



Kenya Medical Association

NATIONAL EXECUTIVE

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8th July 2024

Kenya Medical Association (KMA) Position Statement on Sustainable and Effective HRH Management in Kenya

The Kenya Medical Association (KMA) is the umbrella professional association for doctors in Kenya, with a dual mandate: to champion the welfare of doctors and advocate for the highest standard of quality healthcare in the country and beyond.

KMA notes the establishment of the Presidential Task Force on Addressing Human Resources for Health (HRH) Challenges, as outlined in Gazette Notice No. 99 Vol. CXXXVI. This task force was recommended following the Return to Work Formula (RTWF) after the 56-day nationwide doctors' strike in 2024. However, KMA observes that the task force's mandate is already being undertaken by other constitutional bodies:

- 1. Health Act No. 21 of 2017 - The Health Human Resource Advisory Council (KHHRAC):**
 - KHHRAC reviews policies and establishes uniform norms and standards for posting interns, inter-county transfers of healthcare professionals, welfare, and schemes of service for health professionals, management and rotation of specialists, and maintaining a master register for all health practitioners in the counties.
 - KHHRAC's role in standardizing and overseeing various HRH functions is advisory and policy review, which may not fully address systemic HRH challenges.
- 2. Kenya Health Professions Oversight Authority (KHPOA):**
 - KHPOA maintains a duplicate register of all health professionals, promotes and regulates inter-professional liaison, coordinates joint inspections, resolves complaints from patients and regulatory bodies, monitors execution of mandates of regulatory bodies, arbitrates disputes among regulatory bodies, and ensures necessary standards for health professionals are upheld.

Given the mandates of KHHRAC and KHPOA, the establishment of a Presidential Task Force is deemed ultra vires and duplicates already established roles.

Previous Recommendations

Several recommendations addressing HRH challenges have already been made by other task forces and reports, yet remain unimplemented:

a) Constitution-making process of 2004-2010:

- The National Assembly report of the Parliamentary Select Committee on the review of the constitution recommended the establishment of a Health Service Commission (HSC), which was later to be brought back through an Act of Parliament.

b) 2012 Musyimi Task Force Report:

- The task force recommended the establishment of an HSC to tackle HRH issues. It noted the need to delink the Ministry of Health (MoH) from service delivery, allowing it to focus on policy formulation, standards, guidelines, and regulations.

c) Ministry of Health Report of 2019:

- The Task Force on Training of Medical Specialists made recommendations on medical training and deployment challenges.

d) Health Labour Market Analysis for Kenya of 2023:

- A comprehensive analysis providing necessary information for policy interventions.

e) Kericho Declaration on Human Resources for Health of 18th October 2023:

- A national dialogue produced a 17-point roadmap for improving HRH in Kenya under KHHRAC's stewardship.

f) Ministry of Health Human Resources for Health Policy:

- The Ministry is currently developing an HRH policy.

KMA Advocacy for a Health Service Commission (HSC)

KMA advocates for the establishment of a constitutional Health Service Commission (HSC) to centrally manage HRH as a strategic national resource with the following functions:

- Set standards for training, recruitment, remuneration, and codes of conduct for health workers.
- Register all health workers in the country.
- Recruit and deploy health workers within the public service based on needs derived from norms and standards.
- Ensure health workers adhere to a code of conduct and discipline.
- Rationalize and standardize remuneration and other terms of service to ensure equitable distribution of health workers across the country.

Proposals for Actualizing a Health Service Commission:

- The HSC was included in the draft constitution until the final stages.
- A draft HSC bill was proposed in 2012 and improved in 2018.
- On 3rd May 2020, KMPDU submitted proposals for constitutional amendments to establish an HSC.
- Paragraph 164 of the BBI Report supports transferring human resourcing to an HSC while retaining health as a devolved function.

- On 21st June 2020, KMA recommended the creation of a constitutional HSC to the BBI technical committee.
- The 2018 task force on the training of medical specialists recommended the national government manage specialists' training, deployment, and remuneration.
- The 2012 Task Force on Strengthening Health Service Delivery recommended delinking the Ministries of Health from service delivery through the establishment of an HSC.

Conclusion

KMA advises directing efforts towards strengthening existing regulatory bodies and establishing a Health Service Commission. This commission, in collaboration with professional bodies and unions, will provide necessary advisory support to the President and ensure the highest standards of healthcare for all Kenyans.

The Kenya Medical Association remains committed to upholding the welfare of doctors and the highest standards of healthcare for all Kenyans. Establishing an HSC presents the most comprehensive and sustainable solution, offering a centralized and structured approach to managing HRH.



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