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Dear colleagues,

It has come to the middle of the year and I take this opportunity to thank each and every one of you for being such interactive members since the beginning.

In the month of April we held our 47th Annual Scientific Conference Themed Health Across the Lifespan at Lake Naivasha Resort which mainly focused on Aging. The conference was a success as we had the opportunity to host members from different African Countries. Next year’s conference will be held in the great county of Kisii and we look forward to a successful meeting.

This year we managed to introduce an e-learning programs for our members by partnering with the World Continuing Education Alliance to provide online courses to and the KMA/RHRA course on law making process in Kenya.

Great strides have also been made with the interim Coalition of African National Medical Association (CANMA) as well as on the international scene through World Medical Association (WMA) activities. In all these interactions, we have noted how similar our challenges are despite our diversity and will use this knowledge to strengthen our associations.

Thank you for the honor and privilege to serve KMA as president.
APPOINTMENT OF DR. ELIZABETH GITAU AS KMA CEO

Dr. Elizabeth Gitau has been appointed as the new CEO Kenya Medical Association. Dr. Gitau joined KMA as a medical officer intern in 2013. In October 2016 she was elected as the Treasurer of KMA Nairobi Division, a position she served to date. She is the KMA representative at the Association of Professional Societies of East Africa (APSEA).

Prior to this appointment she was a senior lecturer at The Kenya Medical Training College having served for four and a half years. She undertook her medical officer internship in Murang’a County Level V Hospital and worked in the same hospital as a medical officer in 2014. Dr. Gitau completed her Bachelor of Medicine and Surgery (MBChB) from The University of Nairobi, School of Medicine in 2012. She completed an MBA-HCM from Strathmore Business School in 2017. She is a DAAD alumnus and an Equity Leadership Program scholar.

Dr. Gitau brings to KMA National Executive Council her medical expertise, business and resource mobilization skills and stakeholder relations expertise.

SINGLE BUSINESS PERMIT

The Kenya Medical Association (KMA) is a membership organization representing medical and dental practitioners registered to practice in Kenya with a twin mission of championing the welfare of doctors, and advocating for the provision of quality healthcare for all. It is domiciled at KMA Centre, Mara Road. Kenya Medical Association members at various locations in Nairobi County have complained that officials from at Nairobi County Government are harassing doctors on trade permits. There have been several reported incidences that KMA would be happy to share with Nairobi County Government. The trend is concerning. On 3rd of August 2017 KMA raised this concern with Nairobi County Government which acknowledged that indeed this was wrong and the County Government sent out a memo to its staff reading as follows:

Please take note of the content of the email below and alert your teams to desist from approaching the medical professionals for Trade Permits. As per Schedule 4 of the constitution the County Government licenses all businesses apart from professionals who are licensed to operate according to their professional rules and regulations.

A letter dated 28th September 2009 to the Town Clerk of City Council of Nairobi clearly barred County Councils from demanding fees from members of the professionals whose practice is regulated by legislation as set out in the Second Schedule of the Trading Licence Act. Such professionals include The Pharmacists (Pharmacy & Poisons Act 244), Doctors and Dentists (MPDB Act Cap 253), Nurses (Nurses Act Cap 257), Veterinary Surgeons (Vet Surgeons Act Cap 366), Advocates, CPS, Accountants, Engineers, Architects & Quantity Surveyors, Estate Agents, Auctioneers.

The same letter issued guidance that stated:

“A Local Authority and the Minister of Local Government has not authority to approve and apply any other license by what name called to the prescribed professions. To do so would not only be unlawful, but would amount to double jeopardy of payment of two parallel licenses in respect of the professional practice. You are requested to stop levying fees to members of the above professions – Sammy Kirui, CBS Permanent Secretary. THIS LAST SENTENCE IS THE CRUX OF THE MATTER - DOUBLE JEOPARDY. Subsequent to this there have been several judicial pronouncements barring County Governments from imposing trading licence fees on professionals. The matter is very clear.
KMA CALLS FOR FORMATION OF HEALTH SERVICE COMMISSION TO MANAGE HUMAN RESOURCES FOR HEALTH

Kenya Medical Association has called for establishment of a Health Service Commission (HSC) to improve and manage human resource for health, help in equitable distribution of healthcare workforce and remuneration of health workers.

Prof Lukoye Atwoli, Vice President of Kenya Medical Association (KMA), reiterated that Universal Health Coverage (UHC) must be tax funded, public led and aimed primarily to improve health service delivery in the country. He said this will only succeed through creation of a commission to manage human resources.

“Healthcare workforce is diverse and scarce, and distribution is a challenge so it should not be left to market forces,” Prof Atwoli said adding that “Kenya faces a critical shortage of doctors in rural and underserved areas.”

Health workforce has been identified as one of the most important resources to achieve effective health services and universal health coverage. However, he said there is a shortage and inequitable distribution of health workforce in many counties with greater scarcity in counties where it is required most.

He explained that the mandate and powers of the proposed Health Service Commission (HSC) would be to ensure provision of equitable and quality health care, advise the government on matters relating to health service delivery, health professions, set and review standards of education and training of health workers. In addition, the commission will also register, recruit, transfer and promote, discipline and terminate health workers. The Commission, he explained, will release the ministry responsible for health to focus on formulation of policies, standards, guidelines and regulations while the commission focuses on health service delivery.

Prof Atwoli explained that the creation of Health Service Commission will also help in ensuring provision of highly skilled and motivated workforce with the right attitude towards the delivery of qualitative health care service. It will also help in addressing frequent industrial action by health workers by providing a single avenue to negotiate payment and welfare issues.

Addressing these issues can motivate doctors and prevent loss of doctors through voluntary turnover leading to better retention. The health service commission will be reinforced by centralised funding and an emphasis on shared values such as equitable access, universality and comprehensiveness, as well as by professional conformity and common standards or conditions of service delivery.

“We say this with respect to the fact that people in this sector work very unpredictable hours and have got very unique and interesting characteristics in the way they deliver their service. So if there’s a commission that particularly addresses their issues, like there’s a Teacher’s Service Commission, then it’s perhaps easier to understand and isolate some of these things that will hamper proper service delivery,” Prof Atwoli said.

The commission’s functions would also include assigning and transfer of public health workers to public hospitals or health facilities according to needs.

The disparity of healthcare workforce in the 47 counties hampers the devolution of health services in the country. Explaining the reasons for the shortage, KMA said many doctors opt for further studies after completing their training or prefer to join the private health sector due to its higher pay scale.

The essential pillars defined by the World Health Organization includes efficient healthcare system, a financing strategy, a well-motivated, well-trained and efficient workforce, and access to essential medicines, vaccines and technologies.

“Creation of HSC will create a harmonized labour environment where we can soberly discuss issues with government concerning unfair remuneration and compensation for workers; inequitable distribution of health workers leading to poor staffing; poor training hence shortage of specialists as recommended by WHO,” he said.

Currently, health care workers in the public health facilities are regulated under the Public Service Commission (PSC). The functions and powers of the PSC and the proposed HSC are significantly different.

Devolution of health services as outlined in the fourth schedule of the Constitution means healthcare provision is a shared function between the National and the County governments.

The public health delivery system in Kenya is done through six tiers. Tier one Community healthcare (CH), Primary healthcare (level two to three) referral hospitals level four and five) and level six.

According to the constitution all level one to five are the responsibility of the county government while level six are responsibility of national government together with the ministry of health employees.
KMA marked World Health day 2019 by hosting a symposium for professional medical associations at the Kenyatta International Conference Center on 7th April, 2019. The Theme of the symposium was "The Role of Professional Medical Associations in Achieving Universal Health Coverage." Nursing and pharmaceutical associations were also represented in the symposium, the main message of the day was that UHC will not be achieved without leadership from the health workforce. Professional associations were urged to take up their roles more aggressively.

The National Governing Council of KMA is the highest policy making organ of KMA. It meets quarterly. The NGC of 19th January 2019 was graciously hosted by KMA Thika Division under the Chairmanship of Dr Mutunga. It was extremely successful.

The next NGC was held at Lake Naivasha Resort on the evening of 23rd April 2019 prior to the KMA Annual Scientific Conference & AGM.
Different media houses were also around to witness and cover the event. Students from various universities both local and international were represented in conference, some being involved in coordination of the conference and others being participants in representing different topics in posters.

Next year, our 48th Annual Scientific Conference and will take place from the 22nd to the 26th of April 2020 in Kisi County with the Theme: The Future today: Technology and Innovation in Healthcare. For details, visit our conference page via the link below.

Dr. Stanley Kanyemba and Dr. Adolf Nampata
Representatives from Namibia Medical Association receive awards from KMA Treasurer Dr. Supa Tunje
PHYSICIAN H20 2019

Health professional meeting: Road to UHC was held in Tokyo, Japan on 13th and 14th June. Medical association leaders from across the world attended.

KMA president, Dr. Jacqueline Kitulu made a presentation on the role of medical associations in the achievement of UHC. She also said that the largest investment needed to achieve UHC is in the employment and education of health workers. Investing in training and creating more jobs in the healthcare sector is a smart investment to accelerate. They talked about strategies beyond UHC: UHC is not the end, but is a never ending journey and doctors are the forefront of the future health systems.

STATEMENT ON THE UNFORTUNATE DEATH OF OUR COLLEAGUE IN CUBA

KMA received with great sorrow news of the unfortunate death of Dr Hamisi Ali Juma in Havana, Cuba, where The Ministry of Health Kenya had sent him for training in Family Medicine. We grieve with his family and friends, and we regret the untimely loss of this young promising life. The medical fraternity in Kenya has lost a colleague, and Kenya has too.

About one year ago, the Government of Kenya entered into an agreement with the Government of Cuba to import doctors from Cuba to work in Kenya, and to send our doctors to Cuba for training. At that time the Kenya Medical Association opposed the precipitate manner in which the deal was executed in complete disregard of established procedures for licensing and deployment of foreign medical personnel, and for selection of training programmes for Kenyan doctors in this country and abroad.

Over our protests, the Kenya government selected fifty young Kenyan doctors who were then sent to Cuba for specialized training Family Medicine. We pointed out that the Family Medicine programme in Cuba is not recognized by the international community and may not be applicable in Kenya, but this advice was ignored. We also indicated that many universities in this country offer Family Medicine training and are willing to admit more than the fifty doctors for training at lower cost, but this was similarly ignored.

However, since our colleagues were shipped off to Cuba, we have heard numerous complaints from them on the treatment they have been receiving from among others, representatives of our government. The death of our colleague is the last straw in this matter, and we demand greater accountability from the government as far as this deal is concerned.

Above all, we demand that those of our colleagues who want to come back home be allowed to do so, and be placed in local institutions that offer Family Medicine training at government cost.

IMPLEMENTATION OF KMA’S E-LEARNING COURSE ON SRHR AND LAW AND POLICY MAKING PROCESSES IN KENYA

KMA’s CPD accredited ELearning course that is available on [www.law4medics.org](http://www.law4medics.org) was launched in April 2018 at the KMA annual scientific conference. The course includes three modules on health and devolution; the legislative framework on SRHR in Kenya; and bill making processes at the national and county levels in Kenya. KMA members are urged to take up the free course that has so far been taken by over 100 doctors.
Any registered medical or dental practitioner and medical students is eligible to join KMA. KMA has more than 2500 registered members of various specialties. An Annual subscription fee of Ksh. 5000 is levied.

**BENEFITS**

- Professionalism.
- Trainings such as law4medics, WCEA / KMA education portal and continuous professional development in various divisions.
- Recommendations. KMA members get recommendations in jobs and trainings.
- Leadership. Members get leadership opportunities that is in county government in the health department, sitting in government committees, getting nominated in the county board and also joining World Medical Association (WMA).
- Networking and influencing. Being a member makes it easier to network across the country as well as outside the country as a WMA member.
- Benefits from partners. KMA members are front row beneficiaries from partners. This can be training or scholarships.
- Attendance to medical events. Members get to experience and learn more during medical events.

**KMA/WCEA EDUCATION PORTAL**

WCEA(World Continuing Education Alliance) has entered into a partnership with KMA to create an Education Portal of continuing medical education courses for medical practitioners to be accessed online through our member’s portal

http://portal.kma.co.ke

The Education portal contains courses (over 4000) that can be accessed by KMA members who can select the courses that they would like to undertake based on their speciality. To be able to take the course one must be registered as a KMA member who’s subscription is fully paid.
The Young Doctors’ pre-conference was held on 24th April 2019, which was the first day of the KMA Conference. The theme of this Pre-Conference was “Mentorship and Innovation in Medicine: Investing in the doctors of today.” The pre-conference was attended by a myriad of young doctors, other members & officials of Kenya Medical Association and a team of medical students representing the Medical Students’ Association of Kenya (MSAKE).

Various sub-themes were covered, including:
- Mentorship and coaching to support strengthening health systems
- Mentorship in the work space and career progression in clinical, research, leadership and advocacy
- Innovation and Entrepreneurship in health care
- Doctors wellness-social, mental and physical well-being
- E-mentorship—is it the future of mentorship?
- Communication and advocacy in healthcare

The attendees first held discussions on the role and opportunities for young doctors in the health care system (career progression, research, clinical practice and ethics, advocacy.

It was concluded that mentorship remains an important aspect in medical practice and life in general. Formal or informal mentorship needs to be value and goal-oriented. Be it career development, behavioral or motivational goals, mentees ought to be persistent in their quest to be mentored. It takes time to build a mentor-mentee relationship, and resiliency is key. Overall, young doctors must gain additional skill to become better professionals.

Secondly, the attendees discussed innovation and entrepreneurship in healthcare.

The conclusion of this panel session was that networks are a major success factor for innovation and entrepreneurship. Panelist recognized KMA and other professional associated as a great space to build meaningful networks. Identifying hard work and consistency as a key contributing factor to success. Young doctors are encouraged to think outside the box, to find innovative solutions for health care. 

Dr. Amakove Wala speaking on "Advocacy in achieving UHC."

Highlighting snippets from The New England Journal of Medicine article on mentorship, “...physicians' success stories often have a common thread of an important mentor, or possibly more than one key mentor, whose guidance proves invaluable. Traditional physician mentor-mentee relationship is still important despite the new digital age.”

Dr. Kitulu also pointed out the need for mentorship beyond health care, to include important aspects of life like motherhood and parenting. She encouraged the young doctors to follow up with their mentors, be persistent and creative in seeking mentorship avenues to give the greatest potential.

Dr. Kitulu appreciated the turn out and welcomed participants to utilize KMA as an avenue for mentorship within and beyond healthcare.

Dr. Ahmed Kalebi, CEO Lancet talked about the role of young doctors in the healthcare systems.

**DESIGN THINKING**

This session was facilitated by Dr. Thomas Kirengo & Dr. Ryan Nyotu.

Participants were treated to yet another interactive session by the design thinking duo, where they got to work in groups to find solutions to a problem.

Design Thinking is a discipline that employs the user sensibility and methods and matching people’s needs with technological feasible solutions through a viable business strategy in order to create customer value and market opportunity.
The third Kenya national Universal Health Coverage conference was held in Kisumu county, from 15th to 17th May, 2019. The theme for this year’s conference was revitalizing primary health care for sustainable universal health coverage. Dr. Alfred Mutua said that the UHC initiative is changing lives. The health stakeholders talked about the urgent need to address human resource and staffing issues in healthcare by putting a proper policy in place so as to boost public health.

They discussed the challenges facing implementation of UHC in Kisumu county, including: human resource gaps, congestion in level 4/5 and under utilization of level 2/3, lack of enough electronic medical information systems to monitor patient flow and commodity utilization, over utilization of diagnostic radiology services and the abrupt cessation of Linda mama. Nurses were highly appreciated as key players in achieving UHC despite being overworked and underpaid.

Dr. Kama Roga said that the people who spend most money for healthcare in Kenya are the very poor. “Highest level of dignity you can give a human is by giving them a healthcare card. An assurance to healthcare everywhere.”

Dr. Wasunna Owino, Chief Party HRHKenya made a presentation on human resources for health in terms of number, skills for UHC and motivating workplace. As professor Anyang Nyon’go officially closed the conference he said that there is need to take time and reflect on challenges and uncertainties that hinder this initiative.

“HIGHEST LEVEL OF DIGNITY YOU CAN GIVE A HUMAN IS BY GIVING THEM A HEALTHCARE CARD. AN ASSURANCE OF HEALTHCARE EVERYWHERE”
PUBLIC PARTICIPATION FOR THE NAKURU MATERNAL AND NEWBORN CHILD HEALTH BILL

KMA through KMA Nakuru Division and KELIN organized a meeting with the CEC for Health and Nakuru County Health Committee in February 2019. The objective of the meeting was to introduce KMA and KELIN to the new leadership in the Nakuru County Executive Committee on health and reach consensus on future collaboration, create linkages between the Nakuru County Assembly Health Committee and County Executive Committee on Health to ensure support for the Nakuru County Maternal Newborn and Child Health Bill. KMA in collaboration with KELIN organized a meeting in March 2019 with the Nakuru County Assembly Health Committee and Nakuru County CHMT. This meeting was proposed after the Nakuru MNCH bill had been gazette and reintroduced in the county Assembly in March hence there was need to meet up and develop a strategy on the challenges experienced during the reintroduction and identify opportunities to mitigate the issues.

KMA’s Nakuru Division represented the committee on public participation for the Nakuru Maternal and Newborn Child Health Bill on June 7, 2019. The forum hosted by the Nakuru County Assembly’s Committee on Health Services, and the Chair of Nakuru Division submitted KMA’s recommendations on the Bill. KMA also participated at the Bill Digest meeting held on 18th and 19th July at Naivasha Simba Lodge. The purpose of this meeting was to review the contentious clauses on the Bill and support the County Committee on Health Services develop moving notes.

REVIEW AND AMENDMENT OF THE KILIFI MATERNAL AND NEWBORN CHILD HEALTH ACT

On January 9th 2019, the Kilifi CEC Health services shared with KMA/RHRA the first draft of the Kilifi MNCH (Amendment) Bill (2018) that will be sponsored by Kilifi County Assembly’s leader of majority for further review and comments. The Bill included the recommendations previously submitted by KMA that cure the claw back provisions on SRHR. KMA/RHRA shared the draft amendment Bill with members of its technical working group who also shared their comments that were thereafter collated and shared with the CEC Health Services on January 11th 2019. Currently the Kilifi MNCH (Amendment) Bill (2018) has been submitted back to the County Attorney for the final review prior to its gazettement and introduction to the County Assembly.

WHAT YOU NEED TO KNOW ABOUT EBOLA

What is EBOLA? It’s a virus that attacks a person blood system: Ebola is what scientists call a hemorrhagic fever - it operates by making its victims bleed from almost anywhere on their body. Usually victims bleed to death.

Ebola is highly contagious: Being transmitted via contact with body fluids such as blood, sweat, saliva, semen or other body discharges.

How Do I Know Someone has Ebola?
- Fever
- Headache
- Diarrhoea
- Vomiting
- Weakness
- Joint
- Muscle pains
- Stomach Pain
- Lack of Appetite

Protect Yourself:
- Wash Your Hands with Soap do this a lot.
- You can also use a good hand sanitizer.
- Avoid unnecessary physical contact with people.
- Restrict yourself to food you prepared yourself.
- Disinfect Your Surroundings the virus cannot
- survive disinfectants: heat, direct sunlight, detergents and soaps.


PSK CONFERENCE 2019

The Pharmaceutical society of Kenya (PSK) held a symposium “leadership and governance in UHC panel” from 29th May to 1st June 2019 in Mombasa, Kenya. The theme of the conference was: PHARMACISTS CHAMPIONING QUALITY PATIENT CARE IN UHC. The attendees had an elaborate discussion about transforming pharmacy education and workforce in Africa.” Pharmacists play a key role in provision of healthcare” Dr Jane Masiga, CEO of MDES Kenya.

Professor Ralph Altiere, FIP-UNESCO-UNTWIIN Director talked about the ultimate goal of transforming pharmacy education by connecting African pharmacy schools, addressing the issue they face and the ultimately revolutionizing pharmacy education. “pharmacists must get out of their own way, be forward thinking and adopt as new areas emerge including advocacy.”

Professor Claire Anderson said that Artificial Intelligence and Genomics are becoming a part of pharmacy. Standard chartered representative also advised pharmacists to let the help in getting the right finances for their businesses so that they do not over finance or under finance.

HOW MUCH DO YOU KNOW ABOUT SLEEP MEDICINE?

12 Normally accounts for about 20% to 25% of total sleep time, abbr.
15 Purpose
17 Chronotype that wakes up early and goes to bed early
19 British title
21 Contagious movement sometimes associated with tiredness
23 An AHI of this number is in the mild range of obstructive sleep apnea
24 Make a mistake
26 Disorder characterized by recurrent interruption of sleep, abbr.
27 Freudian concept
28 Connect
29 Measure of the severity of sleep apnea, abbr.
30 Medical practitioner, for short
31 Density measurement

Across
1 Autotitrating device, abbr.
3 They may occur in all stages of sleep
8 One thousandth of an inch, for short
9 Less costly alternative to PSG, abbr.
10 Symptom of many sleep disorders, abbr.
11 Noisy breathing during sleep
13 Indicating woman’s name before marriage
14 Manage and control medically
16 Sagging, not rigid
18 Sleep medicine professional society, abbr.
20 Catchword
22 Early anesthetic
25 Request
26 Tree that is a symbol of strength
27 Reset or align with the biological clock
30 Run out, as a liquid
32 Grey’s Anatomy’s Sandra
33 Also known as hypocretin
34 Sleep tech key job function

Down
1 Measure of a patient continuing with CPAP use
2 A “watch” that measures sleep
3 Prefix for twice
4 Disorder characterized by an irresistible urge to move when resting, abbr.
5 Drug that can combine with a receptor on a cell to produce a physiological reaction
6 Somnambulism
7 CPAP interface must do this properly to avoid excessive leaking
8 Sleep test done on patients suspected of having narcolepsy, abbr.

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KMA holds scientific conferences every year with different themes based on emerging changes and development in the healthcare industry. These conferences contribute to the professional development of doctors as well as improving healthcare in general. Scientific papers and researches are presented and discussed during the conferences and thereafter policies and resolutions formulated based around the discussions. These conferences have been held without fail for the last 48 years. On behalf of the Kenya Medical Association (KMA) we invite you to the the 48th KMA Annual Scientific Conference and AGM to be held in 2020 at Kisii County-Kenya.

To register for this conference, click the link below: http://kma.co.ke/24-registration

The 2nd Healthcare and Technology Africa, is a two-day closed-door program which will focus on the immense opportunities in the region while keeping in mind the opening it will provide to the private sectors in order to enter the market. We look forward to welcoming the key decision makers from both public and private sectors to enable this programme to be a successful effort towards a sustainable future.

Under the patronage and supervision of Ministries of Health Zambia, Malawi, Lesotho and Zimbabwe, the summit will be attended by government officials from Ministries of Health across Africa, regulatory bodies, healthcare associations and other stakeholders is designed to discuss sustainable hospital development, regulatory framework, partnerships, local & international case studies, technology development, HR training and skillset enhancement, e-health & healthcare financing, funding & government incentives.

The Kenya Medical Association supports excellence in medicine. And thus on May 10th our own Sec Gen Dr. Simon Kigondu awarded the KMA - MBCHB prize to the following medical students at the graduation ceremony for University of Nairobi:

- Otom Lavender Gift Awour
- Fatima Aboulrahman Nassir
- Ghalgan Salim Swaleh
- Mpekethu Nelson Mweteri
Readers' Contributions:
Do you have any comments or enquiries about KMA? Do you want your story to be captured in our next Newsletter? Send us any of the above via our email:
nec@kma.co.ke/ executiveofficer@kma.co.ke

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