



REPUBLIC OF KENYA



KENYA HEALTH PROFESSIONS
OVERSIGHT AUTHORITY

— KHPOA —

*Transforming Health Provision for
Quality and Ethical Care*

KENYA HEALTH PROFESSIONS OVERSIGHT AUTHORITY

STRATEGIC PLAN

2023/2024 – 2027/2028

KENYA
VISION **2030**

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OVERSIGHT AUTHORITY
KHPOA
*Transforming Health Provision for
Quality and Ethical Care*



— VISION —

A trusted and reputable authority in health transformation

— MISSION —

To provide effective and responsive oversight in the regulation of health services and professionals.

— CORE VALUES —

Customer Centric

Professionalism

Team Spirit

Transparency and accountability

FOREWORD



The unveiling of the Kenya Health Professions Oversight Authority's (KHPOA) inaugural Strategic Plan for the period 2023/2024 – 2027/2028 marks the start of a transformative journey for the organisation since its birth in 2019.

In accordance with the Health Act No. 21 of 2017, KHPOA was established with a solemn mandate - to exercise vigilant oversight over the provision of health services nationwide. Today, as we embark on the implementation of our first-ever strategic plan, we stand poised to fulfill this mandate with renewed vigour and purpose.

The development of this strategic plan has been an incredible and meticulous endeavour, considering both the macro and micro-operating environments that influence our organisation. Drawing inspiration from global health frameworks such as the World Health Organization's essential health pillars and Africa's Agenda 2063, our plan is firmly anchored in the pursuit of sustainable health outcomes for all Kenyans.

At its core, this strategic plan serves as a roadmap for KHPOA, guiding our actions and decisions as we navigate the complex landscape of healthcare regulation and oversight. By outlining our strategic objectives and priorities, this plan provides a clear

direction for our organisation, ensuring that we remain focused on our mission of upholding the highest standards of professionalism, integrity, and accountability within the healthcare sector.

Indeed, our analysis of both external and internal operating environments has revealed a landscape that is ripe with opportunities and challenges. While we boast notable strengths such as a robust legal framework, competent leadership, and favourable sector policies, we are not immune to the teething challenges of a newly established entity.

This strategic plan outlines key issues that will help us to address our challenges with a view to paving the way for growth initiatives over the next five years. With a focus on five key result areas – Health Professional Regulation, Right to Health, Health Service Delivery, Strategic Information, Research, and Innovation, and Institutional Capacity Development – we are poised to drive meaningful change within the healthcare landscape under this strategic plan.

Crucially, the successful implementation of our strategic plan hinges upon robust coordination, resource mobilisation, and strategic risk management. With an estimated resource requirement of approximately KES 2.841 Billion, we are committed to leveraging a diverse array of funding sources, including exchequer subventions, appropriation-in-aid, and external partnerships.

As we embark on this journey of transformation, we extend our deepest gratitude to the Office of the Cabinet Secretary for Health for providing an enabling environment to implement the strategic plan. Together, let us forge ahead with unwavering resolve, guided by the principles of excellence, innovation, and collaboration. The journey ahead may be challenging, but with unity of purpose and steadfast determination, we are confident in our ability to realise our vision of a healthier, more equitable Kenya.

Dr. Amit Thakker
Chairperson, Kenya Health Professions Oversight Authority, Board of Directors.

ACKNOWLEDGEMENT



I extend my profound appreciation to the Kenya Health Professions Oversight Authority (KHPOA) Board for their exceptional leadership and steadfast commitment throughout the duration of the development of our inaugural Strategic Plan for the Period 2023/2024 – 2027/2028.

Under Board's visionary guidance, KHPOA has managed to develop a most visionary strategic plan that will enable the organisation to evolve into a dynamic and forward-thinking agency dedicated to upholding the highest standards of professionalism,

integrity, and accountability within the healthcare sector. The Board's invaluable insight, guidance, and support have been instrumental in shaping the strategic direction of KHPOA for the next five years.

I would also like to express my sincere gratitude to Sasa Media, our esteemed consultants, for their expertise and dedication in developing this strategic document. Their collaborative approach, attention to detail, and commitment to excellence have been integral to the successful formulation of our strategic plan.

Additionally, I extend my deepest appreciation to our sponsors, specifically Amref Health Africa for the generous support in funding the launch event of our strategic plan. The organisation's commitment to advancing healthcare in Kenya is commendable, and we are grateful for their partnership in realising our shared vision.

Furthermore, I would like to send special thanks to all stakeholders who were consulted for generously sharing their insights and expertise. Your invaluable contributions have enriched our understanding of the challenges and opportunities within the healthcare sector, informing the strategic priorities outlined in our plan.

On behalf of the entire KHPOA team, I appreciate everyone who participated in the development of the strategic plan including all our staff. Together, we are poised to embark on a transformative journey towards a healthier, more prosperous future for Kenya.

Dr KIOKO Jackson K., MBs, EBS
Chief Executive Officer
Kenya Health Professions Oversight Authority.

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CONCEPTS AND TERMINOLOGIES

	Description
Annual Work Plan:	The breakdown of the intended yearly activities with timelines and resources that are required.
External Stakeholders:	Those who do not directly work with a company but are affected by the actions and outcomes of the business such as suppliers, creditors, and the public.
Internal Stakeholders:	Those directly involved in running an organisation or a given project and who have a legitimate interest.
Key Result Area:	Broad area of focus which the organisation has identified and is expected to deliver results on within a specified or defined period of time.
Outcome:	The intermediate results generated relative to the objective of an intervention.
Output:	Product, service or immediate result - tangible or intangible - emanating directly from the implementation of activities.
Performance Contracting:	It is a freely negotiated performance agreement between the Government, acting as the owner of an MDA and the Management of the agency.
Strategic Goal:	General qualitative statement on what an organisation is hoping to achieve in the long term.
Strategic Issue:	The problems or opportunities emanating from situational analysis that an organisation has to manage in order to be able to fulfil its mandate and mission.
Strategic Objectives:	What an organisation commits itself to accomplish in order to achieve strategic goals.
Strategic Plan:	A set of processes and programmes that define the intentions and the desired direction an organisation wishes to take within a particular period (Normally more than 2 years) in tandem with the national, regional, and global development agenda.

ACRONYMS AND ABBREVIATIONS

A-I-A	Appropriation in Aid
BETA	Bottom-Up Economic Transformation Agenda
BoD	Board of Directors
CPD	Continuing Professional Development
DHSQAR	Department of Health Standards, Quality Assurance and Regulation
EAC	East African Community
KHHRAC	Kenya Health Human Resource Advisory Council
KHPOA	Kenya Health Professions Oversight Authority
KMPDC	Kenya Medical Practitioners and Dentists Council
MoH	Ministry of Health
MTP	Medium Term Plan
NJHIC	National Joint Health Inspection Checklist
PESTELE	Political, Economic, Socio-cultural, Technological, Ecological Legal and Ethical Factors
SDGs	Sustainable Development Goals
SWOT	Strengths, Weakness, Opportunities and Threats
UHC	Universal Health Coverage
WHO	World Health Organization

EXECUTIVE SUMMARY

The Kenya Health Professions Oversight Authority, classified as a regulatory corporation under category PC 6, was founded in accordance with the Health Act No. 21 of 2017. Its principal responsibility is to exercise vigilant oversight over the provision of health services nationwide. The Authority began its operations in May 2019, and its board of directors was officially inaugurated in April 2022. The 2023/2024-2027 Strategic Plan is the first for the Authority.

This strategic plan considers both the macro and micro operating environment of the Authority. The macro environment begins with the World Health Organization's essential health pillars, which collectively serve as the basis for attaining and sustaining global health. Subsequently, it considers the health-related Sustainable Development Goals, Africa's Agenda 2063 for socio-economic development, and regional development blueprints. Additionally, the plan aligns with the country's Vision 2030, the Government's Bottom-Up Economic Transformation Agenda, and the Fourth Medium-Term Plan. The evaluation of these frameworks informs the identification and planning of the Authority's contributions to their successful implementation.

The analysis of both the external and internal operating environments reveals that the Authority possesses substantial opportunities and notable strengths to effectively fulfil its mandate. Internally, the Authority has three key strengths: a legal framework for overseeing health service delivery and professionals, a competent team of management and staff, and an effective governance structure. Externally, the favourable health sector policy environment and political support under the Bottom-Up Economic Transformation Agenda present significant opportunities for the Authority to carry out its mandate.

However, the Authority is grappling with certain weaknesses, often associated with the initial challenges typical of a newly established public entity. These weaknesses include an inadequate number of staff - currently at 15 compared to the established complement of 89 - limited visibility, insufficient corporate-level resources, and systems that are still a work in progress. Thus far, the most significant threat to the execution of the Authority's mandate arises from conflicting sections of regulatory laws that impact on its mandate.

In light of this scenario, several strategic issues have been identified, namely (i) Uncoordinated and conflicting health professional regulations, (ii) Unregulated Health Cadres (iii) Quality of health service provision in the country, (iv) Misinformation about the Authority's mandate and its functions, (v) Resistance to health regulatory oversight, (vi) Inadequate staffing, (vii) Inadequate corporate



The KHPOA Board of Directors poses for a group photo during the Consultative Meeting with Chairpersons and CEOs/ Registrars of Health Regulatory Boards and Councils

level resources, and facilities, (viii) Harmonising health facilities regulation across the Country and (ix) Underdeveloped business processes.

Consequently, the Authority is set to pursue growth strategic initiatives for the next five years. The Strategic Plan is centred on five key result areas: (i) Health Professional Regulation, (ii) Right to Health, (iii) Health Service Delivery, (iv) Strategic Information, Research and Innovation, and (v) Institutional Capacity Development.

The execution of the Strategic Plan will be decentralised across all operational levels within the corporate structure of the Authority. The coordination framework encompasses operational work plans, performance management via performance contracting, and the overall management structure of the Authority. The estimated resources required for successful implementation, covering financial, human, and physical aspects, amount to approximately KES 2.841 billion. The Authority intends to fund the plan through exchequer subventions, appropriation-in-aid, and external funding from partners.

To ensure effective implementation, the Authority plans to integrate a strategic risk management approach into its governance system. It will also develop risk management processes aimed at diminishing both the frequency and impact of risks. Specific mitigation measures have been identified for each clustered risk, and these measures will be integrated in the risk management strategy and executed throughout the implementation period.

Introduction

1

1.1 STRATEGY AS AN IMPERATIVE FOR THE KENYA HEALTH PROFESSIONS OVERSIGHT AUTHORITY

The Kenya Health Professions Oversight Authority (KHPOA) requires a comprehensive strategic plan to effectively carry out its important role in safeguarding healthcare and enabling the right to health across the country. The strategic plan addresses various aspects, including regulatory compliance, coordination of health facility inspections, professional conduct, risk management, and proactive planning. In a sector with many stakeholders, achieving unity of purpose is crucial. To facilitate this, both management and leadership need a blueprint to communicate a shared vision. Recognising this necessity, KHPOA acknowledges the importance of a well-structured strategic plan. This plan becomes particularly critical in navigating the myriad challenges within the health sector, such as uncoordinated health facility inspections, compromised healthcare and training standards, issues related to registration and licensing, compromised professional conduct and ethics, and conflicting health regulatory laws.

The strategic plan allows the Authority to stay attuned to contextual factors that may impact the effective execution of its mandate. For KHPOA, regulatory compliance is a critical responsibility, involving staying updated on evolving health standards, laws, and guidelines to ensure healthcare providers and institutions adhere to the set norms and standards and protocols. Regular audits and inspections aid in identifying areas for improvement and facilitate compliance, contributing to a safer and more efficient healthcare environment. Risk management is integrated into the strategic plan to proactively identify and mitigate potential threats to healthcare. This entails scenario planning, developing response protocols for various contingencies, and continuous monitoring and evaluation of potential risks. A dynamic risk management strategy ensures that the authority is well-prepared to handle unforeseen challenges.

Furthermore, periodic reviews of the strategic plan empower the Authority to engage in proactive planning, staying ahead of health trends and emerging issues. This involves conducting research, collaborating with experts, and utilising data analytics to identify patterns and potential threats. A well-crafted strategy not only ensures the Authority's responsiveness to current health challenges but also positions it to navigate future uncertainties in the dynamic field of healthcare delivery.

1.2 THE CONTEXT OF STRATEGIC PLANNING

The context for development of this strategic plan considered various development frameworks at the global, continental, regional and national levels.

1.2.1 The World Health Organization

The World Health Organization (WHO) recognises several key health pillars that collectively form the foundation for achieving and sustaining global health. These pillars play a critical role in promoting overall well-being, preventing diseases, and ensuring universal access to essential healthcare services.

Amongst these pillars relevant to an oversight body of KHPOA's profile include: (a) Recognition of social determinants of health, which underscores the importance of addressing underlying social, economic, and environmental factors influencing health outcomes (b) Aligning health efforts with broader global development goals, the Health-related Sustainable Development Goals (SDGs) and, (c) Health systems strengthening which is essential for building and maintaining robust healthcare systems capable of delivering quality services to all. This pillar involves improvements in infrastructure, workforce training, health information systems, and governance to ensure efficient and equitable healthcare delivery.

1.2.2 United Nations 2030 Agenda for Sustainable Development

The United Nations 2030 Agenda provides a shared blueprint for Sustainable Development for people and the planet now and into the future. The Authority has an important role to play in advancing the health-related Sustainable Development Goals (SDGs) as they are relevant to its mandate and will, during the plan period, focus on monitoring of eight goals as set out in Table 1.1.

Table 1.1: The Authority's Role in SDGs

S/No.	SDG Description	Strategic Response by the Authority
1	SDG 3: Good Health and Well-Being. Ensure healthy lives and promote well-being for all at all ages	<ul style="list-style-type: none"> ■ Enhance accountability and transparency in regulation of health professionals ■ Foster compliance to norms and standards by health professionals ■ Enhance compliance to norms and standards in service delivery. ■ Coordinate development of a priority list of cadres of health professionals needed in the country ■ Compliance to health professional standards
<i>The following SDGs are not exclusively health goals but are universally perceived to significantly contribute to health outcomes</i>		
2	Goal 1: Zero Hunger. Good nutrition and diet contribute to reduced hunger and promotes good health and wellbeing.	<ul style="list-style-type: none"> ■ Compliance to health professional standards that involves nutritionists and dieticians.

S/No.	SDG Description	Strategic Response by the Authority
3	Goal 4: Quality education linked to better health knowledge, healthier behaviour, and improved access to healthcare	<ul style="list-style-type: none"> ■ Sensitisation, advocacy and awareness on the mandate of the Authority, health rights and complaint handling mechanism.
4	Goal 5: Gender Equality: Achieving gender equality is essential for addressing various health issues, such as maternal health	<ul style="list-style-type: none"> ■ Foster compliance to norms and standards by health professionals
5	Goal 6: Clean Water and Sanitation: Access to clean water and sanitation is fundamental to preventing waterborne diseases and promoting overall health.	<ul style="list-style-type: none"> ■ Compliance to health professional standards ■ Promote health facility standards. ■ Collaboration with other stakeholders.
6	Goal 10: Reduced Inequalities: promoting equitable access to healthcare services and addressing social determinants of health.	<ul style="list-style-type: none"> ■ Develop complaint handling and feedback mechanism ■ Compliance to health professional standards ■ Enhance compliance to health facilities norms and standards
7	Goal 11: Sustainable Cities and Communities: improving living conditions, reducing pollution, and promoting physical activity impacts health outcomes	<ul style="list-style-type: none"> ■ Enhance the capabilities of the Authority in forecasting and planning ■ Institutionalise research
8	Goal 17: Partnerships for the Goals: Sustainable Development. Collaboration and partnerships are crucial for achieving health-related SDGs.	<ul style="list-style-type: none"> ■ Develop and enhance partnerships within the sector for resource mobilisation and leveraged coordinated efforts in the provision of health care

1.2.3. African Union Agenda 2063

The African Union Agenda 2063 serves as a blueprint for guiding the socio-economic transformation of the continent over the next five decades. Comprising seven aspirations, each with its set of goals, the Agenda envisions propelling Africa towards the realisation of its vision for the year 2063. These aspirations summarise the collective ambition for shared prosperity, unity and integration, a continent of liberated citizens with expanded horizons, the fulfilment of the full potential of women and youth, and the attainment of freedom from disease. Central to this vision is the imperative for the health sector to liberate the continent from the shackles of disease.

Under the aspiration of achieving a prosperous Africa based on inclusive growth and sustainable development, the Agenda demonstrates a resolute commitment to eradicating poverty within one generation. It seeks to foster shared prosperity through the social and economic transformation of the continent. One of the goals within this aspiration is to ensure the health and nourishment of citizens, with a focus on expanding access to quality healthcare services, particularly for women and

girls. In pursuing this goal, the Agenda is aligned to the pillars of the WHO and the relevant SDGs related to health. In addition, the African Union through the Africa Centres for Disease Control and Prevention (Africa CDC), has reinforced the importance of regional health security mechanisms to address global health issues in an agile and contextualised manner. To this end, a framework for action, “A New Public Health Order for Africa” was launched in 2021. The framework has five strategic pillars i.e. strengthened public health institutions, strengthened public health workforce, expanded manufacturing of vaccines, diagnostics and therapeutics, increased domestic resources for health security and respectful and action-oriented partnerships.

By aligning its strategic objectives with the aspirations and relevant goals of Africa Agenda 2063 and the Public Health Order for Africa, KHPOA is positioned to significantly enhance the effective delivery of health services. In doing so, KHPOA not only contributes to the broader goal of a healthy and prosperous Africa but also plays a crucial role in advancing the socio-economic transformation of the country and, by extension, the entire continent. This synergy underscores the interconnectedness of health and socio-economic development, positioning KHPOA as a key player in the realisation of Africa’s long-term vision for 2063.

1.2.4. East Africa Community Vision 2050

The East African Community (EAC) Vision 2050 serves as an important strategic framework, emphasising the significance of regional economic integration and the establishment of a unified market within the area. Recognising health, alongside education, nutrition, and safety nets, as important drivers of economic transformation and growth, the Vision is designed to ignite sustained investments in health infrastructure systems and the capacity development of healthcare personnel. It envisions reinforcing both preventive and curative capacities, aiming to cultivate a healthy and productive sub-region that is resilient against diseases and pandemics. The EAC Partner States aspire to strengthen health systems through improved health financing, recruitment, development, training, and the retention of the healthcare workforce. This ambitious goal seeks realisation through enhanced distribution and access to safe, affordable, effective, and high-quality medicines, vaccines, and medical technologies, alongside improvements in access to health services and infrastructure. The Vision underscores the need to:

- Strengthen collaboration among health sectors and related institutions in the region,
- Reinforce and harmonise health and health-related policies, strategies, and plans,
- Unify health and health-related legislation and regulations,
- Ensure uniform standards for services, products, and technologies,
- Strengthen the coordination of development support and engage with other stakeholders.

Furthermore, the Vision anticipates a significant enhancement in access to basic health services throughout the Vision 2050 period.

In its capacity as the overarching health oversight body in the country, KHPOA aligns with the EAC’s Vision 2050 by strengthening collaboration among health stakeholders, facilitating adherence to health professional standards, and developing criteria to transform health professions regulation in harmony with the region’s objectives. This alignment positions KHPOA as a key force contributing to the realisation of a healthier and more integrated East African Community.

1.2.5. Constitution of Kenya

The 2010 Constitution of Kenya establishes the primary legal structure to ensure a comprehensive, rights-based approach to the delivery of health services. It asserts that every individual possesses the right to the highest achievable standard of health, including reproductive health rights. Additionally, the Constitution demands that no person should be deprived of emergency medical treatment. Furthermore, it obligates the State to furnish suitable social security to individuals who are incapable of sustaining themselves and their dependents. KHPOA as a state organ will, in implementing this Strategic Plan, adhere to and be guided by the principles set out in the Constitution.

Table 1.2 highlights some constitutional provisions relevant to the KHPOA’s mandate and how the strategic plan can help implement these provisions.

Table 1.2: Provisions of Kenyan Constitution relevant to the Authority’s mandate

S/No	Article	Description	Strategic Response by the Authority
1	Article 43 (1) (a). Right to health care	Every person has the right to the highest attainable standard of health, which includes the right to health care services, including reproductive health care;	Ensure alignment of health standards and policies to the word and spirit of this Article
2	Chapter Six: Leadership and Integrity	Demand for responsible leadership, good conduct of state officers, financial probity among others	Adhere to the principles of leadership and integrity enforced and institutionalised
3	Article 10: National Values and Principles of Governance	National values and principles of governance.	Adhere to the national values and principles of governance.
4	Article 46: Consumer Rights	Rights of consumers to goods and services of reasonable quality, the right to information, to the protection of their health, safety, etc.	Facilitate compliance to patient rights to information about their health and medical treatment they are subjected to.
5	Article 174: Principles of Devolved Government	Emphasises devolved governance and recognition that health is a devolved function	Support and collaboration with county governments in health delivery regulation
6	Article 201: Public Finance Management	Emphasises prudent and responsible use of public resources	Adherence to financial regulations and accountability in managing resources allocated to the health sector.
7	Article 227: Procurement of public goods and services	Procurement of public goods and services.	Adhere to a system that is fair, equitable, transparent, competitive and cost effective in all its procurement processes.
8	Article 232: Values and Principles of Public Service:	Values and principles that underpin public service i.e., integrity, transparency, and accountability.	Uphold these values and principles of public service as stipulated in the Article.

1.2.6. National Agenda

KHPOA has aligned the Strategic Plan to effectively contribute towards the achievement of national development agenda articulated in the Kenya Vision 2030, the Bottom-Up Economic Transformation Agenda (BETA) and the Fourth Medium Term Plan.

1.1.4.1. Kenya Vision 2030

The Kenya Vision 2030 functions as a strategic blueprint aimed at propelling Kenya into a middle-income, industrialised nation, ensuring a superior quality of life for its citizens by the year 2030. Rooted in three fundamental pillars - economic, social, and political - the Vision aligns with the constitutional guarantee of the right to the highest attainable standards of healthcare for all citizens. This constitutional commitment serves as the foundation for the incorporation of universal healthcare within the Vision 2030 framework, subsequently carried forward in the Fourth Medium-Term Plan (MTP IV) and embraced in the BETA.

1.1.4.2. Bottom-Up Economic Transformation Agenda

The Fourth Medium-Term Plan has been aligned to the Bottom-up Economic Transformation Agenda. The BETA thematic area within the health sector aims to advance the accessibility of high-quality and cost-effective healthcare to foster the socio-economic development of the nation. The overarching goal of the Universal Health Coverage (UHC) is to guarantee that all Kenyans have access to quality health care without facing financial burden. Beyond merely addressing health financing, UHC involves the establishment of streamlined healthcare delivery systems, ample health facilities and human resources, robust information systems, effective governance, and supportive legislation.

The Universal Healthcare Policy focuses on the expansion of the population that is covered by the health services design of a single essential health benefit package. This will ensure access to a wide range of service areas, including primary health care and establishment of financial risk protection mechanisms to ensure a united financial scheme with resource mobilisation, pooling and purchasing as delinked functions.

In this Strategic Plan Period, KHPOA has aligned its strategic objectives to effectively contribute towards the implementation of the country's development agenda in the health sector through several initiatives:

- a) Enhancing accountability and transparency in health professional regulation;
- b) Fostering compliance to norms and standards by health professionals;
- c) Coordinating development of a priority list of health professionals' cadres needed in the country;
- d) Develop criteria/framework to transform regulation of health professions;
- e) Sensitisation, advocacy and awareness on the mandate of the Authority, health rights and creation of a complaint handling mechanism;
- f) Compliance to health professional standards;
- g) Promoting health facility standards for patient safety.

1.2.7. Other Sector Policies and Laws

The Health Act, 2017: This is the primary legislation that establishes the Authority. The functions and mandate of the Authority are stipulated under this Act. The Act also spells out the composition and

powers of the Authority as well as the basis for the terms and conditions of services for its Board, the Chief Executive Officer and its staff. The implementation of the Health Act is realised through the Health Regulations and other sector laws.

Other Sector Laws: Presently, the regulation of health services and professions involves the participation of 10 health regulatory bodies, each established through individual Acts of Parliament. These acts are:

- a) The Clinical Officers Council established under Clinical Officers Act Cap 260;
- b) The Nursing Council of Kenya established under Nurses Act Cap 257;
- c) Kenya Medical Laboratory Technicians and Technologists Board established under Medical Laboratory Technicians and Technologists Act Cap 253A;
- d) Medical Practitioners and Dentists Council established under the Medical Practitioners and Dentists Act Cap. 253;
- e) Kenya Nuclear Regulatory Authority established under the Nuclear Regulatory Act No. 29 of 2019;
- f) Pharmacy and Poisons Board established under the Pharmacy and Poisons Act Cap 244.
- g) Kenya Nutrition and Dietetics Institute established under the Nutritionists and Dieticians Act Cap 253B;
- h) Public Health Officers and Technicians Council established under the Public Health Officers (Training, Registration and Licensing) Act No, 12 of 2013;
- i) Physiotherapy Council of Kenya established under the Physiotherapists Act, 2014 No.20 of 2014
- j) Health Records and Information Managers Board established under Health Records and Information Managers Act, 2016

Within most of these Acts are areas of potential conflict/overlap that would require mandates to be harmonised for effective execution of regulatory functions.

The Kenya Health Policy 2014–2030: The overarching objective of the Kenya Health Policy 2014-2030 is to enhance the health and well-being of the entire Kenyan population by ensuring the delivery of fair, affordable, accessible, and high-quality health services. In pursuit of this vision, KHPOA serves an important role in promoting adherence to health standards and policies to ensure the achievement of optimal healthcare for all. Beyond regulatory functions, KHPOA will actively collaborate with the Government and various stakeholders to formulate criteria that drive transformative changes in health professions. Furthermore, the Authority will actively engage in health promotion initiatives focused on ensuring patient safety.

Kenya Universal Health Coverage Policy 2020–2030: Universal health coverage UHC is purposed to transforming the country’s health sector for enhanced service delivery. The Policy’s objectives are four: (i) Strengthen access to health services; (ii) Ensure quality of health services; (iii) Protect Kenyans from the financial risks of ill-health, and (iv) Strengthen the responsiveness of the health system in Kenya. As an overarching regulator, KHPOA supports these initiatives and plans to facilitate compliance as well as participate in the sensitisation, advocacy and awareness creation of the importance of UHC in equitable health care.

1.3. HISTORY OF THE KHPOA

The Kenya Health Professions Oversight Authority was instituted pursuant to Part VI of the Health Act No. 21 of 2017. Its primary mandate is to exercise vigilant oversight over the delivery of health services within the nation. Under Section 45 of the Health Act, KHPOA is established as a juridical entity, governed by a Board. In essence, the Authority oversees the health regulatory boards and councils.

The core objective of the Authority is to address critical deficiencies within the health sector. These deficiencies include issues such as the haphazard inspection of health facilities, compromised standards in healthcare and training, challenges in the registration and licensing processes, lapses in professional conduct and ethics, and conflicts arising from conflicting health regulatory laws. KHPOA has been categorised by the State Corporation Advisory Committee (SCAC) as a Regulatory Corporation category PC 6.

Operating as a proactive and well-organised entity, KHPOA endeavours to address these gaps and promote a more cohesive and efficient healthcare system in Kenya. The establishment of KHPOA as a corporate body with a dedicated Board underscores a commitment to improving the quality, integrity, and regulatory framework of health services in the country. The Authority commenced operations in May 2019, while its board of directors was inaugurated in April 2022 setting the pace for take-off.

Before the implementation of the Health Act, the Ministry of Health was engaged in the formulation, oversight, and enforcement of standards through the Department of Health Standards, Quality Assurance and Regulation, along with various Health Regulatory Boards and Councils.

1.4. METHODOLOGY OF DEVELOPING THE STRATEGIC PLAN

The objective of formulating the strategic plan was to identify, prioritise, sequence, and establish time-bound medium-term interventions that would enable KHPOA to fulfil its mandate. The Board of Directors, holding the overall responsibility for KHPOA's strategic direction, authorised the Management to initiate the planning process. Sasa Media Services Ltd was enlisted as the Consultant to guide the organisation through this strategic planning endeavour.

To facilitate the development of the strategic plan, a Strategic Plan Committee was established with clear Terms of References (ToR). The aim was to align the plan with the Kenya Vision 2030, BETA, the Fourth Medium Term Plan (MTP IV), and other relevant legislation, policies, circulars, and guidelines issued by the Government.

The strategic planning process embraced inclusivity and collaboration, involving staff, management, and the board of directors. Input was gathered through interviews with key external stakeholders, complemented by document reviews. The collected data were systematically organised and analysed, forming the basis for a workshop attended by staff and senior management. This workshop served as the platform for crafting the various components and contents of the Strategic Plan.

Subsequently, a preliminary version of the Strategic Plan was presented to the Board to obtain their valuable input, ensuring their expertise and perspectives were considered. After incorporating the Board's feedback, the plan was presented to stakeholders for validation. Their input and comments were thoughtfully integrated into the final version of the Strategic Plan, ensuring that it genuinely represented a shared vision and commitment to the future as envisioned by the Board.

Strategic Direction

2

This chapter presents the strategic direction and covers the mandate and functions of KHPOA. The chapter also outlines KHPOA’s Vision, Mission and Core Values.

2.1. MANDATE

The Authority has been established with specific objectives, which include: To provide oversight in regulation of health care services; training, registration and licensing of health professionals; coordinate joint health inspections; receive and facilitate resolution of complaints and arbitrate disputes and conflicts; ensure compliance of health professional standards and monitor execution of respective mandates and functions of health regulatory bodies.

2.2. VISION STATEMENT

“A trusted and reputable authority in health transformation”

2.3. MISSION STATEMENT

“To provide effective and responsive oversight in the regulation of health services and professionals”.

2.4. STRATEGIC GOALS

- a) To enhance health professional regulation;
- b) To enhance assurance of right to health;
- c) To improve health service delivery;
- d) To institutionalise strategic information, research and innovation in the Authority;
- e) To develop the Authority to optimal operation.

2.5. CORE VALUES

To effectively execute the mandate, the Authority is to be guided by standards of behaviour:

Core Value	Descriptor
a) Customer Centric	The Authority commits to understanding, anticipating and satisfying the needs and preferences of its customers to create a positive and fulfilling experience.
b) Professionalism	The Authority will apply requisite knowledge, skills, competencies, standards and ethical values in operations
c) Team Spirit:	The Authority will embrace unity of purpose, collaborative partnerships to harness synergies in all endeavours
d) Transparency and Accountability	The Authority will take responsibility for its roles, obligations and results, individually and collectively.

Situational and Stakeholder Analyses

3

This chapter outlines situational and stakeholder analyses. These analyses provide a basis for development of the adopted strategies.

3.1. SITUATIONAL ANALYSIS

The environmental analysis presents a view of both external and internal review using a combination of the PESTELE and SWOT analysis. An assessment of the past period's performance is also included.

3.1.1. External Environment

The health sector supports economic development through human development and wellness. Developments in the external environment determine opportunities and threats. Scanning, monitoring, forecasting, and assessing these developments influences the choices that the KHPOA makes.

3.1.1.1. Macro-environment

The macro-environment factors that impact the KHPOA are as outlined in **Table 3.1**.

Table 3.1: Macro-Environment Factors

Factor	Element	Description
Political	Government development agenda and policies	■ Government development agenda provides health sector policy environment that guides how the Authority executes its mandate, for example promotion of UHC and continuous engagement with the relevant Parliamentary oversight committees
	Political Stability	■ Political stability provides conducive operational environment whereas political instability results in disruption of services
	Governance	■ Political governance sets the tone for service delivery and for regulatory compliance.
	Devolution	■ Health is a devolved function while oversight is a national function. The Authority needs to work closely with county governments in execution of its mandate.

Factor	Element	Description
Economic	Current macroeconomic environment marked by unpredictable global and local disruptions	<ul style="list-style-type: none"> ■ A prolonged economic downturn has resulted in significant economic shocks such as inflation, reduced disposable incomes and depreciation of the shilling against hard currencies. All sectors' service delivery including health are affected.
	Unemployment	<ul style="list-style-type: none"> ■ High unemployment including trained health professionals in the country contributing to: <ul style="list-style-type: none"> - Poor staffing ratios in health facilities, and - Sudden growth in the number of health facilities some of which are substandard.
	Regional economic blocs – e.g. EAC	<ul style="list-style-type: none"> ■ Regional harmonisation of health standards and regulation which leads to: <ul style="list-style-type: none"> - Recognition of health workers trained within the blocs - Health workers migration
Social	Population Demographics	<ul style="list-style-type: none"> ■ The Country's high youth population ratio has implication for health service delivery
	Socio-cultural behaviour	<ul style="list-style-type: none"> ■ Changes in these factors affect health seeking behaviour. It is evident that these factors are dynamic and are affecting health service delivery to which the Authority needs to be responsive to.
	Literacy levels	
	Health conscience	
	Alternative medicine	
	Increased mental health awareness	
	Adoption of social media	<ul style="list-style-type: none"> ■ There is a growing trend towards the use of social media with associated consequences. The Authority needs to be responsive in real-time.
	Alcohol and substance abuse	<ul style="list-style-type: none"> ■ Affects performance and delivery of services including those of health professionals
New and emerging cadres in health	<ul style="list-style-type: none"> ■ With the constant growth in the health profession, there are new and emerging cadres in health. 	
Technological	Rapid technological advances in the health sector	<ul style="list-style-type: none"> ■ Rapid technological advances in the health sector manifests in the growing trends such as telemedicine, M-health and use of drones. This is equally creating dynamic trends in health service delivery that the Authority needs to be responsive to.
	Growth in digitisation	<ul style="list-style-type: none"> ■ Digitising of health services may require of the Authority to change its mode of regulatory operations ■ Operational automation for efficiency and effectiveness of service delivery requires the Authority to comply

Factor	Element	Description
Ecological	Natural disasters	<ul style="list-style-type: none"> Negatively impacts health and health service provision
	Climate change and impact on health	<ul style="list-style-type: none"> Climate change-related concerns that affect health (e.g extreme weather conditions, pollution and waste management) raise issues of the working environment which the Authority should address.
	Medical waste	<ul style="list-style-type: none"> Health workers' practice of single use leads to the generation of a lot of medical waste
	Demand for environmental sustainability	<ul style="list-style-type: none"> The need to promote environmental sustainability is both a global and a national concern. The Authority is required to align itself to the relevant national policies and circulars.
Legal	Part VI of the Health Act No. 21 of 2017	<ul style="list-style-type: none"> Provides the legal beacons for the Authority's operations
	Health regulation and legislation	<ul style="list-style-type: none"> Conflicting sections of the health laws and regulations
	Labour laws	<ul style="list-style-type: none"> Required adherence to labour laws and fair labour practices, worker welfare, health and safety standards.
	Consumer rights	<ul style="list-style-type: none"> Healthcare users are increasingly aware of their rights and obligations.
	Public Finance Management Act 2012	<ul style="list-style-type: none"> Required compliance to promote sound financial management in all public agencies
	Public Procurement and Disposal Act 2015	<ul style="list-style-type: none"> Required compliance by all public agencies to ensure value for money.
Ethical	Chapter 6 of the Constitution, Articles 10 and 232	<ul style="list-style-type: none"> Require leadership and integrity Demand for fairness and equity in the public sector.
	Mwongozo Code of Governance	<ul style="list-style-type: none"> Provides code of conduct for governance of Board members
	Corporate Ethical Behaviour	<ul style="list-style-type: none"> The current global trend is focused on how an organisation treats all its stakeholders in fairness

3.1.1.2. Micro-environment

KHPOA is domiciled within the State Department for Public Health and Professional Standards. The Authority is responsible for facilitating the adherence *inter alia* to the following:

- a) Human resources for health norms and standards;
- b) Norms and standards for health service delivery;
- c) Health facilities standards guide;

- d) The Kenya national patients' rights health charter; and
- e) Patients' and healthcare workers safety policy.

The Authority plays overarching oversight functions health regulatory boards and councils that include:

- a) Clinical Officers Council;
- b) Counsellors and Psychologists Board;
- c) Health Records and Information Managers Board;
- d) Kenya Medical Laboratory Technicians and Technologists Board;
- e) Kenya Medical Practitioners and Dentists Council;
- f) Kenya Nutritionists and Dietetics Institute.
- g) Nursing Council of Kenya;
- h) Occupational Therapy Council
- i) Pharmacy and Poisons Board;
- j) Physiotherapy Council of Kenya;
- k) Public Health Officers and Technicians Council; and
- l) Radiographers Board of Kenya.

Besides, the Authority is expected to develop frameworks for unregulated health cadres. The current regulatory environment in the health sector is conflicted and the Authority is expected to create order and certainty.

At present, the Authority receives funding from the exchequer via the parent State Department for Health Standards and Professional Management. The existence of numerous partners, including multilateral health partners, creates opportunities to secure additional resources.

3.1.2. Summary of Opportunities and Threats

The summary of opportunities and threats is outlined in **Table 3.2**.

Table 3.2: Summary of Opportunities and Threats

Environmental factor	Opportunities	Threats
Political	<ul style="list-style-type: none"> ■ Conducive policy environment for the health sector (e.g. UHC) ■ Partnership and collaboration with county governments 	<ul style="list-style-type: none"> ■ Probable political instability ■ Political interests
Economic	<ul style="list-style-type: none"> ■ EAC - regional harmonisation of health standards and regulation 	<ul style="list-style-type: none"> ■ Extended economic recession causing challenges in affordability of health services
		<ul style="list-style-type: none"> ■ High unemployment in the country is contributing to; ✗ Poor staffing ratios in health facilities, ✗ Growth of substandard health facilities motivated largely by income seeking attitude High ✗ Migration of health specialists ■ Lack of harmonisation of admission requirements and training curriculum for some carders in health professionals
Social	<ul style="list-style-type: none"> ■ Enlightened population – conscious of their rights facilitates enforcement of compliance 	<ul style="list-style-type: none"> ■ Alcohol and substance abuse amongst health professionals
	<ul style="list-style-type: none"> ■ Increasing health seeking behaviour influences demand for quality service delivery 	
	<ul style="list-style-type: none"> ■ Leveraging on social media to enhance visibility and enrich service delivery 	<ul style="list-style-type: none"> ■ Negative or mis-informed social media messaging damaging reputation
	<ul style="list-style-type: none"> ■ Increased number of health facilities for improved access 	<ul style="list-style-type: none"> ■ Mushrooming of substandard health facilities
Technological	<ul style="list-style-type: none"> ■ Technological advances in the health sector is an opportunity to re-think standards and policies. 	<ul style="list-style-type: none"> ■ Misinformation through social media
	<ul style="list-style-type: none"> ■ Digitisation and automation trends provide opportunities for the Authority to automate operations 	<ul style="list-style-type: none"> ■ Regulatory challenge in oversight of e-health service providers

Environmental factor	Opportunities	Threats
Legal	<ul style="list-style-type: none"> ■ Health regulatory laws that facilitate oversight 	<ul style="list-style-type: none"> ■ Conflicting sections of the regulatory laws with the Authority’s mandate ■ Overlapping sections of health regulatory laws resulting in inefficiencies ■ Conflicting functions of regulatory bodies such as lack of separation of health professional regulation from health service, products and technologies.
Ecological	Environmental sustainability awareness	<ul style="list-style-type: none"> ■ Disruptions as a result of Climate Change and pandemics ■ Pollution and waste management and effects on health

3.1.3. Internal Environment

This section presents the internal environment, including aspects like governance and administrative framework, internal operational procedures, accessible resources and capabilities analysed by function. A synopsis of strengths and weaknesses is presented as well as an assessment of past performance, and a stakeholder analysis.

3.1.3.1. Governance and Administrative Structures

The governance and administrative structure, from the Chairman, Chief Executive Officer to line managers, collectively contributes to the implementation of the strategic plan. The collaborative functioning of these various levels ensures alignment and achievement of the Authority's strategic objectives. These are presented in **Table 3.3**.

Table 3.3: Governance and Administrative Structure

S/N	FUNCTIONAL AREA	Status
A	General Management	
1	Overall organisational control system (effectiveness and utilisation)	Functional and effective
2	Organisational Climate – Corporate Culture	Good teamwork and unity of purpose
3	Intra-organisational synergy	Present
4	Shared vision/unity of purpose	Present
5	Stewardship	Currently being exercised
6	Organisation Structure	Approved structure by PSC but not fully established
B	Human Resources	Status
1	Compensation	Non-competitive for staff transferred from MoH
C	Financial and Accounting	Status
1	Cash-flow management	Well managed but faces utilisation challenges due to inadequate staff capacity
D	Inspection /Regulatory	Status
1	Stakeholder Engagement: <i>Building and maintaining relationships with various stakeholders, including healthcare providers, sector representatives, and the public.</i>	Building partnerships and continuous engagement with key stakeholders
E	Complaints	Status
	Complaints handling mechanism	Development is in progress
F	Health Professional Registers	Status
1.	Duplicate registers	Duplicate registers for 13 regulated cadres, (work-in-progress)
2.	Registers for unregulated health professionals	Registers for 16 previously unregulated health cadres which are being developed (work-in-progress)
G	Monitoring Execution of Mandates of Health Regulatory Bodies	Status

1.	Internal and External Monitoring tools	Development is in progress
2.	Internal and External Reporting mechanism	Development is in progress
3.	Evaluation of reports and feedback	Development is in progress

3.1.3.2. Internal Business Processes

The results of a detailed functional analysis on the Authority’s internal business processes have been compiled and assessed. These findings offer an insight into the current status and effectiveness of business processes in **Table 3.4**.

Table 3.4: Internal Business Process

S/N	FUNCTIONAL AREA	STATUS
A	General Management	
1	Authority’s Communication system	Development is in progress
2	Use of systematic procedures and techniques in decision making	Systematic procedures in place but not documented
B	Human Resources	Status
1.	Effectiveness of incentives used to motivate performance	Not established
2.	Efficiency and effectiveness of HR policies	HR policies recently approved
C	Financial and Accounting	Status
1.	Effective cost control	Working through market surveys to establish value for money
2.	Efficiency and effectiveness of accounting system for cost, budget, and financial planning	Efficient and effective: Done manually (No financial management system yet)
D	Information System	Status
1.	Timeliness and accuracy of information about A-i-A, operations, cash, and supplies	Systems not in place
2.	Relevance of information for operational decisions	Systems not in place
3.	Information to manage quality issues; customer service	Service charter registers available at service delivery points
E	Quality Management	Status
1.	Quality of service assurance	Not in place
2.	Internal practices that enhance quality services	Systems in place but inadequate
3.	Procedures for monitoring quality	Not in place
F	Complaints	Status
1.	Complaint handling system	Development is in progress
2.	Disputes resolution mechanism	Development is in progress

3.1.3.3. Resources and Capabilities

The results of the functional analysis concerning the status of the Authority’s resources and capabilities are detailed in **Table 3.5**. This assessment provides insights into the current condition and efficacy of the Authority’s capability.

Table 3.5: Resources and Capabilities

S/N	FUNCTIONAL AREA	STATUS
A	General Management	
1	KHPOAs image and prestige	Low visibility
2	Management skill, and capabilities	Notable managerial skills
3	ICT – Leverage on ICT	Development is in progress
B	Human Resources	Status
1.	Staff complement	15 staff out of approved 89
2.	Employees’ mix of skills and morale	Inadequate mix of skill, but high morale to work
3.	Specialised skills	Multiple sets of skills exists
4.	Experience	Available diverse experience
C	Financial and Accounting	Status
1.	Sources of funding	Currently available from exchequer through MoH and A-i-A
2.	Ability to raise additional financial resources	Currently able to raise additional funding
3.	Working Capital adequacy	Inadequate for the Authority’s broad mandate
4.	Corporate level resources	Inadequate for the Authority’s broad mandate
5.	Financial size	Inadequate for the Authority’s broad mandate
D	Information System	Status
4.	Ability of people to use the information that is provided	Systems not in place
E	Inspection /Regulatory	Status
1	Legal and regulatory knowledge: understanding of relevant laws and regulations governing healthcare in Kenya Ability to interpret and apply legal and regulatory frameworks.	Adequate understanding of legal and regulatory knowledge
2	Healthcare Expertise: Knowledge of medical and healthcare practices.	Adequate knowledge

3	Public Health Understanding: Ability to assess and address public health risks	Adequate capacity and ability
4	Quality Assurance: Capacity to enforce quality standards for healthcare services. Ability to conduct inspections and audits to ensure compliance with standards.	167 Joint health inspectors available to ensure compliance to norms and standards Joint health inspection checklist available to ensure compliance
5	Risk Assessment and Management: Capability to assess and manage risks associated with and services.	Able to assess risks associated with services
6	Communication Skills: Effective communication with the public, healthcare professionals, and other stakeholders.	Effective through media briefing and public notices
7	Technology and Information Management: Proficiency in leveraging technology for regulatory processes. Ability to manage and protect sensitive health information.	Conduct inspections through the e-JHIC tool

3.1.4. Summary of Strengths and Weaknesses

The summary of strengths and weaknesses is outlined in **table 3.6**.

Table 3.6: Summary of Strengths and Weaknesses

Factor	Strengths	Weaknesses
Governance and Administrative Structures	<ul style="list-style-type: none"> ■ Existing legal framework and capacity to oversight the health service delivery and professionals ■ Approved organisational structure ■ Appointed Board of Directors sufficient to transact, ■ Overall organisational control system exists, ■ Established administrative system that facilitates operations, ■ Good stewardship, ■ Teamwork environment with well shared vision ■ Approved HR instruments for the Authority in place 	<ul style="list-style-type: none"> ■ Not fully constituted board as provided for in the establishing Act; ■ A new institution with teething governance and administrative challenges; ■ Low visibility.
Internal Business Processes	<ul style="list-style-type: none"> ■ Collegial corporate culture ■ Registers for 16 previously unregulated health cadres are in place ■ Effective organisational control system 	<ul style="list-style-type: none"> ■ Inadequate and undocumented policies and procedures ■ Undeveloped monitoring, evaluation and reporting tools ■ Inadequate complaints handling and redress mechanism ■ Absence of a duplicate register for 13 regulated cadres ■ Inadequate communication system
Resources and Capabilities	<ul style="list-style-type: none"> ■ Competent management and staff ■ Capacity to mobilise resources in place. ■ Presence of 167 joint health inspectors and joint inspection checklist ■ Ability to assess risks associated with service delivery ■ Evolving linkages with stakeholders 	<ul style="list-style-type: none"> ■ Inadequate staffing: 15 in-post out of the approved establishment of 89 ■ Inadequate corporate level resources (limited; office space, furniture and fittings, computers and other working equipment and facilities) ■ Low adoption of technology/ Inadequate ICT ■ Inadequate funding

3.1.5. Analysis of Past Performance

This section provides a description of the achievements, challenges and lessons learnt since the Authority's establishment in May 2019.

3.1.5.1. Key Achievements

The Authority has realised several key milestones since its inception as enumerated below: -

a) Leadership and Governance

- i. The Authority has a management structure led by the Chief Executive Officer;
- ii. Established heads of directorates and departments to run the day-to-day management of the Authority;
- iii. Appointment of the KHPOA Board of Directors to a significant level;
- iv. Grading of the Authority by the State Corporation Advisory Committee (SCAC) as a state corporation grade PC6B;
- v. Approval of human resource instruments by the Public Service Commission;
- vi. Developed an internal audit charter;
- vii. Developed an audit committee charter;
- viii. Establishment of functioning four board committee and induction of the board to Mwongozo;
- ix. Regular board meetings held and
- x. Developed board charter.

b) Policy and Planning

- i. Development of annual work plans;
- ii. Quarterly review of annual work plans;
- iii. Quarterly meetings with CEOs of the regulatory boards and councils;
- iv. The regulatory boards are councils collaborate through social media and other online channels such as WhatsApp; Development of draft KHPOA regulations;

c) Coordination and Partnership

- i. During the period 2019-2022, the Authority coordinated joint inspections of 13,476 health facilities of which 9070 were Gazetted.
- ii. Coordinated development of standards and carried joint inspection of 372 pandemic isolation and 3513 quarantine facilities was led by KHPOA team
- iii. Conducted bi-annual performance review of Joint Health Inspectors;
- iv. Initiated digitalisation of the National Joint Health Inspection check list (NJHIC);
- v. Developed an inventory of key stakeholders.

d) Resource Mobilisation

- i. Lobby the increment of exchequer subvention
- ii. Generation of A-I-A;

- iii. Initiated the development of proposals for additional funding;
- iv. Initiated the development of fee structure for the Authority current in work-in-progress.

e) Capacity Building

- i. Trained 167 County Health inspectors (at least 3 in each county);
- ii. Trained staff on SLDP.

f) Guidelines, Tools and Protocols

- i. Developed National Joint Inspection Books for distribution in the counties to facilitate documentation of inspection processes;
- ii. Developed complaint handling documents (Complaint handling guide, complaint lodging form, complaints register, Complaint Assessment Matrix, complaint handling processes and Disputes register);
- iii. Initiated the development of Integrated Cross Cadre Continuous Professional Development Implementation Guide.
- iv. Initiated the development of Integrated Code of professional Conduct and Ethical practice for health professionals; and
- v. Initiated the development of Code of Practice and Standards for health facilities.
- vi. Developed a service charter.

g) Advocacy

- i. Developed assorted IEC materials;
- ii. Conducted media engagements;
- iii. Developed a documentary about KHPOA;
- iv. Developed KHPOA website;
- v. Developed social media accounts (i.e. Twitter and Facebook)
- vi. Partnerships with the Counties through various activities.

3.1.5.2. Key Challenges

The Authority grappled with several challenges that significantly impeded its functioning. Among these obstacles were:

a) Leadership and Governance

- i. Delay in the appointment of KHPOA Board;
- ii. The Board not fully constituted;
- iii. Categorisation by State Corporation Advisory Committee (SCAC) not in tandem with its mandate and oversight role;
- iv. Lean secretariat to execute the Authority's mandate;

b) Policy and Planning

- i. Delay in gazettelement of KHPOA regulations;
- ii. Delay in gazettelement of KHPOA fee structure; and
- iii. Lack of a substantive KHPOA Act.

c) Coordination and Partnership

- i. Lack of stakeholder engagement policy/partnership policy;
- ii. Competing activities (External);
- iii. Non-compliance to implementation of joint inspection recommendations;
- iv. Conflicting regulatory laws;
- v. Low visibility and awareness of the Authority;
- vi. Overlapping of inspection for facilities function with some regulatory boards and councils; and
- vii. Lack of a communication strategy.

d) Funding

- i. Inadequate funding to train more county health inspectors, develop requisite guidelines, tools and protocols; and
- ii. Inadequate financial and logistics resources for conducting inspections

3.1.5.3. Lessons Learnt

The implementation of the work plan for KHPOA has yielded valuable insights and lessons. These are as follows:

- a) Importance of presence of the Board and its support;
- b) The need for the Authority to be anchored in its own substantive law;
- c) The importance for existing regulators to be more deeply engaged with KHPOA;
- d) Importance of understanding stakeholders and their role;
- e) Importance of building the Authority's brand and visibility to aid its execution of mandate,
- f) The need to regulate all health professionals;
- g) The need to have a health facilities regulators and
- h) The need to have a clear definition of health professionals that are recognised regionally and aligned with WHO guidelines.

3.2. STAKEHOLDER ANALYSIS

The KHPOA requires goodwill, support, and cooperation from various stakeholders who have interests in the Authority. The results of the stakeholder analysis are outlined in **Table 3.7**

Table 3.7: Stakeholder Analysis

#	Stakeholder	Role of the Stakeholder	Stakeholder Expectation from the Authority	KHPOA Expectation from Stakeholders
1	National Government (Ministry of Health and National Treasury)	<ul style="list-style-type: none"> ■ Policy formulation and direction on health ■ Create enabling environment to enhance regulation of health services, ■ Provide resources and, budgetary support 	<ul style="list-style-type: none"> ■ Operationalization of the Authority ■ Independence and Impartiality ■ Embrace good governance in operations ■ Prudent use and accountability of allocated resources ■ Timely submission of appropriate reports ■ Strong network of partnerships 	<ul style="list-style-type: none"> ■ Facilitate funding and resource allocation ■ Facilitate acquisition of corporate facilities and requisite equipment ■ Develop policy guidelines ■ Gazettement of rules and regulations
2	County governments	<ul style="list-style-type: none"> ■ Management of devolved health services 	<ul style="list-style-type: none"> ■ Good governance ■ Policy and regulation development ■ Technical assistance and support ■ Timely information and feedback ■ Involvement and participation in joint health inspection 	<ul style="list-style-type: none"> ■ Adherence to standards and regulations ■ Information sharing ■ Cooperate/ collaborate with the Authority ■ Comply and implement recommendations of the Authority and regulatory bodies ■ Participate in periodic self-evaluation on quality improvement

#	Stakeholder	Role of the Stakeholder	Stakeholder Expectation from the Authority	KHPOA Expectation from Stakeholders
3	Regulatory Boards and Councils	<ul style="list-style-type: none"> Regulate education for health professions; Regulate practice for health professions 	<ul style="list-style-type: none"> Good governance Standardised policy guidelines Timely resolution of disputes/conflicts and feedback Justice and Fairness Fair representation in the Board of Directors 	<ul style="list-style-type: none"> Comply with the Health Act, rules and regulations Execute respective mandates and functions effectively Cooperate with the Authority Comply, respect and implement recommendations of the Authority Fairness in the investigation and determination of cases Respect the mandates of other health regulatory bodies
4	Health Professional Associations / Unions	<ul style="list-style-type: none"> Welfare of Health Professionals 	<ul style="list-style-type: none"> Good labour relations Fair resolution of complaints affecting their members Inclusivity of health professions in the management Enforce professional standards and ethics 	<ul style="list-style-type: none"> Good labour relations Advocacy on professional development, licensing and training for members Uphold professional standards, discipline and ethics Involvement and participation in planned activities of the Authority Support the Authority in the agenda of transforming health professions

#	Stakeholder	Role of the Stakeholder	Stakeholder Expectation from the Authority	KHPOA Expectation from Stakeholders
5	Private Health Providers (including Faith Based)	<ul style="list-style-type: none"> Promoting access to health care 	<ul style="list-style-type: none"> Coordinate registration and licensing of health professionals Promote discipline and professional ethics Professionalism, fairness and justice in determination of complaints Demonstrate professionalism in the inspection of health facilities 	<ul style="list-style-type: none"> Adherence to the required norms and standards Cooperation and compliance in resolving patients and health professionals' complaints Timely submission of actions/conclusions of cases Sharing of information Comply with recommendations of regulatory boards and councils and the Authority Participate in planned activities of the Authority
6	Kenya Health Human Resource Advisory Council	<ul style="list-style-type: none"> Coordinate postgraduate training for medical professionals, facilitating inter-government transfers & promoting the sharing of specialised expertise 	<ul style="list-style-type: none"> Effective execution of mandate 	<ul style="list-style-type: none"> Maintain a master register for all health workers Manage welfare and scheme of service for all health professionals Equitable distribution of health professionals at national and county levels Post interns to only approved centres
7	Social Health Insurance Fund	<ul style="list-style-type: none"> Provide medical insurance cover to all its members 	<ul style="list-style-type: none"> Provide a list of inspected and graded health facilities Remit statutory deductions of staff 	<ul style="list-style-type: none"> Timely contracting and empanelling of health facilities

#	Stakeholder	Role of the Stakeholder	Stakeholder Expectation from the Authority	KHPOA Expectation from Stakeholders
8	Health service consumers	<ul style="list-style-type: none"> ■ sovereign power holders and beneficiaries of public services 	<ul style="list-style-type: none"> ■ Timely and quality care ■ Professionalism and confidentiality ■ Accurate and timely information ■ Participation in service delivery ■ Non-discrimination and protection of the vulnerable persons 	<ul style="list-style-type: none"> ■ Adhere to obligations in the Kenya Patients' Rights Charter ■ Provide information and feedback ■ Goodwill ■ Cooperate and respect the health professionals ■ Participation in authority-initiated activities
9	Development and partners in Health	<ul style="list-style-type: none"> ■ Development of Global health policies, standards and guidelines ■ Enhancing quality and accountability in humanitarian aid 	<ul style="list-style-type: none"> ■ Effective execution of mandate ■ Good governance ■ Financial and resource accountability 	<ul style="list-style-type: none"> ■ Global health policies, standards and guidelines ■ Funding and resource mobilisation for the Authority ■ Technical Assistance to the Authority ■ Consider and approve proposals/ requests from the Authority
10	Learning and Training Institutions	<ul style="list-style-type: none"> ■ Provision of requisite professional training and development 	<ul style="list-style-type: none"> ■ Provision of guidelines necessary to develop responsive and progressive training curricula for health professionals 	<ul style="list-style-type: none"> ■ Adherence to approved professional training courses, ■ Capacity building ■ Research output

#	Stakeholder	Role of the Stakeholder	Stakeholder Expectation from the Authority	KHPOA Expectation from Stakeholders
	Media	<ul style="list-style-type: none"> Public awareness and education 	<ul style="list-style-type: none"> Create a link of communication with the media Timely accurate information and regular engagement Involvement in development of Professional documentaries 	<ul style="list-style-type: none"> Integrity and transparency Accountability Sharing of information Cooperation and fairness in investigations Humane, positive, ethical and non-judgmental reporting Support the Authority in creating public awareness
	Ministries, Departments, and Agencies (MDAs)	<ul style="list-style-type: none"> Provide requisite support Partnership linkage and collaboration 	<ul style="list-style-type: none"> Compliance with legal framework, policies, regulations and standards Readiness to collaborate and partner 	<ul style="list-style-type: none"> Provision of requisite support Leverage in execution of mandate
	Law enforcement agencies	<ul style="list-style-type: none"> Law enforcement and maintenance of order 	<ul style="list-style-type: none"> Timely information sharing Involvement during statutory investigation Accurate and timely documentation Facilitate police with appropriate information for enforcement 	<ul style="list-style-type: none"> Provide security during health facility inspection Statutory investigations Maintain law and order Prevention and detection of crime among health professionals Keep custody of suspects and confiscated items/ exhibits

#	Stakeholder	Role of the Stakeholder	Stakeholder Expectation from the Authority	KHPOA Expectation from Stakeholders
	Judiciary	<ul style="list-style-type: none"> Deliver justice 	<ul style="list-style-type: none"> Implement mandate in accordance to the law Effectively resolve complaints and disputes Seek legal consultation and advice 	<ul style="list-style-type: none"> Speedy impartial judicial services Capacity building on Alternative Dispute Resolution Mechanisms
	Constitutional Commissions responsible for Governance	<ul style="list-style-type: none"> Formulate and enforce governance and public sector guidelines 	<ul style="list-style-type: none"> The adherence to principles of good governance and constitutional mandates that promote and strengthen national values. 	<ul style="list-style-type: none"> Clarity in communicating guidelines for public sector agencies Timely responses and interventions when required Fair adjudication of alleged or real grievances by parties against KHPOA
	Staff	<ul style="list-style-type: none"> Achieve the mandate of the Authority 	<ul style="list-style-type: none"> Favourable terms and conditions of service Conducive working environment Capacity building in relevant fields Favourable career progression opportunities 	<ul style="list-style-type: none"> Satisfactory performance Commitment to service Professionalism, accountability and good discipline Integrity and teamwork Reward and sanction for performance Innovation and creativity Result-oriented

#	Stakeholder	Role of the Stakeholder	Stakeholder Expectation from the Authority	KHPOA Expectation from Stakeholders
	Board of Directors	<ul style="list-style-type: none"> Establish policies for corporate management and oversight 	<ul style="list-style-type: none"> Control and administer assets of the Authority Determine the provisions for capital and recurrent expenditure Receive grants, gifts and donations and make legitimate disbursements Invest the Authority's funds Collaborate and partner with bodies and organisations 	<ul style="list-style-type: none"> Provide strategic policy direction and advice Resource mobilisation Observe the Mwongozo code of Governance Promote the welfare of management and stakeholders Participate in planned board activities including board performance evaluation
	Civil Society Organizations (CSO)	<ul style="list-style-type: none"> Lobby for the right to health and quality health services 	<ul style="list-style-type: none"> Effective coordination of health regulators in the enforcement of health regulations, policies and standards 	<ul style="list-style-type: none"> CSO to promote, strengthen, communicate, and collaborate with the Authority's efforts to improve quality health delivery

Strategic Issues, Goals and Key Result Areas

4

This chapter presents the strategic issues, strategic goals and key result areas derived from the situational and stakeholders' analyses.

4.1. STRATEGIC ISSUES

The strategic issues are the fundamental challenges that the Authority shall address to achieve its objectives and realise its vision. They form the basis for the formulation of strategic goals in this Plan. These issues are:

- a) Uncoordinated and conflicting health professional regulations;
- b) Unregulated Health Cadres;
- c) Quality of health service provision in the country;
- d) Misinformation about the Authority's mandate and its functions;
- e) Resistance to health regulatory oversight;
- f) Inadequate staffing;
- g) Inadequate corporate level resources and facilities;
- h) Harmonising Health Facilities Regulation across the Country;
- i) Underdeveloped business processes typical of a new institution.

4.2. STRATEGIC GOALS

The strategic goals are the actual desired outcomes that will be realised in addressing the strategic issues identified. These are:

- a) To enhance health professional regulation;
- b) To enhance assurance of right to health;
- c) To improve health service delivery;
- d) To institutionalise strategic information, research and innovation in the Authority;
- e) To develop the Authority to optimal operation.

4.3. KEY RESULT AREAS

The Key Result Areas form the pillars of this Plan and have been determined following a comprehensive analysis. Each key result area is described as follows:

KRA 1: Health Professional Regulation

The Authority plans to strengthen regulatory processes and procedures, ensuring robust oversight of professional standards. The primary objective is to enhance accountability and transparency within the realm of health professional regulation. The overarching goal is to cultivate a culture of compliance with established norms and standards among health professionals. The Authority is committed to streamlining the entire health professional regulation framework. To achieve these objectives, the Authority will spearhead the coordination of the development of a priority list identifying essential health professional cadres required in the country. This process will involve a comprehensive assessment of the healthcare landscape, taking into consideration current and future needs. Furthermore, the Authority will actively engage stakeholders in the formulation of a framework designed to transform health professions regulation. This framework will serve as a benchmark for evaluating and refining regulatory mechanisms, ensuring that they are aligned with the evolving landscape of healthcare and capable of meeting the dynamic demands placed on health professionals.

KRA 2: Health Safety and Quality

Within this key result area, the Authority is committed to establishing an effective complaint resolution mechanism. This initiative involves the development of a complaint handling and feedback system. To strengthen this mechanism, the Authority will undertake several initiatives, including sensitisation programmes, advocacy efforts, and awareness campaigns specifically focused on the complaint handling process.

In tandem with these efforts, the Authority is committed to advancing patient safety and public protection. This will be accomplished through the facilitation of adherence to health professional standards. Emphasising the importance of compliance among healthcare professionals is important in establishing and maintaining a safe and secure healthcare environment. Furthermore, the Authority will actively promote health facility standards geared towards enhancing patient safety. By setting and upholding standards for healthcare facilities, the Authority aims to create an environment that prioritises the well-being of patients and aligns with the highest standards of care contemplated in the Constitution.

KRA 3: Health Service Delivery

Within the realm of health service delivery, the Authority is strategically focused on promoting adherence to established norms and standards. This will be primarily realised through a collaborative approach, involving joint inspections of health facilities in conjunction with respective health regulatory boards and councils. The Authority recognises the critical importance of upholding and enforcing established norms and standards to ensure the provision of high-quality healthcare services.

This collaborative effort underscores the synergy between the Authority and health regulatory boards and councils, emphasising a shared commitment to elevating the quality of health service delivery. Through these joint inspections, we seek to identify areas for improvement, address deficiencies, and ultimately enhance the overall efficiency and effectiveness of healthcare provision.

KRA 4: Strategic Information, Research and Innovation

Within the key result area, the Authority plans to strengthen monitoring and performance evaluation systems with the overarching goal of enhancing effectiveness and accountability. These initiatives involve the establishment of a monitoring and reporting system that serves as a cornerstone for informed decision-making. To further improve the capabilities of the Authority, focus will be placed on enhancing forecasting and planning mechanisms. This involves equipping the Authority with tools and methodologies to anticipate trends, challenges, and opportunities within the healthcare landscape. By doing so, the Authority aims to proactively address emerging issues.

An important aspect of this strategic initiative is the institutionalisation of knowledge management and research. The promotion of a research culture within the Authority is instrumental in fostering innovation and staying abreast of developments in the healthcare sector.

KRA 5: Institutional Capacity Development

As a newly established entity, having been in existence for barely three years, the Authority is keenly aware of the pressing need for comprehensive institutional capacity development. To address this need, the Authority has outlined key areas of intervention. Chief among these priorities is the enhancement of human resource capacity. The Authority intends to incrementally optimise its staff capacity, acknowledging resource constraints that necessitate a phased approach. Subsequently, the focus shifts to the development of an effective ICT infrastructure, aimed at meeting organisational needs and accommodating technological advancements. Simultaneously, a commitment is made to enhance corporate communication and advocacy, with the objective of improving the effectiveness of conveying the Authority's goals and enhancing its positive image.

Ensuring financial sustainability remains a paramount concern, prompting the implementation of planning and resource mobilisation strategies. The Authority is dedicated to refining operational and oversight systems and procedures to maximise efficiency and effectiveness. Lastly, the Authority endeavours to establish the requisite facilities and procure necessary equipment to enhance the work environment.

Each Key Result Area is linked to corresponding strategic issue and goal as outlined in Table 4.1.

Table 4.1: Strategic Issues, Goals and Key Result Areas

Strategic Issue	Strategic Goal	Key Result Area
a) uncoordinated and conflicting health professional regulation	To enhance health professional regulation	Health Professional Regulation
b) Unregulated Health Cadres		
c) Quality of health service provision in the country	To enhance assurance of right to health	Health Safety and Quality
	To improve health service delivery	Health Service Delivery
d) Misinformation about the Authority's mandate and its functions	To institutionalise strategic information, research and innovation in the Authority	Strategic Information, Research and Innovation
e) Resistance to health regulatory oversight		

Strategic Issue	Strategic Goal	Key Result Area
f) Inadequate staffing	To develop the Authority to optimal operation	Institutional Capacity Development
g) Inadequate corporate level resources and facilities		
h) Underdeveloped business processes typical of a new institution		



Nyeri Governor H.E Mutahi Kahiga, accompanied by Deputy Governor H.E David Kinaniri during KHPOA Board of Directors consultative and familiarization visits to the counties.

Strategic Objective and Strategies

5

The chapter highlights the strategic objectives upon which the projected performance for the next five years is based along with the outcomes and corresponding indicators. To drive this performance, the strategic choices including the strategies are as captured below.

5.1. STRATEGIC OBJECTIVES

This section outlines the objectives, the outcomes for each strategic objective and projections for the outcomes over the five-year period. The Authority has identified 14 strategic objectives for the 2023-2027 plan period:

- a) To strengthen regulatory processes and procedures for effective oversight of professional standards.
- b) To streamline the health professional regulation.
- c) To establish effective complaint resolution mechanism
- d) To promote patient safety and public protection
- e) To promote adherence to established norms and standards in health service delivery.
- f) To strengthen monitoring and performance evaluation systems for improved effectiveness and accountability.
- g) To develop ICT infrastructure to support organisational needs and technological growth.
- h) To strengthen the effectiveness of corporate communication and advocacy.
- i) To build the human resource capacity of the Authority.
- j) To attain and maintain financial sustainability.
- k) To develop the Authority's operational and oversight systems and procedures.
- l) To develop a Quality Management and assurance system.
- m) To develop an effective planning, monitoring and evaluation system for the Authority.
- n) To develop and secure essential corporate capital resources to support organisational needs and growth.

The outcomes, outcome indicators and projections for each of the objectives are summarised in **Table 5.1**.

Table 5.1: Outcome Annual Projections

KRA 1: Health Professional Regulation							
Strategic Objective	Outcome	Outcome Indicator	Projections				
			Year 1	Year 2	Year 3	Year 4	Year 5
1. To strengthen regulatory processes and procedures for effective oversight of professional standards	Strengthened regulatory processes and procedures	Development of the health profession regulatory framework			1		
		Number of duplicate registers prepared and maintained		3	3	7	
		Number of monitoring tools developed	1				
		Percentage of norms and standards of training institutions reviewed	30	45	60	70	80
		Number of training institutions inspected on adherence to norms and standards	80	100	120	140	160
		Number of internship hospitals inspected on adherence to norms and standards	40	40	40	40	40
		Number of KHPOA regulations gazetted	4				
		Number of scopes of practice developed	3	6	7	7	7
1. To streamline the health professional regulation	Health professional regulation streamlined	Number of consultations held with stakeholders	2	1			
		List of prioritised health professional cadres		1	1		
		Validated roadmap for transforming health professions regulation		1			
		Number of laws reviewed		6	7		
		Number of legislation developed			12		
		Number of bills assented into laws					3

KRA 2: Health Safety and Quality							
1. To establish effective complaint resolution mechanism	Effective complaints resolution mechanism established	Proportion of Complaints and Disputes processed	100%	100%	100%	100%	100%
		Number of complaints handling guide developed	1				
		Number of sensitisation meetings held	10	10	10	10	
		Number of procedures on complaint handling mechanisms uploaded on the website	3				
1. To promote patient safety and public protection	Patient safety and public protection promoted	Number of code of professional conduct and ethical practice developed	1				
		Number of stakeholders' consultative meetings held	1	1	1	1	1
		Number of copies patient safety standards developed		1			
KRA 3: Health Service Delivery							
1. To promote adherence to established norms and standards in health service delivery.	Adherence to established norms and standards in health service delivery promoted	Number of inspection calendars developed	1	1	1	1	1
		Proportion of health facilities inspected	100%	100%	100%	100%	100%
		Percentage of counties with at least 3 trained inspectors	30%	20%	20%	15%	15%
		Number of reviews held on inspection of health facilities by counties	1	1	1	1	1
		Percentage of implementation of electronic reporting on Joint Health Inspection		100%	100%	100%	100%

KRA 4: Strategic Information, Research and Innovation							
1. To strengthen monitoring and performance evaluation systems for improved effectiveness and accountability	Strengthened monitoring and performance evaluation systems	Level of implementation the monitoring and evaluation system			40%	40%	20%
		Number of functional integrated system operationalised		1			
		Number of officers trained in forecasting and planning		5			
		Number of knowledge management policies developed and approved		1			
		Number of researches conducted			1	1	1
		Number of research databases established via the knowledge management sharing platform			1		
KRA 5: Institutional Capacity Development							
1. To develop ICT infrastructure to support organisational needs and technological growth	Enhanced ICT infrastructure	Number of ICT infrastructure commissioning reports		1			
		Level of implementation of the integrated ICT system		25%	50%	25%	
2. To strengthen the effectiveness of corporate communication and advocacy	Strengthened corporate communication and advocacy effectiveness	Number of communication and branding strategy and approved		1			
		Number of staff trained on public relations and communication	15	15	25	20	
		Percentage increase in website and social media pages traffic	10	10	20	20	20
		Number of structured media engagement sessions conducted	2	2	2	2	2
		Number of assorted IEC materials produced	20	20	20	20	20
		Customer satisfaction index	60%	70%	75%	80%	85%
		Number of counties sensitised on the Authority's mandate	10	20	17	0	0

3. To build human resource capacity of the Authority	Human resource capacity of the Authority built	Number of staff recruited	3	22	25	25	14
		Level of implementation of the staff training plan		100%	100%	100%	100%
		Proportion of staff appraised	100%	100%	100%	100%	100%
4. To attain and maintain financial sustainability	Financial sustainability attained and maintained	Level of implementation of resource mobilisation policy	-	-	-	25%	25%
		Level of implementation of the financial policy and procedures manual			100%	100%	100%
5. To develop the Authority's operational and oversight systems and procedures	Operational and oversight systems and procedures developed	Level of implementation of audit report	100%	100%	100%	100%	100%
6. To develop a Quality Management and assurance system	Quality Management and assurance system	Number of directorates SOPs documented		4			
		Number of quality policies developed		1			
		Number of staff trained on Quality management & Assurance System			40		
7. To develop effective planning, monitoring and evaluation system for the Authority	Effective planning, monitoring and evaluation system for the Authority developed	Number of approved planning, monitoring and evaluation framework for KHPOA		1			
		Number of annual work plan reviews reports prepared	1	1	1	1	1
8. To develop and secure essential corporate capital resources to support organizational needs and growth.	Essential corporate capital resources to support organisational needs and growth developed and secured	Level of completion of office space procurement and customisation	100%				
		Number of office vehicles procured		2	2		

The KHPOA strategic choices for the plan period are as summarised in **Table 5.2**.

Table 5.2: Strategic Objectives and strategies

Key Result Area	Strategic Objectives	Strategies
KRA 1: Health Professional Regulation	To strengthen regulatory processes and procedures for effective oversight of professional standards	Enhance accountability and transparency in health professional regulation
		Foster compliance to norms and standards by health professionals
		Enhance the Authority's mandate and functions
	To streamline the health professional regulation	Coordinate development of priority list of health professionals' cadres needed in the country
		Develop framework to transform health professions regulation
KRA 2: Health Safety and Quality	To establish effective complaint resolution mechanism	Develop complaint handling and feedback mechanism
		Sensitisation, advocacy and awareness creation on complaint handling mechanism
	To promote patient safety and public protection	Facilitate compliance to health professional standards
		Promote Health facility standards for patient safety
KRA 3: Health Service Delivery	To promote adherence to established norms and standards in health service delivery	Coordinate joint inspection of health facilities
KRA 4: Strategic Information, Research and Innovation	To strengthen monitoring and performance evaluation systems for improved effectiveness and accountability	Establish monitoring and reporting system
		Enhance the capabilities of the Authority in forecasting and planning
		Institutionalise Knowledge management

Key Result Area	Strategic Objectives	Strategies
KRA 5: Institutional Capacity Development	To develop ICT infrastructure to support organisational needs and technological growth	To enhance ICT Infrastructure and capacity
	To strengthen the effectiveness of corporate communication and advocacy	Institutionalise strategic communication
		Enhance the Authority's corporate image and visibility
		Sensitisation, advocacy and awareness creation
	To build human resource capacity of the Authority	Achieve optimal staff establishment
		Talent management
		Enhance employee performance
	To attain and maintain financial sustainability	Resource mobilisation
		Prudent use of financial resources
	To develop the Authority's operational and oversight systems and procedures	Enhance control environment of the Authority
To develop a Quality Management and assurance system	Establish a Quality Management and Assurance System to ensure and enhance overall organisational excellence	
To develop effective planning, monitoring and evaluation system for the Authority	Enhance KHPOA's planning, monitoring and evaluation function	
To develop and secure essential corporate capital resources to support organisational needs and growth.	Establish institutional machinery and appropriate office space	

Implementation and Coordination Framework

6

This chapter provides the implementation plan as set out in the implementation matrix. The chapter also presents an assessment of key risks and the risk management framework.

6.1. IMPLEMENTATION PLAN

Clear deliverables have been set out and responsibilities assigned with budgets and timelines to responsible lead managers and support teams with the overall aim of ensuring that this strategic plan is successfully implemented. Action plans, work plans and performance contracting targets shall be developed in line with the strategic plan. The Authority will secure five key elements: people, resources, structure, systems, and organisational culture for the purpose of the successful implementation of this strategic plan.

The plan will be monitored quarterly and annually to ensure actions remain on target towards achieving the strategic intent. The strategy and planning department will be the service delivery unit for purposes of monitoring implementation of this strategic plan. Under the guidance of the Chief Executive Officer, and working closely with all functional units, the department will develop and implement an effective monitoring and evaluation system for the strategic plan and coordinate generation of relevant reports quarterly and annually.

As a service delivery unit, the department will oversee implementation of the strategic plan and ensure that monitoring, evaluation, and reporting is done on a regular basis. The department will further monitor and provide input through reports to staff, senior management and then Board on issues relating to overall implementation of the strategic plan as appropriate. Further, it will generate reports in appropriate formats as per guidelines to the State Department for Economic Planning.

6.1.1. Action Plan

The action plan is represented as an implementation matrix that contains the strategic issues, strategic goals, key result areas, outcomes, strategic objectives, strategies, key activities, expected outputs, output indicators, annual targets, annual budgets and responsibility for execution of the activities. The implementation matrix is captured separately as **Annexure 1** to this strategic plan.

6.1.2. Annual Work plan and Budget

To successfully realise the goals and objectives of this strategic plan, annual work plans will be prepared to guide implementation of planned activities and realisation of desired outputs and outcomes. Annual work plans will be developed in a timely manner and costed to aid in budget preparation. The annual work plan and budget for the first year of implementation of the strategic plan is attached as Annexure 2.

6.1.3. Performance Contracting

The KHPOA will operationalise the strategic plan through the performance contracting initiative in line with guidelines issued by the Government. Focus will be on ensuring continuous improvement in service delivery and accountability for results.

The Board will provide leadership in ensuring smooth development, implementation, monitoring, evaluation and reporting on achievement of the agreed targets. It will serve as a basis for ensuring that efficient and effective services are delivered to the public and that targets are cascaded and signed between the Board and the CEO and further between the CEO and the heads of Directorates/ Departments.

Quarterly and annual performance reports will be developed in line with applicable performance contracting guidelines and considered by the Board for the purpose of monitoring progress and performance.



Cabinet Secretary for Health Susan Nakhumicha during the signing of KHPOA Performance Contract

6.2. COORDINATION FRAMEWORK

This section covers the institutional framework, staff establishment, skills set and competence development, leadership, and systems and procedures.

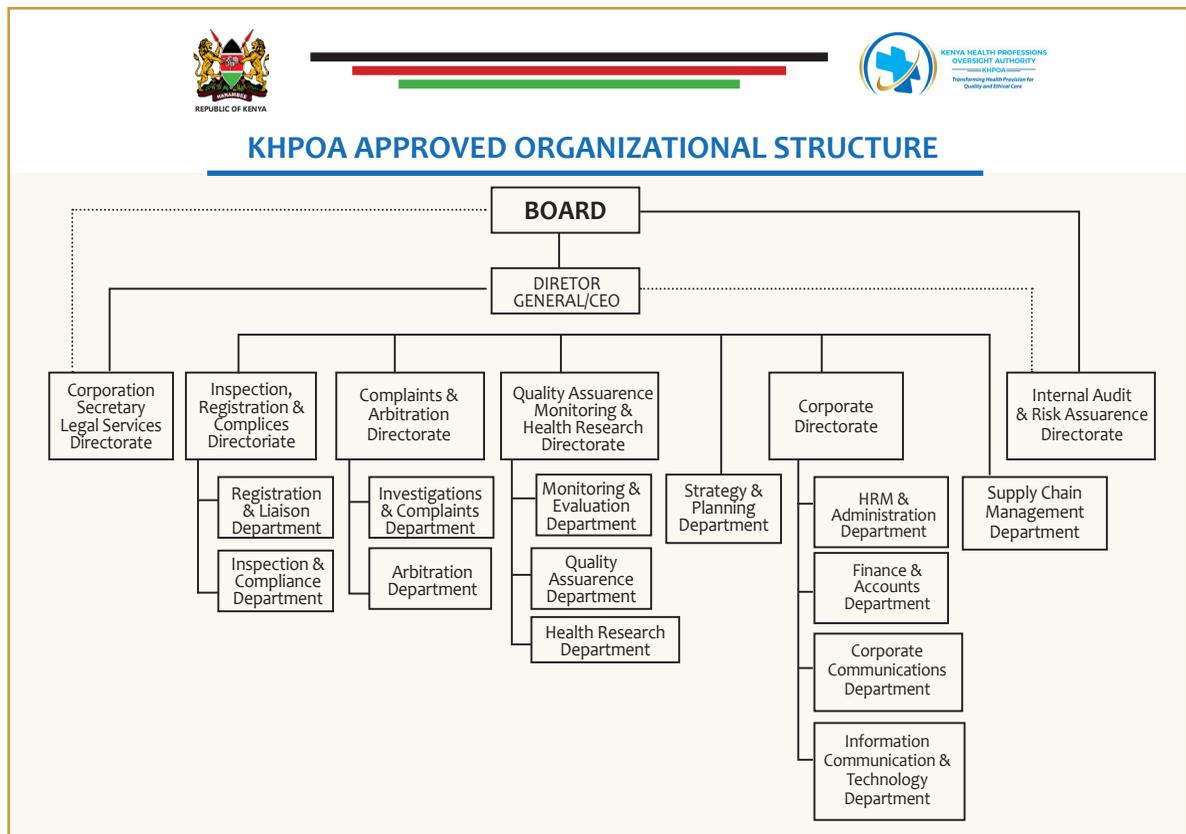
6.2.1. Institutional Framework

The existing structure, policies, rules and regulations have supported execution of KHPOA’s mandate. Going forward, there is a need for a review to consider what is required to support the implementation of the identified strategic initiatives.

6.2.1.1. Organisational Structure

The Board of Directors is the highest decision-making body and is responsible for strategy, policy direction, and overall leadership of the Authority. The Chief Executive Officer (CEO), supported by a management team organised into six Directorates and two departments as outlined in **Figure 6.2**

Figure 6.2: Organisational Structure



1.2.1.2. Policies, Rules and Regulations

The Authority is governed by the Health Act, 2017 in addition to all laws, rules and regulations that are applicable to State Corporations. The Authority has approved various policies to support implementation of the laws and regulations. These include various policies and procedure manuals that guide operations of the Authority. The Authority has identified the continuous strengthening of its policies and procedures as one of the key areas during the strategic planning period.

6.2.2. Staff Establishment, Skills Set and Competence Development

The KHPOA has a staff establishment of 89 persons with 15 in-post spread across the various functional areas. The current staffing levels are as outlined in **Table 6.2**.

Table 6.2: Staffing Establishment

Cadre	Approved Establishment	Optimal Staffing Level	In-post	Variance
	A	B	C	B-C
Senior Management (Level 1&2)	7	7	1	6
Middle Management (Level 3)	15	15		
Operational: Officers (Level 4)	18	18		
Operational: Technical Support staff (Levels 5-10)	49	49		
Total	89	89		

6.2.3. Leadership

Execution of the strategic plan will be managed through strategic theme teams identified based on skills required to execute planned activities as outlined in **Table 6.3**.

Table 6.3: Strategic Theme Teams

Strategic Issue	Key result Area	Strategic Theme Team(s)	
		Lead	Support
Uncoordinated and conflicting health professional regulation	Health Professional Regulation	Director, Inspection Registration and Compliance	<input checked="" type="checkbox"/> Deputy Director, Finance and Accounts <input checked="" type="checkbox"/> Deputy Director, ICT <input checked="" type="checkbox"/> Director, Corporate Affairs
Quality of health service provision in the country	Right to Health	Director, Complaints and Arbitration	<input checked="" type="checkbox"/> Deputy Director, ICT <input checked="" type="checkbox"/> Head Corporate Communication <input checked="" type="checkbox"/> Director, Inspection Registration and Compliance <input checked="" type="checkbox"/> Deputy Director, Supply Chain Management
	Health Service Delivery	Director, Inspection Registration and Compliance	<input checked="" type="checkbox"/> Deputy Director, Finance and Accounts <input checked="" type="checkbox"/> Deputy Director, ICT <input checked="" type="checkbox"/> Director, Corporate Affairs
Misinformation about the Authority's mandate and its functions	Strategic Information, Research and Innovation	Director, Planning, monitoring, Health Research and Quality Assurance	<input checked="" type="checkbox"/> Deputy Director, Supply Chain Management <input checked="" type="checkbox"/> Deputy Director, ICT
Resistance to health regulatory oversight			<input checked="" type="checkbox"/> Deputy Director, Finance and Accounts

Strategic Issue	Key result Area	Strategic Theme Team(s)	
		Lead	Support
Inadequate staffing	Institutional Capacity Development	Directorate Corporate Services	<input checked="" type="checkbox"/> Deputy Director, Supply Chain Management
Inadequate corporate level resources and facilities			<input checked="" type="checkbox"/> Deputy Director, ICT
Underdeveloped business processes typical of a new institution			<input checked="" type="checkbox"/> Deputy Director, Finance and Accounts <input checked="" type="checkbox"/> Head, Corporate Communication <input checked="" type="checkbox"/> Deputy Director, Human Resource Management and Administration

6.2.4. Systems and Procedures

In pursuing its mandate, the Authority will embrace modern management trends and approaches. A Quality Management System will be developed in due course as part of the institutional development process. Standard operating procedures will be defined to support implementation of policies, rules and regulations that govern implementation of strategic initiatives.

On an annual basis, a detailed evaluation of the internal control system designed to provide reasonable assurance regarding the achievement of objectives relating to operations, reporting, and compliance will be done. To achieve enhanced performance, promote innovation and ensure efficiency and effectiveness in implementation of the plan, the Authority will promote fundamental rethinking of business processes aligned to identify strategies in the listed areas:

- a) **Technology:** First, establish the much-needed ICT infrastructure. Second, optimise and deploy technology to drive operational agility and resilience by identifying enabling technologies, modernising core legacy systems through digitisation and digitalisation.
- b) **Organisation:** Develop requisite organisational variables and ways of managing and measuring key performance indicators by designing business processes to achieve improvements in critical measures of performance such as cost, quality, and speed and service delivery. In addition, requisite corporate resources such as office space and equipment will be acquired in the Plan Period.
- c) **Culture and People:** Promote values that build resilience, and drive innovation, change management and operational excellence. In this respect, the Authority will build from the current collegial work environment.
- d) **Collaboration:** Consider regulations relevant to innovation in the health industry and discuss regulatory approaches which can be taken to facilitate this. This will be done through cooperation and collaboration agreements with key stakeholders such as regulatory board, councils, and development partners.

6.3. RISK ANALYSIS AND MITIGATION MEASURES

Risk Management will involve a set of coordinated activities towards directing and controlling KHPOA with regard to the risk of not realising the aspiration of the Strategic Plan. This will involve taking actions to reduce the likelihood and impact of the risk thereof.

Table 6.5: Risk Analysis and Mitigation

#	Risk Category	Risk and Description	Likelihood (H/M/L)	Impact (H/M/L)	Overall Risk Level	Mitigation Measure(s)	Risk Owner
1	Strategic	Political risks – success is dependent on agility in responding to changes and continuous alignment with changing government policy	Low	High	High	<ul style="list-style-type: none"> ● Remain alert to and respond to changes in government policy. ● Continuous stakeholder engagement 	CEO
		Difficulty in establishing the required government partnerships: This can result from failed past partnerships or other agencies desire to protect their mandate from diversion. This will frustrate efforts for KHPOA to execute its mandate	Low	High	High	<ul style="list-style-type: none"> ● A close working relationship with the relevant government agencies is required to ensure their buy in. ● Identify strategic areas for partnerships 	CEO
		Sub-optimal strategies - risk of choosing and continuing to follow sub-optimal strategies to meet the set objectives	Low	High	Medium	<ul style="list-style-type: none"> ● In-depth environment scanning ● Mid-term review ● Quarterly monitoring 	CEO
		Changes in operating environment – assumptions made during planning may not hold throughout the plan period	Low	High	High	<ul style="list-style-type: none"> ● Continuous environment scanning ● Quarterly monitoring 	CEO

#	Risk Category	Risk and Description	Likelihood (H/M/L)	Impact (H/M/L)	Overall Risk Level	Mitigation Measure(s)	Risk Owner
2	Financial Risk	Funding deficit – budget cuts induced by austerity measures	Medium	High	High	<ul style="list-style-type: none"> ● Ensure adequate budgeting and justification. ● Continuous engagement with government 	Deputy Director, Finance and Accounts
		Budget Absorption: Delayed disbursements coupled by lengthy public procurement processes Insufficient budget due to financial market rates – i.e., foreign exchange risk, interest rate and other price risks	Low	High	Medium	<ul style="list-style-type: none"> ● Early financial requests from MoH ● Include margins informed by movement in exchange, inflation rates, interest rates and prices. ● Continuous monitoring 	Deputy Director, Finance and Accounts
3	Operational Risk	Conflicting regulatory laws causing difficulties in execution of mandate			High	<ul style="list-style-type: none"> ● Involve boards, councils and MoH for agreeable ways of proceeding in the short run ● Engage sector players and initiate changes in the establishing Act for the long run 	CEO
		ICT Security - Exposure to loss of confidentiality, integrity and availability of data	Low		High	<ul style="list-style-type: none"> ● Regular penetration testing to identify security gaps and implement actions. ● Installation of requisite infrastructure 	Deputy Director, ICT
		Redundancy of technology – as technology evolves, KHPOA should ensure that its technology is aligned	Low	High	Medium	<ul style="list-style-type: none"> ● Adequate funding for automation 	Deputy Director, ICT

#	Risk Category	Risk and Description	Likelihood (H/M/L)	Impact (H/M/L)	Overall Risk Level	Mitigation Measure(s)	Risk Owner
		Human resource risks – This relates to establishment, capacity and competencies of staff which may adversely affect the ability to undertake the planned activities	Low	High	Medium	<ul style="list-style-type: none"> ● Speedy filling of vacant positions ● Timely replacement of requisite staff with the right experience and competencies 	Deputy Director, Human Resource Management and Administration
		Poor service delivery and corruption related practices could lead to reputational risks damaging KHPOA's image	Low	High	Medium	<ul style="list-style-type: none"> ● Implement Customer Service Delivery Charter ● Implement Corruption Prevention Strategies ● Build strong public/media relations 	Deputy Director, Corporate Communication
		Inadequate processes to support execution of strategies	Low	High	Medium	<ul style="list-style-type: none"> ● Business process re-engineering 	CEO
4	Compliance	Adverse legal and regulatory changes affecting strategy implementations	Low	High	High	<ul style="list-style-type: none"> ● Continuous stakeholder engagement to articulate policy 	Director Corporation Secretary & Legal Services
		Litigations from stakeholders affecting strategy implementation	Medium	Medium	Medium	<ul style="list-style-type: none"> ● Compliance monitoring ● Timely enforcement of laws ● Engage competent advocates to handle cases 	Director Corporation Secretary & Legal Services



Kenya Health Professions Oversight Authority Chief Executive Officer Dr. KIOKO Jackson and staff during tree planting exercise at Aramaket ECD College, Kapenguria, West Pokot County.

Resource Requirement and Mobilisation Strategies

7

This chapter provides an overview of the financial requirements, resource mobilisation and resource management strategies to realise the implementation of this plan.

7.2. COORDINATION FRAMEWORK

For the plan to be implemented, annual budget proposals have to be prepared and submitted to The National Treasury and Economic Planning for approval in line with the Public Finance Management Act, 2012 (PFM Act, 2012) requirements. The total financial cost for implementing this plan is estimated at KSh. 2.841 Billion over the next five years as tabulated in Table 7.1.

Table 7.1: Financial Requirements for Implementing the Strategic Plan

Key Result Area	Financial Resource Requirements Estimate (KSh. Mn)					
	2023/24	2024/25	2025/26	2026/27	2027/28	Total
Health Professional Regulation	6	54	33	33	28	153
Right to Health	3	9	5	5	6	28
Health Service Delivery	18	20	25	32	42	137
Strategic Information, Research and Innovation	-	18	11	10	9	47
Institutional Capacity Development	46	213	306	393	491	1,449
Total for KRA 1-5	72	314	379	473	575	1,814
Recurrent budget	12	125	222	333	335	1,028
Total	85	439	602	806	910	2,841

The projected financial resource requirement for the implementation of this Strategic Plan is approximately KSh. 2.841 Billion against an estimated resource allocation of KSh. 2.188 Billion as tabulated in Table 7.2.

Table 7.2: Resource Gaps

Financial Year	Requirement (KSh. Mn)	Estimated Resource Allocation (KSh. Mn)	Variance (KSh. Mn)
2023/24	85	66	19
2024/25	439	338	101
2025/26	602	463	138
2026/27	806	620	185
2027/28	910	701	209
Total	2,841	2,188	653

7.2. RESOURCE MOBILISATION STRATEGIES

The Authority is committed to evaluating and executing resource mobilisation strategies aimed at achieving financial and institutional sustainability. In order to raise the required funds, the Authority will focus on generating additional resources from appropriation-in-aid (A-I-A) and external funding from partners to supplement exchequer resources. The Authority will also explore opportunities to diversify its revenue through the implementation of the resource mobilisation strategy that will be developed during the life of this strategic plan.

7.3. RESOURCE MANAGEMENT

The Authority will allocate resources to achieve the best organisational value. The overall expenditure incurred shall be within the approved budget, statutes and guidelines issued by The National Treasury and Economic Planning and other government Ministries Departments and Agencies. To ensure optimum resource management, the Authority will deploy its financial resources in conformity with the Public Finance Management Act, 2012 and Public Procurement and Assets Disposal Act, 2015. The Authority will also enhance cost control measures to ensure efficient utilisation of allocated resources while eliminating wastage.

Monitoring, Evaluation and Reporting Framework

8

A Monitoring, Evaluation and Reporting (MER) framework that will guide the implementation of the Plan will be developed. The framework will be achieved through systematic and continuous process of collecting and analysing data on targets, output indicators, outcome indicators among other measures as well as taking corrective actions and making necessary adjustments to ensure realisation of set objectives.

8.1. MONITORING FRAMEWORK

The plan will be cascaded to all levels within KHPOA's establishment and integrated into the performance management framework. Operational plans will be aligned to the strategic plan through:

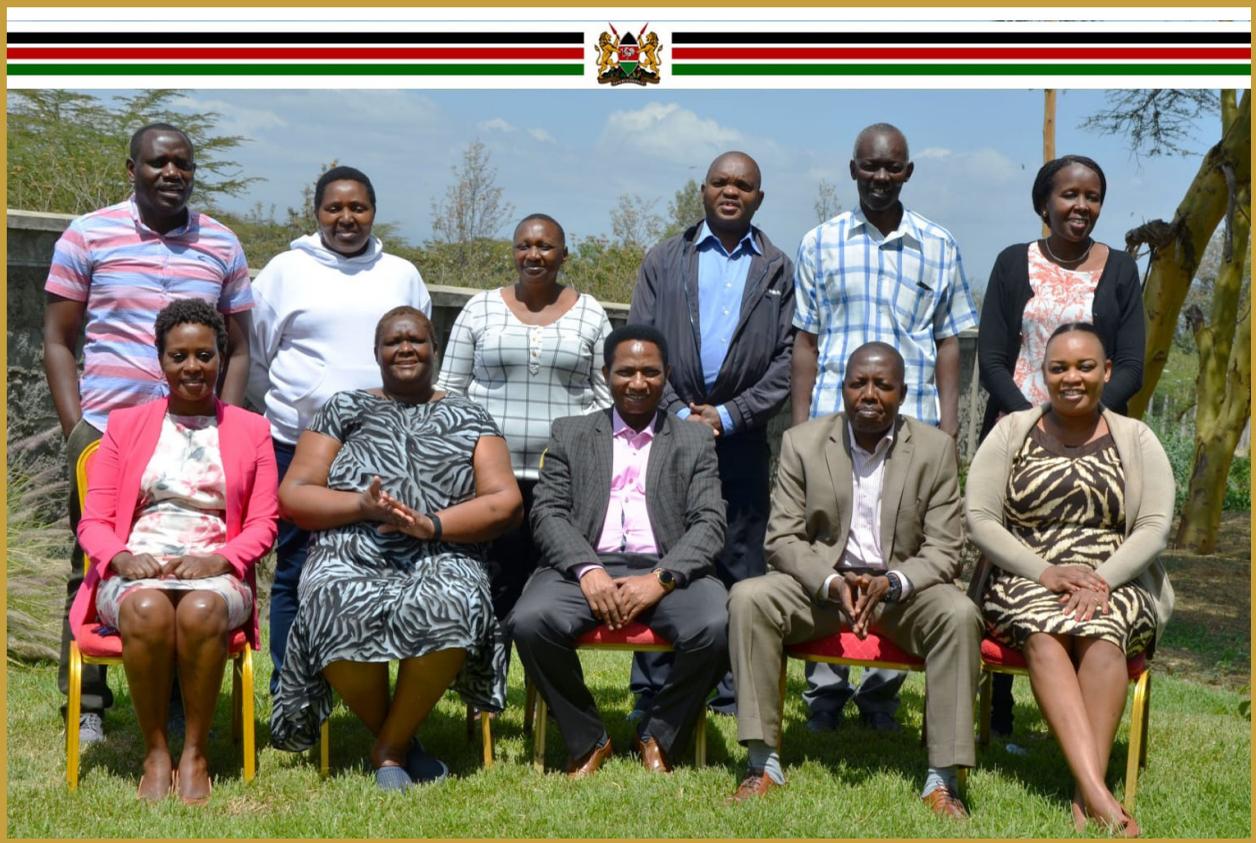
- a) Development and implementation of annual corporate work plans;
- b) Quarterly monitoring and reporting on the implementation of the annual work plans to the Board of Directors;
- c) Taking corrective actions on deviations in the Plan's implementation;
- d) Undertaking annual reviews and reporting on the implementation of the Plan to the Board of Directors;
- e) Disseminating the findings and recommendations;
- f) Implementing the recommendations of the report; and,
- g) Administering rewards and recognition.

Based on the assumptions and expectations of causality and linearity, this strategy will include systematic data collection, analysis, and reporting. Ongoing monitoring, evaluation, and reporting on the implementation levels of strategies, indicators, and activities will empower the Board to gauge the progress and accomplishment of strategic plan objectives. Additionally, it provides an avenue for suggesting remedial or alternative strategies as needed.

8.2. PERFORMANCE STANDARDS

The monitoring and evaluation system will adhere to internationally recognised norms and standards. These standards, in conjunction with the Public Service Commission (Performance Management) Regulations, 2021, will guide the process of setting performance targets, monitoring implementation,

conducting evaluations, and reporting. Key Performance Indicators identified at the outcome, output, and efficiency levels will be linked to KHPOA's mandate, aligned with the national development agenda, budget provisions, and the desired achievements of intended beneficiaries. The timeframe for achieving objectives will be clearly identified in accordance with performance tracking standards. The collection of data for all Key Result Areas (KRAs) will be the responsibility of the Strategic Theme Teams, overseen by the Deputy Director, Strategy and Planning.



Kenya Health Professions Oversight Authority Chief Executive Officer Dr. KIOKO Jackson poses for a group photo during a workshop to review KHPOA policy instruments.

8.3. EVALUATION FRAMEWORK

Table 8.1: Outcome Performance Matrix

Key Result Area	Outcome	Outcome Indicator	Baseline		Target	
			Value	Year	Mid-Term Period	End-Term Period
KRA 1: Health Professional Regulation	Strengthened regulatory processes and procedures	Development of the health profession regulatory framework	-	2023	1	1
		Number of duplicate registers prepared and maintained	-	2023	6	13
		Number of monitoring tools developed	-	2023	1	1
		Percentage of norms and standards of training institutions reviewed	-	2023	60	80
		Number of training institutions inspected on adherence to norms and standards	-	2023	120	160
		Number of internship hospitals inspected on adherence to norms and standards	-	2023	40	40
		Number of KHPOA regulations gazetted	-	2023	4	4
		Number of scopes of practice developed	-	2023	16	30
	Health professional regulation streamlined	Number of consultations held with stakeholders	-	2023	1	1
		List of prioritised health professional cadres	-	2023	1	1
		Validated roadmap for transforming health professions regulation	-	2023	1	1
		Number of laws reviewed	-	2023	13	13
		Number of legislation developed	-	2023	12	12
		Number of bills assented into laws	-	2023	-	3

Key Result Area	Outcome	Outcome Indicator	Baseline		Target	
			Value	Year	Mid-Term Period	End-Term Period
KRA 2: Health Safety and Quality	Effective complaints resolution mechanism established	Proportion of complaints and disputes processed	-	2023	100%	100%
		Number of complaints handling guide developed	-	2023	1	1
		Number of sensitisation meetings held	-	2023	20	30
		Number of procedures on complaint handling mechanisms uploaded on the website	-	2023	3	3
	Patient safety and public protection promoted	Number of codes of professional conduct and ethical practice developed	-	2023	1	1
		Number of stakeholders' consultative meetings held	-	2023	3	5
		Number of copies of patient safety standards developed	-	2023	1	1
KRA 3: Health Service Delivery	Health Service Delivery	Number of inspection calendars developed	-	2023	3	5
		Proportion of health facilities inspected	-	2023	100%	100%
		Percentage of counties with at least 3 trained inspectors	-	2023	70%	100%
		Number of reviews held on inspection of health facilities by counties	-	2023	1	1
		Percentage of implementation of electronic reporting on Joint Health Inspection	-	2023	100%	100%
KRA 4: Strategic Information, Research and Innovation	Strengthened monitoring and performance evaluation systems	Level of implementation of the monitoring and evaluation system	-	2023	100%	100%
		Number of functional integrated system operationalised	-	2023	1	1
		Number of officers trained in forecasting and planning	-	2023	5	5
		Number of knowledge management policies developed and approved	-	2023	1	1

Key Result Area	Outcome	Outcome Indicator	Baseline		Target	
			Value	Year	Mid-Term Period	End-Term Period
		Number of researches conducted	-	2023	1	3
		Number of research databases established via the knowledge management sharing platform	-	2023	1	1
	Enhanced ICT infrastructure	Number of ICT infrastructure commissioning reports	-	2023	1	1
		Level of implementation of the integrated ICT system	-	2023	75%	100%
	Strengthened corporate communication and advocacy effectiveness	Number of communication and branding strategy and approved	-	2023	1	1
		Number of staff trained on public relations and communication	-	2023	25	50
		Percentage increase in website and social media pages traffic	-	2023	40	80
		Number of structured media engagement sessions conducted	-	2023	6	10
		Number of assorted IEC materials produced	-	2023	60	100
		Customer satisfaction index	-	2023	75	85
		Number of counties sensitised on Authority's mandate	-	2023	47	47
	Human resource capacity of the Authority built	Number of staff recruited	-	2023	50	89
		Level of implementation of the staff training plan	-	2023	100%	100%
		Proportion of staff appraised	-	2023	100%	100%

Key Result Area	Outcome	Outcome Indicator	Baseline		Target	
			Value	Year	Mid-Term Period	End-Term Period
	Human resource capacity of the Authority built	Number of staff recruited	-	2023	50	89
		Level of implementation of the staff training plan	-	2023	100%	100%
		Proportion of staff appraised	-	2023	100%	100%
	Financial sustainability attained and maintained	Level of implementation of resource mobilisation policy	-	2023	25%	50%
		Level of implementation of the financial policy and procedures manual	-	2023	100%	100%
		Percentage of audit circulars implemented	-	2023	100%	100%
	Operational and oversight systems and procedures developed	Level of implementation of audit report	-	2023	100%	100%
	Quality Management and assurance system	Number of directorates SOPs documented	-	2023	4	4
		Number of quality policies developed	-	2023	1	1
		Number of staff trained on Quality Management & Assurance System	-	2023	40	40
	Effective planning, monitoring and evaluation system for the Authority developed	Number of approved planning, monitoring and evaluation framework for KHPOA	-	2023	1	1
		Number of annual work plan reviews reports prepared	-	2023	3	5
	Essential corporate capital resources to support organisational needs and growth developed and secured	Level of completion of office space procurement and customisation	-	2023	100%	100%
		Level of execution of service contracts for hospitality, guard services, and office cleaning	-	2023	100%	100%
		Number of office vehicles procured	-	2023	2	2

8.3.1. Mid-Term Evaluation

A mid-term evaluation of the plan will be undertaken in the Financial Year 2025/2026 in line with the Kenya Evaluation Guidelines 2020 and the Kenya Norms and Standard for M&E. The mid-term evaluation will assess the extent to which planned results are on target and any areas that may require improvement.

8.3.2. End-Term Evaluation

The end-term evaluation should be undertaken in the Financial Year 2027/2028 in line with the Kenya Evaluation Guidelines 2020 and the Kenya Norms and Standard for M&E. This will be a summative evaluation that will assess progress and achievement made, challenges encountered, and mitigation measures. This will be conducted along the following criteria:

- a) **Relevance:** Examines alignment of the Plan goals, purpose, and objectives with the needs and priorities of the relevant stakeholders.
- b) **Efficiency:** Analyses how resources and inputs such as funds, expertise, time, and infrastructure were utilised to achieve the desired results.
- c) **Effectiveness:** Assesses the degree to which the implementation of activities successfully accomplished the set objectives.
- d) **Sustainability:** Determines the likelihood of its achievements going into the future.
- e) **Impact:** Determines the plan's effectiveness in achieving the intended outcomes.

8.4. Reporting Framework and Feedback Mechanism

Reporting on the levels of implementation will be a key deliverable in ensuring the success of the Authority's 2023-2027 Strategic Plan. Reviews will therefore be conducted to track the progress of the Plan, identify and address challenges and constraints affecting the implementation to ensure that the Authority is on course to achieving the annual targets. The Department of Strategy and Planning will be responsible for preparing the quarterly and annual reports.

An annual strategic plan evaluation report will be the culmination of the process of performance contracting and will be carried out in a manner that ensures objectivity and integrity of the results. All the directorates and departments will provide verifiable evidence during the exercise. Feedback will be provided for improvement at all stages. Quarterly, annual and all other evaluation reports will be tabled as appropriate for discussion and approval at the Board level. The approved quarterly and annual reports will be submitted to the State Department for Economic Planning within Fifteen (15) days following the end of the period.

Lessons learnt will be captured for continual improvement and corrective interventions in the strategy.

ANNEXURE

Annexure 1: Implementation Matrix for the 2023-2027 Strategic Plan

Annexure 2: Costed Annual Work plan for the Financial Year 2023/2024

KENYA HEALTH PROFESSIONS OVERSIGHT AUTHORITY

STRATEGIC PLAN

2023/2024 – 2027/2028

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