interior) and county governments	Framework on collaboration with enforcement agencies and county governments developed and implemented	Approved policy on collaboration	1	100%	1	-	-	-	-

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET				
					Y1	Y2	Y3	Y4	Y5
<b>Strategic objective 2: Strengthen enforcement in compliance with set standards</b>									
Augment enforcement in closure of non-compliant health facilities and enhance collaboration with enforcement agencies and county governments.	Develop framework for collaboration with enforcement agencies (DCI, NIS, NPS, Ministry of Interior) and county governments	Framework on collaboration with enforcement agencies and county governments developed and implemented	No. of engagement with stakeholders	5	1	1	1	1	1
					1	1	1	1	1
			Annual report on collaboration for enforcement purposes	5	1	1	1	1	1
<b>Strategic objective 2: Strengthen enforcement in compliance with set standards</b>									
Develop and implement the Disciplinary and Ethics sanctions guidelines	Develop a Disciplinary and Ethics Sanctions Guideline	Disciplinary and Ethics Sanctions guideline developed	Approved Disciplinary and Ethics sanctions guidelines	1 100%	50%	50%	-	-	-
					-	50%	-	-	-
		Induction for D&EC Members and Experts	Report on D&EC induction	2	-	1	-	1	-
Institute mechanisms for verification and authentication of qualifications for registration or licensing purposes	Develop and implement mechanism for verification and authentication of academic and professional qualifications	Qualification verification and authentication mechanism developed	Functional qualification verification and authentication system	100%	50%	50%	-	-	-
					-	50%	-	-	-

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET					
					Y1	Y2	Y3	Y4	Y5	
<b>Strategic objective 2: Strengthen enforcement in compliance with set standards</b>										
Institute mechanisms for verification and authentication of qualifications for registration or licensing purposes	Develop and implement mechanism for verification and authentication of academic and professional qualifications	Staff trained on verification and authentication of academic and professional qualifications	Report on staff training on verification and authentication of qualifications	100%	-	1	-	-	-	-
<b>Strategic objective 2: Strengthen enforcement in compliance with set standards</b>										
Institute mechanisms for verification and authentication of qualifications for registration or licensing purposes	Develop and implement mechanism for verification and authentication of academic and professional qualifications	Clients sensitised on verification of qualifications	Client sensitisation video	1	-	1	-	-	-	-
Enforcement of D&EC resolutions	Develop a framework for proper follow up of compliance with D&EC resolutions	Framework for follow up on D&EC resolutions developed	Approved framework for follow up on D&EC resolutions	1	-	-	-	-	-	-
			Annual reports on compliance with D&EC resolutions	5	1	1	1	1	1	1
Decentralise KMPDC services to counties	Strengthen and equip regional offices	Equipped regional Offices	Number of fully equipped and operational regional offices	12	8	4	3	2	-	-

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET					
					Y1	Y2	Y3	Y4	Y5	
<b>Strategic objective 3: Improve awareness of KMPDC mandate, services, policies and guidelines</b>										
Enhance public advocacy and sensitisation across all levels	Conduct sensitisation fora in the counties on KMPDC mandate, services, policies and guidelines	Publications (themed social media posts and quarterly newsletters)	No. of social media posts	260	52	52	52	52	52	52
			No. of newsletters published	20	4	4	4	4	4	
<b>Strategic objective 3: Improve awareness of KMPDC mandate, services, policies and guidelines</b>										
Enhance public advocacy and sensitisation across all levels	Conduct sensitisation fora in the counties on KMPDC mandate, services, policies and guidelines	Annual stakeholders conference held	Conference reports	5	1	1	1	1	1	1
			No. of case books published	10	2	2	2	2	2	
Promote good clinical practice	Publish periodic case books on D&EC cases that have been determined	Case books uploaded as CPD Activity	No. of case book CPD activities	10	2	2	2	2	2	2
			Develop and review guidelines on professional conduct and discipline	2	1	-	-	1	-	
		Developed and reviewed Ethical Guidelines for Health Facilities	Guidelines forwarded for publishing	2	1	-	-	1	1	-

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET				
					Y1	Y2	Y3	Y4	Y5
<b>Strategic objective 4: Improve the process of determination of Disciplinary and Ethics Committee (D&amp;EC) cases</b>									
Institute Alternative Dispute Resolution (ADR) measures into the D&EC process	Develop and implement framework on ADR	Framework on ADR developed and implemented	Functional ADR Framework	1	-	-	-	-	-
		D&EC Cases determined through ADR	Annual report on proportion of D&EC cases determined by ADR	1	1	1	1	1	1
<b>Strategic objective 5: Support impaired practitioners to provide safe care</b>									
Facilitate linkage of impaired practitioners to support services	Develop and implement framework for early identification of impairment in practitioners, and for support for impaired and "pre-impaired"	Framework for early identification and support for impairment developed	Functional framework	2	-	-	-	1	-
		Partners to provide support services identified and engaged	Memorandum of Understanding (MOU) with identified partners	2	-	1	-	1	-
	Review the Medical Practitioners and Dentists (Fitness to Practise) Rules and SOPs	Rules and SOPs reviewed	Draft Rules forwarded for gazettelement	2	1	-	-	1	-
			Approved SOPs	2	1	-	-	1	-

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET					
					Y1	Y2	Y3	Y4	Y5	
<b>Strategic objective 6: Standardise the training and assessment of medical, dental and oral health practitioners.</b>										
Strengthen the training and assessment of medical, dental and oral health practitioners	Develop and/or review core curricula for undergraduate training	Core curricula for MBChB, BDS, Dip.OH and BSc. OH developed and/or reviewed	Approved core curricula forwarded for publishing	6	2	-	-	4	-	-
	Develop and/or review internship training guidelines and logbooks	Medical, dental and oral health internship training guidelines and logbooks developed and/or reviewed	Internship guidelines and logbooks forwarded for publishing	6	2	-	-	-	4	4
	Develop core curricula for postgraduate medical and dental training	Core curricula for postgraduate training developed	Core curricula for postgraduate training forwarded for publishing	15	3	5	3	4	-	-
	Review CPD guidelines	CPD Guidelines reviewed	Reviewed CPD guidelines published	1	-	-	-	1	-	-

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET				
					Y1	Y2	Y3	Y4	Y5
<b>Strategic objective 6: Standardise the training and assessment of medical, dental and oral health practitioners.</b>									
Strengthen the training and assessment of medical, dental and oral health practitioners	Develop and review Scopes of Practice	List of recognised specialties and sub-specialties reviewed	Reviewed list of recognised specialties and sub-specialties published	2	1	-	-	1	-
		Scopes of Practice for Medical, Dental and Oral Health Practitioners developed and reviewed	Developed and/or reviewed Scopes of Practice published	6	2	-	-	4	-
	Develop and implement a framework for common pre-internship examination for all medical, dental and oral health graduands	Framework for common pre-internship examination for medical, dental and oral health graduands developed	Common pre-internship examination for medical, dental and oral health graduands	1 100%	-	-	-	100%	-
	Develop and implement a framework for assessment of practitioners for specialist and sub-specialist recognition	Assessment framework for specialist and sub-specialist recognition established	Functional assessment framework for specialist and sub-specialist recognition	1 100%	-	-	-	100%	-

**Strategic Issue:** Efficiency and effectiveness in KMPDC operations

**Strategic Goal:** Strengthen the integrated support systems and structures for more efficient KMPDC operations with focus on responsiveness of services delivered by the staff at all levels

**KRA 3: STRATEGIC OPERATIONS**

**Outcome:** Efficient and effective systems to support service delivery

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET				
					Y1	Y2	Y3	Y4	Y5
<b>Strategic objective 1: Enhance KMPDC human resource capacity</b>									
Recruit staff to fill gaps as per the approved staff establishment	Advertise vacancies and conduct interviews	Interviews conducted	Interview report	1	-	-	-	-	-
	Onboard successful applicants	Staff onboarded	No. of staff onboarded	68	-	-	-	-	-
	Conduct a skills/ staffing gap analysis	Skills and staffing gaps identified	Skills and staffing gap analysis reports	2	-	-	1	-	-
Conduct rationalisation of existing staff complement to ensure efficiency in service delivery	Proper placement of staff	Staff properly placed	Proportion of staff properly placed	100%	-	-	-	-	-



STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET				
					Y1	Y2	Y3	Y4	Y5
<b>Strategic objective 1: Enhance KMPDC human resource capacity</b>									
Improve employee performance by developing and implementing an employee incentive scheme	Development of an employee incentive scheme	Incentive scheme developed	Approved incentive scheme	1	-	1	-	-	-
	Scheme Implementation	Implementation report	Annual scheme implementation report	4	-	1	1	1	1
<b>Strategic objective 2: Ensure a healthy, safe working environment and improve employee welfare</b>									
Develop and implement workplace policy on employee safety, training, staff welfare, flexi time/ space	Develop employee welfare policy	Employee welfare policy	Approved employee welfare policy	1	1	-	1	-	1
	Implement the policy	Implementation report	Implementation report	4	-	1	1	1	1
	Provide for guidance and counselling services in the staff medical cover	Guidance and counselling services in place	Guidance and counselling services in place	1	-	1	-	1	-
<b>Strategic objective 3: Improve employee compensation and benefits</b>									
Conduct job evaluation exercise and recommend commensurate pay structure	Engage SRC to conduct job evaluation	Engagement with SRC	MOU/ contract with SRC	1	1	-	-	-	-

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET					
					Y1	Y2	Y3	Y4	Y5	
<b>Strategic objective 3: Improve employee compensation and benefits</b>										
Conduct job evaluation exercise and recommend commensurate pay structure	Conduct the actual job evaluation exercise	Job evaluation conducted	Job evaluation report	1	100%	-	-	-	-	-
	Implement of job evaluation recommendations	Job evaluation recommendations implemented	Implementation report	1	50%	50%	-	-	-	-
	Identify gaps in the current human resource instruments.	Gaps identified	Report on gaps identified	1	1	-	-	-	-	-
Review the Council's Human Resource Instruments (HR Policies and Procedures manual, Grading structure and Career guidelines)	Engage Public Service Commission	PSC engaged	MOU/ Contract with PSC	1	1	-	-	-	-	-
	Review of the HR instruments	HR instruments reviewed	Reviewed HR Instruments approved.	1	1	-	-	-	-	-
	Implement reviewed HR instruments	Reviewed HR instruments implemented	Implementation report.	1	50%	50%	-	-	-	-

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET				
					Y1	Y2	Y3	Y4	Y5
<b>Strategic objective 4: Enhance KMPDC Corporate Image</b>									
Conduct a perception and media audit of KMPDC	Engage a consultant to conduct the perception and media audit	Consultant in place	Engagement contract	1	-	-	-	-	-
	Carry out the perception and media audit	Perception and media audit report	Perception and media audit report	2	-	-	1	-	-
Harmonise communication and media handling	Develop a communication and media strategy through a consultancy	Communication and media strategy developed	Communication and media strategy approved	1	-	-	-	-	-
	Implement the communication and media strategy	Communication and media strategy implemented	Communication and media strategy implementation report	100%	-	50%	-	-	-
Build and sustain the KMPDC brand identity	Develop a KMPDC brand manual	Brand manual developed	Approved brand manual	1	-	1	-	-	-
	Implement the KMPDC brand manual	Brand manual implemented	Implementation report	100%	-	50%	-	-	-
4. Enhance customer experience by establishing a contact centre	Operationalise a KMPDC contact centre	Contact centre set up and operationalised	Functional contact centre	1	-	1	-	-	-

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET				
					Y1	Y2	Y3	Y4	Y5
<b>Strategic objective 5: Improve the KMPDC strategy and planning function</b>									
Align policy documents, strategies and programmes	Develop guidelines to standardise all policy and strategy documents	Standardised policy and strategy documents developed	Approved standardised policy and strategy documents	1	1	-	-	-	-
Monitor implementation of the Strategic Plan	Develop Monitoring, Evaluation, Reporting and Learning (MERL) Framework for the 2023/2024-2027/2028 Strategic Plan	MERL Framework developed	Approved MERL Framework in place	2	-	1	-	-	-
	Conduct annual monitoring of the 2023/2024-2027/2028 Strategic Plan	Annual monitoring report developed	Annual report in place	5	1	1	1	1	1
	Conduct mid-term and end-term review of the 2023/2024-2027/2028 Strategic Plan	Mid-term and end-term evaluation reports	Mid-term and end-term evaluation reports	2	-	1	-	-	1
<b>Strategic objective 6: Enhance coordination of performance management</b>									
Coordinate implementation of the corporate and cascaded Performance Contracts	Customise KMPDC PC in line with its functions and pre-set targets	Annual KMPDC PC developed	Approved annual KMPDC performance contract	5	1	1	1	1	1

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET				
					Y1	Y2	Y3	Y4	Y5
<b>Strategic objective 6: Enhance coordination of performance management</b>									
Coordinate implementation of the corporate and cascaded Performance Contracts	Cascading the approved PC to directorates and department levels	Directorates and departments PC developed	Signed directorates and departments PC	5	1	1	1	1	1
Coordinate preparation, implementation and monitoring of annual workplans	Preparation of staff annual workplans	Staff workplans developed	Signed staff annual workplans	5	1	1	1	1	1
<b>Strategic objective 7: Enhance KMPDC research programmes</b>									
Develop and implement policy framework for conducting research	Develop and implement the KMPDC policy framework on research	KMPDC research policy developed and implemented	Approved KMPDC research policy	3	1	-	1	-	1
Build staff capacity on research	Training of staff on conducting research	Training report	Technical working group and key staff trained	1	-	1	-	-	-
<b>Strategic objective 8: Improve KMPDC operational efficiency in service delivery</b>									
Streamline ICT operations to ensure efficiency	Conduct automation survey.	Automation survey conducted	Biennial automation survey reports	3	1	-	1	-	1
	Review KMPDC ICT policy	Policy reviewed	Approved policy	2	1	-	-	1	-

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET					
					Y1	Y2	Y3	Y4	Y5	
Streamline ICT operations to ensure efficiency	Setting up of a Tier One Data centre at the KMPDC	Data centre set-up and operationalise	Functional data centre	1	-	1	-	-	-	-
<b>Strategic objective 8: Improve KMPDC operational efficiency in service delivery</b>										
Streamline ICT operations to ensure efficiency	Develop a KMPDC data sharing framework	Data sharing framework developed	Data sharing framework	1	-	1	-	-	-	-
Improve ICT ecosystem	Upgrade KMPDC ICT security infrastructure	KMPDC ICT security infrastructure upgraded	Secure ICT infrastructure	5	1	1	1	1	1	1
			Revamping CCTV Surveillance	100%	50%	50%	-	-	-	-
Develop and Implement a Business Continuity Plan (BCP)	Development of KMPDC ICT Business Continuity Plan	KMPDC ICT BCP developed	Approved and tested BCP	5	1	1	1	1	1	1
<b>Strategic objective 9: Expand revenue streams</b>										
Develop and implement the KMPDC resource mobilisation policy	Develop Resource Mobilisation policy	Resource mobilisation policy developed	Approved resource mobilisation policy	3	1	-	1	-	-	1
	Implement policy	Increase in KMPDC revenue	Annual resource mobilisation report	4	-	1	1	1	1	1
Engage the National Treasury and National Assembly to increase exchequer allocation	Map out priority areas with budget deficit and lobby National Treasury and National Assembly for additional funds	Additional funds to cater for budget deficit	Priority areas mapped out	5	1	1	1	1	1	1

STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET				
					Y1	Y2	Y3	Y4	Y5
<b>Strategic objective 10: Improve budgetary control</b>									
Implement and use of the Financial Management module (ERP) for effective management, monitoring and control of the budget.	Institute and assign vote controls	Aligned vote controls	Budget performance report	20	4	4	4	4	4
	Sensitisations and training of staff on ERP	Staff trained	Training reports	2	1	-	-	-	-
Strengthen internal audit mechanisms	Conduct pre-audits for all payments	Payments pre-audited	Quarterly pre-audit reports	20	4	4	4	4	4
Strengthen stewardship in the management of public resources	Training staff on prudent use of public resources	Staff trained	Training reports	4	2	-	-	2	-
		Adherence to the PFM Act 2012 and its Regulations of 2015 and PPDA 2022	Annual report on adherence to the approved budget and procurement plan	4	-	1	1	1	1
<b>Strategic objective 11: Institutionalise Risk Based Internal Audit plans</b>									
Develop and implement an Internal Audit Management System	Develop and deploy the Internal Audit Management System	Internal Audit Management System developed	Functional Internal Audit Management System in place	100%	50%	50%	-	-	-





STRATEGY	KEY ACTIVITIES	EXPECTED OUTPUT	OUTPUT INDICATORS	5-YEAR TARGET	TARGET					
					Y1	Y2	Y3	Y4	Y5	
<b>Strategic objective 12: Enhance coordination of the Procurement function</b>										
Implement KMPDC procurement, inventory and disposal policy	Develop and implement the KMPDC procurement, inventory and disposal policy in compliance with the PPDA, 2022	Procurement, inventory and disposal policy developed and implemented	Approved procurement, inventory and disposal policy	3	1	-	1	-	1	1
	Develop and implement asset management system	Identify and code all assets	Asset movement register	2	1	-	1	-	-	-
		Input the identified and coded assets to the system	Bar codes	Coded register	2	1	-	1	-	-
Digitalise the Procurement Planning process	Monitor asset movement	Individual Sign off on the book register	Annual asset movement report	5	1	1	1	1	1	1
	Develop annual procurement plan on ERP	Annual procurement plan developed and uploaded on ERP	Approved Procurement Plan and report	5	1	1	1	1	1	1

## 6.1.2. Annual Workplan and Budget

The annual workplan and budget for the implementation of the Strategic Plan in the first year (FY 2023/2024) is summarised in Table 6.2.

Table 6.2: Annual workplan and budget for FY 2023/2024

ACTIVITY	OUTPUT INDICATOR(S)	RESPONSIBLE
Conduct annual legal audits	Annual legal audit report	Dir. Legal Serv.
Review of the existing Laws to strengthen the regulatory functions	Amendment of Cap. 253 and subsidiary legislation	Dir. Legal Serv.
Develop a court matters management policy	Approved court matters management policy	Dir. Legal Serv.
Develop and implement the Council Charter; Committee Charters; Council code of conduct and ethics, Whistle-blower policy	Approved Council Charter, Committee Charters and Council code of conduct and ethics	Dir. Legal Serv.
Conduct Board evaluations	Annual Board evaluation report	Dir. Legal Serv.
Conduct governance audit	Annual governance audit report	Dir. Legal Serv.
Obtain ISO 17024:2012 accreditation	ISO 17024:2012 accreditation certificate	SRQA Dept.
Develop and implement the contract management system	Approved contract management policy	Dir. Legal Serv.
	Annual contract register	Dir. Legal Serv.
Operationalise the online court matters and contract management system	Functional court matters and contract management system	Dir. Legal Serv.
Implement the policy on partnerships and collaborations.	Annual reports on implementation status	Dir. Corp. Serv.
Develop a records management policy	Approved records management policy	Dir. R&L
Assess records to determine the storage capacity required	Report on assessment of storage capacity required	ICT Dept.
Acquire adequate storage to accommodate digitised records	Functional equipment (scanner and server)	ICT Dept.
	Report on staff training on records digitisation	ICT Dept.
Expand the scope of the online service portal (OSP) to include all application and registration processes	Functional OSP for application and registration processes	ICT Dept.
Develop and implement online inspection checklists and reporting tools for health facilities and training institutions	Facility database modified to include geo-codes	ICT Dept.
Develop and implement online platform for assessment, examinations, internship, etc	Functional online assessment platform (internship assessment and logbook)	Dir. Standards
		ICT Dept

ACTIVITY	OUTPUT INDICATOR(S)	RESPONSIBLE
Develop compliance enforcement tools	Approved closure notices and seals	HTICD Dir. Legal Serv.
	Quarterly publication of closed facilities	HTICD CC&PR Dept.
Develop framework for collaboration with enforcement agencies (DCI, NIS, NPS, Ministry of Interior) and county governments	Approved policy on collaboration	Dir. Legal. Serv.
	No. of engagement with stakeholders	Dir. Legal Serv. Dir. C&PE
	Annual report on collaboration for enforcement purposes	Dir. C&PE
Develop a Disciplinary and Ethics Sanctions Guideline	Approved Disciplinary and Ethics sanctions guidelines	D&ED
Develop and implement mechanism for verification and authentication of academic and professional qualifications	Functional qualification verification and authentication system	Dir. C&PE Prof. Assess. Dept.
Develop a framework for proper follow up of compliance with D&EC resolutions.	Approved framework for follow up on D&EC resolutions	D&ED
	Annual reports on compliance with D&EC resolutions	D&ED
Strengthen and equip regional offices	Number of fully equipped and operational regional offices	Dir. Corp. Serv.
Conduct sensitisation fora in the counties on KMPDC mandate, services, policies and guidelines	No. of themed social media posts	CC&PR Dept.
	No. of newsletters published	CC&PR Dept.
	Annual stakeholder conference reports	CC&PR Dept.
Publish periodic case books on D&EC cases that have been determined	No. of case books published	Dir. Standards Dir. C&PE Dir. R&L
Integrate case books into Continuous Professional Development (CPD)	No. of Casebook CPD activities	Dir. Standards Dir. C&PE Dir. R&L
Develop and review guidelines on professional conduct and discipline	Reviewed The Code of Professional Conduct and Discipline forwarded for publishing	Dir. Standards
	Ethical Guidelines for Health Facilities forwarded for publishing	Dir. Standards

ACTIVITY	OUTPUT INDICATOR(S)	RESPONSIBLE
Develop and implement framework on Alternative Dispute Resolution (ADR)	Functional ADR Framework	D&ED
	Annual report on proportion of D&EC cases determined by ADR	D&ED
Develop and implement framework for early identification of impairment in practitioners, and for support for impaired and "pre-impaired"	Functional framework for early identification and support for impairment in practitioners and interns	Dir. Standards
Review the Medical Practitioners and Dentists (Fitness to Practise) Rules and SOPs	Draft Rules forwarded for gazette	Dir. Legal Serv./ Dir. Standards
	Approved SOPs	Dir. Standards/ Dir. C&PE
Develop and/or review core curricular for undergraduate training	Approved core curricula forwarded for publishing	Dir. Standards
Develop and/or review internship training guidelines and logbooks	Internship guidelines and logbooks forwarded for publishing	Dir. Standards
Develop core curricula for postgraduate medical and dental training	Core curricula for postgraduate training forwarded for publishing	Dir. Standards
Develop and/or review Scopes of Practice	Reviewed list of recognised specialties and sub-specialties published	Dir. Standards
	Developed and/or reviewed Scopes of Practice published	Dir. Standards
Advertise vacancies and conduct interviews	Interview report	HRM&AD
Onboard successful applicants	No. of staff onboarded	HRM&AD
Conduct a skills/ staffing gap analysis	Skills and staffing gap analysis report	HRM&AD
Proper placement of staff	Proportion of staff properly placed	HRM&AD
Develop employee welfare policy	Approved employee welfare policy	HRM&AD
Engage SRC to conduct job evaluation	MOU/ contract with SRC	HRM&AD
Conduct the actual job evaluation exercise	Job evaluation report	HRM&AD
Implement of job evaluation recommendations	Implementation report	HRM&AD
Identify gaps in the current human resource instruments.	Report on gaps identified	HRM&AD
Engage the Public Service Commission	MOU/ Contract with PSC	HRM&AD
Review of the KMPDC Human Resource instruments.	Reviewed HR Instruments approved.	HRM&AD

ACTIVITY	OUTPUT INDICATOR(S)	RESPONSIBLE
Implement reviewed HR instruments	Implementation report	HRM&AD
Engage a consultant to conduct the perception and media audit	Engagement contract	CC&PR Dept
Carry out the perception and media audit	Perception and media audit report	CC&PR Dept
Develop a communication and media strategy through a consultancy	Communication and media strategy approved	CC&PR Dept
Develop the Monitoring, Evaluation, Reporting and Learning (MERL) Framework for the 2023/2024-2027/2028 Strategic Plan	Approved MERL Framework in place	SRQA Dept
Conduct Annual Monitoring of the 2023/2024 – 2027/2028 Strategic Plan	Annual report	SRQA Dept
Customise KMPDC Performance Contracts in line with its functions and pre-set targets	Approved annual KMPDC performance contract	SRQA Dept
Cascade the approved PC to directorates and department levels	Signed directorate and department performance contracts	SRQA Dept
Preparation of staff annual workplans	Signed staff annual workplans	SRQA Dept
Develop and implement the KMPDC policy framework on research	Approved KMPDC research policy	SRQA Dept
Conduct automation survey.	Automation survey report	ICT Dept.
Review KMPDC ICT policy	Approved policy	ICT Dept.
Upgrade and maintain KMPDC ICT security infrastructure	Secure ICT infrastructure	ICT Dept.
	Upgraded CCTV Surveillance	ICT Dept.
Install power backup solutions	Proportion of installation	ICT Dept.
Development of KMPDC ICT Business Continuity Plan	Approved and tested BCP	ICT Dept.
Develop a resource mobilisation policy	Approved resource mobilisation policy	Dir. Corp.Serv.
		F&A Dept.
Map out priority areas with budget deficit and lobby The National Treasury and National Assembly for additional funds.	Priority areas mapped out	F&A Dept.
Institute and assign vote controls	Budget performance report	F&A Dept.
		ICT Dept.
Sensitisations and training of staff on ERP	Training reports	F&A Dept.
		HRM&AD
Conduct pre-audits for all payments	Quarterly pre-audit reports	F&A Dept.

ACTIVITY	OUTPUT INDICATOR(S)	RESPONSIBLE
Training staff on prudent use of public resources	Training reports	F&A Dept. HRM&AD
Develop and deploy the internal Audit Management System	Functional Internal Audit Management System in place	Dir. Internal Audit
Train all staff on risk management and internal audit function	Training report	Dir. Internal Audit
Coordinate development of departmental risk registers	Departmental risk register in place	Dir. Internal Audit HODs
Submission of updated departmental risk registers quarterly	Quarterly departmental risk registers submitted	Dir. Internal Audit
Activate the supplier's portal	Functional supplier's portal	ICT Dept/ SCM Dept
Train supply chain staff on the use of supplier's portal	Staff training report	ICT Dept. SCM Dept.
Sensitise suppliers on the use of the supplier's portal	Report on the number of suppliers trained on the portal	ICT Dept. SCM Dept.
Develop and implement the KMPDC procurement, inventory and disposal policy in compliance with the PPDA, 2022	Approved procurement, inventory and disposal policy	SCM Dept.
Identify and code assets and monitor movement	Coded asset movement register	SCM Dept.
	Annual asset movement report	SCM Dept.
Develop annual procurement plan on ERP	Approved Procurement Plan and report	SCM Dept.

### 6.1.3. Performance Contracting

KMPDC will undertake performance contracting as a key accountability tool with a view to improve service delivery. To this end, all key activities in the annual workplan will be incorporated in KMPDC annual performance contracts.

## 6.2. Coordination Framework

KMPDC has identified a coordination framework for the achievement of activities and programmes that are key in the implementation of this Strategic Plan. The coordination framework details the institutional framework, staffing levels, skills set and competencies, leadership, and systems and procedures.

### 6.2.1. Institutional Framework

To support implementation of the strategic objectives and optimise performance, KMPDC has reviewed the existing organisation structure, policies, rules and regulations in line with set guidelines to ascertain appropriateness and adequacy towards the realisation of the set strategic direction. It is noted that the review also took cognisance of the changes in technology, environment, population dynamics and governance.

### 6.2.2. Staff establishment, Skill set and Competence development

One of the key areas of focus for human resource management and development is to attract and retain competent staff with requisite skill set for KMPDC through recruitment and selection. Human resource management and development will be guided by the Human Resource Plan which will involve identifying the Human resource requirements in terms of numbers, skills and competencies. In addition, Human Resource instruments will be reviewed to address dynamic human resource management and development issues.

KMPDC comprises of eighty-one (81) employees, with an approved establishment of one hundred and forty-nine (149), thus a shortage of sixty-eight (68). To address the staff shortage, KMPDC plans to recruit the sixty-eight (68) staff and undertake skills/competency gap analysis during the 2023-2028 strategic planning period. The staff establishment and the skills set and competence development are as shown in Table 6.3 and 6.4 respectively.



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*Human resource management and development will be guided by the Human Resource Plan which will involve identifying the Human resource requirements in terms of numbers, skills and competencies. In addition, Human Resource instruments will be reviewed to address dynamic human resource management and development issues*

### 6.2.3. Leadership

KMPDC has identified three (3) Key Result Areas for this Strategic Plan, namely Corporate Governance, Regulation and Enforcement, and Strategic Operations. The KRAs will be executed by the relevant Directorates and Departments, with clear responsibilities and established reporting lines to the Council through the CEO. The strategic theme teams for the key result areas are as shown in Figure 6.2 below

Figure 6.2: Strategic theme teams for the key result areas





## 6.2.4. Systems and Procedures

KMPDC will adopt a proactive, digital, and collaborative approach to achieve the set mandate. In so doing, KMPDC will:

- ⦿ Assess and refine its existing registration, licensing, and accreditation processes;
- ⦿ Have SOPs that are detailed and regularly updated for transparency and efficiency;
- ⦿ Align its standards with international best practices and offer CPD;
- ⦿ Transit to digital platforms to streamline processes, such as registration and renewals, while ensuring data security;
- ⦿ Map and optimise the journey of practitioners, from training to registration, promoting collaboration with training institutions and stakeholders;
- ⦿ Establish a feedback mechanism to continually enhance services;
- ⦿ Undertake annual reviews of systems and SOPs to keep up with the evolving healthcare landscape, and
- ⦿ Engage key stakeholders to ensure alignment with the broader healthcare goals towards Kenya achieving UHC.

## 6.3. Risk Management Framework

This Strategic Plan provides for Risk Management Framework necessary for a mechanism for management of situations that could cause KMPDC material, strategic, reputational, regulatory, legal, security and operational difficulties or losses.

In this strategic planning period, risk management shall be embedded within the processes and systems of KMPDC. The risks have been categorised as financial, reputation, operational, legal and organisational risks. Appropriate mitigation measures have been identified for each risk and the mitigations form part of the strategy formulation and implementation.

Table 6.5: Risk management framework

RISK CLASS/ CATEGORY	RISK AND DESCRIPTION	LIKELIHOOD (L/M/H)	SEVERITY (L/M/H)	OVERALL RISK LEVEL(L/M/H)	MITIGATION MEASURE(S)
<b>Financial risk</b>	Corruption/ Fraud/ Embezzlement and misappropriation of allocated funds	<b>H</b>	<b>H</b>	<b>H</b>	Automation of budgetary monitoring process  Quarterly reporting to Finance and Audit Committee
<b>Reputation risk</b>	Negative publicity	<b>M</b>	<b>H</b>	<b>H</b>	Advocacy  Enhance stakeholder engagement

RISK CLASS/ CATEGORY	RISK AND DESCRIPTION	LIKELIHOOD (L/M/H)	SEVERITY (L/M/H)	OVERALL RISK LEVEL(L/M/H)	MITIGATION MEASURE(S)
<b>Organisational risk</b>	Infiltration of quacks	<b>H</b>	<b>H</b>	<b>H</b>	Collaboration with other government agencies like DCI, police, other regulatory agencies to assist in rooting them out  Develop a mechanism for easy verification of registered practitioners and health facilities
	Inadequate staffing and human capacity development	<b>M</b>	<b>H</b>	<b>H</b>	Recruitment  Capacity building
	Malfunctioning of ICT systems	<b>M</b>	<b>H</b>	<b>H</b>	Strengthen ICT infrastructure
<b>Legal risk</b>	Non-compliance with the Act	<b>M</b>	<b>H</b>	<b>H</b>	Strengthen enforcement and compliance
	Overlapping legal mandates	<b>H</b>	<b>H</b>	<b>H</b>	Review of conflicting laws to give clarity to mandates
	Delayed resolution of complaints/ disputes	<b>M</b>	<b>H</b>	<b>H</b>	Fast track resolution of complaints
<b>Operational risks</b>	Pandemic	<b>M</b>	<b>H</b>	<b>H</b>	Situational awareness  Insurance
	Terrorism	<b>H</b>	<b>H</b>	<b>H</b>	Adapt a multi agency approach in verification of practitioners and health facility ownership prior to registration
	Fire	<b>M</b>	<b>H</b>	<b>H</b>	Develop a disaster management policy  Emergency preparedness  Training and fire drills
	Occupational Safety and Health	<b>M</b>	<b>M</b>	<b>M</b>	Implement recommendations of the OSH audit and accessibility assessment reports in all KMPDC premises

*Chapter Seven:*

# *Resource Requirements & Mobilisation Strategies*

This chapter outlines the resource requirements, resource mobilisation strategies, resource gaps and resource management methods that will ultimately inform resourcing during the strategic planning period.

## 7.1. Financial Requirements

The bulk of the funding shall be provided by The National Treasury. KMPDC shall also engage other stakeholders including the private sector and development partners to support some of the programmes. At the same time, efforts shall be made to improve the efficiency in resource utilisation, minimising duplication of efforts and optimising opportunities for inter-agency linkages in programme implementation during the strategic planning period.

## 7.2. Resource Mobilisation Strategies

To ensure optimal mobilisation and utilisation of financial resources, KMPDC will cost the services provided to its clients so that its budget is reflective of the market value. The specific resource mobilisation strategies to be pursued by KMPDC during this strategic planning period will include but not limited to: developing and implementing a Resource Mobilisation Policy; appointing a Resource Mobilisation Committee to oversee implementation of the Policy; and collaborating with national and county governments, and the private sector through public-private partnerships.



## *Chapter Eight:*

# *Monitoring, Evaluation & Reporting Framework*

This chapter provides the monitoring framework, performance standards, evaluation framework and the reporting framework as well as the feedback mechanism that KMPDC will employ to ensure successful implementation of this Strategic Plan.

## 8.1. Monitoring Framework

Monitoring framework provides the means to determine progress made in the implementation of the Strategic Plan through data collection, data analysis and reporting. As guided by the implementation plan and annual work plans, Directorates and Departments will prepare quarterly and annual performance reports on achievements. The Directorate reports, and those of the Council Committees will be collated to develop the KMPDC annual performance report.

## 8.2. Performance Standards

KMPDC will establish and adopt performance standards necessary to assess and evaluate the quality, efficiency, and effectiveness in implementing this Strategic Plan. To this end, performance teams will be appointed with the specific task of defining the key performance indicators, identifying outputs and outcomes as well as determining the performance levels.

## 8.3. Evaluation Framework

KMPDC will establish and adopt an evaluation framework to measure outcomes, as well as collect and analyse data. the evaluation framework will support the periodic assessment of the Strategic Plan relevance, performance, efficiency, and impact (both expected and unexpected).

### 8.3.1. Mid-Term Review

A Mid-Term Review (MTR) will focus on the degree to which planned results are on target, and the areas that may require improvement. The structured approach of conducting the MTR will include but not limited to; Gathering relevant information (Data collection), Establish Review Objectives, Assess Progress made, Identify Achievements and Challenges, Communicate Findings and Create an Action Plan.

### 8.3.2. End-Term Review

The End-Term Review will be undertaken as guided by the Mid-Term Review.

Table 8.1: Outcome performance matrix

KEY RESULT AREA	OUTCOME	OUTCOME INDICATOR	BASELINE		TARGET	
			VALUE	YEAR	MID-TERM PERIOD (2025/2026)	END OF PLAN PERIOD (2027/2028)
<b>KRA 1: Corporate Governance</b>	Improved legal compliance	Level of compliance	No legal audit done	2022/ 2023	50%	100%
	Improved management of cases	Operational case tracking system	No case tracking	2022/ 2023	50%	100%
	Improved quality of service delivery	ISO 17024:2012 accreditation certificate	70%	2022/ 2023	100%	-
	Increase development partner donor funding	Donor funding accounts for 10% of the total KMPDC budget	3M	2022	50%	100%
	Reduced turnaround time (TAT) for applications and registrations	TAT for processing applications and registrations reduced from 14 to 7 working days	14 working days	2022/ 2023	60% (10 working days)	100% (7 working days)
	Increased efficiency of inspection of health facilities and training institutions	Annual online inspection reports	No online inspection reports	2022/ 2023	-	1 annual report 100%
	Increased awareness of KMPDC mandate, functions and services	Proportion of registered Practitioners with active annual practice licences	65% of all registered practitioners	2022	90% of all registered practitioners	100% of all registered practitioners
		Proportion of registered health facilities with active annual operating licences	47% of all registered health facilities	2022	75% of all registered facilities	100% of all registered facilities
	Increased compliance with D&EC resolutions	Level of compliance with D&EC resolutions	30% compliance	2022/ 2023	60%	100%
		Improve efficiency in determination of D&EC matters	20% of D&EC cases filed in a calendar year referred for determination through ADR	5% of D&EC cases filed determined by ADR	2022	20% of cases filed determined by ADR (100%)
<b>KRA 3: Strategic Operations</b>	Standardise postgraduate training	Proportion of training institutions that have adopted the postgraduate core curricula	No core curricula for postgraduate training	2022/ 2023	30% of training institutions	100% of training institutions
	Improved human resource capacity	Proportion of practitioners and institutions complying with licensing requirements	65%	2022	90%	100%
	Enhanced KMPDC Corporate Image	Number people accessing Council's social media platforms and website increased from 9,000 to 40,000	9,000 followers	2021/ 2022	20,000 Followers (50%)	40,000 Followers (100%)
	Improved KMPDC operational efficiency in service delivery	Proportion of automated KMPDC services	No assessment	2022/ 2023	90%	100%
Expanded revenue streams	Progressively increase KMPDC revenue by 20%	836 M	2021/ 2022	10% increase (50%)	20% increase (100%)	



*KMPDC will establish and adopt performance standards necessary to assess and evaluate the quality, efficiency, and effectiveness in implementing this Strategic Plan*

*To this end, performance teams will be appointed with the specific task of defining the key performance indicators, identifying outputs and outcomes as well as determining the performance levels*

## **8.4. Reporting Framework and Feedback Mechanism**

A reporting framework entails written accounts of the progress of the implementation of the Strategic Plan which highlight key achievements, challenges, emerging issues, corrective measures taken and lessons learnt as guided by the implementation plan and annual work plans. This will be done at Department, Directorate and Council level in the form of quarterly and annual reports.

The reporting and feedback mechanism will be done quarterly and annually as per the templates provided in tables 8.2, 8.3 and 8.4. It is noted that, the Strategic Plan will be subjected to a mid-term review (FY 2025/2026) as well as an end-term review (FY 2027/2028). The terms of reference for both reviews will be guided by reports emanating from the monitoring reports.







Table 8.4: Evaluation reporting template

KEY RESULT AREA	OUTCOME	OUTCOME INDICATOR	VALUE		MID-TERM EVALUATION		END-TERM EVALUATION		REMARKS	CORRECTIVE INTERVENTION
			BASELINE	YEAR	TARGET	ACHIEVEMENT	TARGET	ACHIEVEMENT		
<b>KRA 1: Corporate Governance</b>	Improved legal compliance	Level of compliance	No legal audit done	2022/2023	50%		100%			
	Improved management of cases	Operational case tracking system	No case tracking	2022/2023	50%		100%			
	Improved quality of service delivery	ISO 17024:2012 accreditation certificate	70%	2022/2023	100%		100%			
	Increase development partner donor funding	Donor funding accounts for 10% of the total KMPDC budget	3M	2022	50%		100%			
	Reduced turnaround time (TAT) for applications and registrations	TAT for processing applications and registrations reduced from 14 to 7 working days	14 working days	2022/2023	60% (10 working days)		100% (7 working days)			
<b>KRA 2: Regulation And Enforcement</b>	Increased efficiency of inspection of health facilities and training institutions	Annual online inspection reports	No online inspection reports	2022/2023	0		1 annual report 100%			
	Increased awareness of KMPDC mandate, functions and services	Proportion of registered Practitioners with active annual practice licences	65% of all registered practitioners	2022	90% of all registered practitioners		100% of all registered practitioners			
		Proportion of registered health facilities with active annual operating licences	47% of all registered health facilities	2022	75% of all registered facilities		100% of all registered facilities			
	Increased compliance with D&EC resolutions	Level of compliance with D&EC resolutions	30% compliance	2022/2023	60%		100%			

KEY RESULT AREA	OUTCOME	OUTCOME INDICATOR	VALUE		MID-TERM EVALUATION		END-TERM EVALUATION		REMARKS	CORRECTIVE INTERVENTION
			BASELINE	YEAR	TARGET	ACHIEVEMENT	TARGET	ACHIEVEMENT		
<b>KRA 2: Regulation And Enforcement</b>	Improve efficiency in determination of D&EC matters	20% of D&EC cases filed in a calendar year referred for determination through ADR	5% of D&EC cases filed determined by ADR	2022	20% of cases filed determined by ADR (100%)	20% of cases filed determined by ADR (100%)				
	Standardise postgraduate training	Proportion of training institutions that have adopted the postgraduate core curricula	No core curricula for postgraduate training	2022/2023	30% of training institutions	100% of training institutions				
	Improved human resource capacity	Proportion of practitioners and institutions complying with licensing requirements	65%	2022	90%	100%				
<b>KRA3: Strategic Operations</b>	Enhanced KMPDC Corporate Image	Number people accessing Council's social media platforms and website increased from 9,000 to 40,000	9,000 followers	2021/2022	20,000 Followers	40,000 Followers				
	Improved KMPDC operational efficiency in service delivery	Proportion of automated KMPDC services	No assessment	2022/2023	90%	100%				
	Expanded revenue streams	Progressively increase KMPDC revenue by 20%	836 M	2021/2022	10% increase (50%)	20% increase (100%)				

*End Notes:*

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The first part of the document discusses the importance of maintaining accurate records of all transactions. This includes not only sales and purchases but also any other financial activities that may occur. It is essential to ensure that all entries are properly documented and supported by appropriate evidence.

In addition, the document emphasizes the need for regular reconciliation of accounts. This process involves comparing the company's internal records with the bank statements to identify any discrepancies. By doing so, the company can ensure that its financial statements are accurate and reliable.

Another key aspect of financial management is the timely payment of bills and invoices. Failure to do so can result in penalties, interest charges, and damage to the company's credit rating. Therefore, it is crucial to establish a system for tracking and paying all obligations on time.

Finally, the document highlights the importance of maintaining a clear and concise record of all financial transactions. This record should be easily accessible and understandable to all relevant parties. By doing so, the company can ensure that its financial information is transparent and trustworthy.

In conclusion, the document provides a comprehensive overview of the financial management process. It covers the importance of accurate record-keeping, regular reconciliation, timely payment of bills, and maintaining a clear and concise record of all transactions. By following these guidelines, the company can ensure that its financial information is accurate, reliable, and transparent.

The first part of the document discusses the importance of maintaining accurate records of all transactions. It emphasizes that every entry, no matter how small, should be recorded to ensure the integrity of the financial data. This includes not only sales and purchases but also expenses and income. The document provides a detailed explanation of how to categorize these transactions and how to use a double-entry system to ensure that the books balance.

The second part of the document focuses on the process of reconciling the books. It explains how to compare the company's records with bank statements and other external sources to identify any discrepancies. This process is crucial for detecting errors and preventing fraud. The document provides a step-by-step guide to performing a reconciliation, including how to investigate and resolve any differences.

The third part of the document discusses the importance of regular audits. It explains that audits are necessary to ensure that the financial statements are accurate and reliable. The document provides a list of common audit procedures and explains how to prepare for an audit. It also discusses the role of the auditor and how to respond to any findings.

The fourth part of the document discusses the importance of maintaining accurate records of all assets and liabilities. It explains how to value these assets and liabilities and how to record them in the books. The document provides a detailed explanation of how to calculate the net worth of the company and how to use this information to make financial decisions.

The fifth part of the document discusses the importance of maintaining accurate records of all taxes. It explains how to calculate taxes and how to record them in the books. The document provides a detailed explanation of how to prepare tax returns and how to pay taxes. It also discusses the importance of keeping records of all tax payments and receipts.

The sixth part of the document discusses the importance of maintaining accurate records of all income and expenses. It explains how to calculate income and expenses and how to record them in the books. The document provides a detailed explanation of how to prepare a profit and loss statement and how to use this information to make financial decisions.

The seventh part of the document discusses the importance of maintaining accurate records of all assets and liabilities. It explains how to value these assets and liabilities and how to record them in the books. The document provides a detailed explanation of how to calculate the net worth of the company and how to use this information to make financial decisions.

The eighth part of the document discusses the importance of maintaining accurate records of all taxes. It explains how to calculate taxes and how to record them in the books. The document provides a detailed explanation of how to prepare tax returns and how to pay taxes. It also discusses the importance of keeping records of all tax payments and receipts.

The ninth part of the document discusses the importance of maintaining accurate records of all income and expenses. It explains how to calculate income and expenses and how to record them in the books. The document provides a detailed explanation of how to prepare a profit and loss statement and how to use this information to make financial decisions.

The tenth part of the document discusses the importance of maintaining accurate records of all assets and liabilities. It explains how to value these assets and liabilities and how to record them in the books. The document provides a detailed explanation of how to calculate the net worth of the company and how to use this information to make financial decisions.



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