

## MINISTRY OF HEALTH

**The Kenya Health Forum (KHF) 2018**  
26<sup>th</sup>-28<sup>th</sup> March 2018 – Laico Regency Hotel, Nairobi

### **KENYA HEALTH FORUM 2018 COMMUNIQUE**

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**We, stakeholders in the Kenya Health Sector**, having assembled at the 3rd National Health Sector Forum 2018 at the Laico Regency Hotel in Nairobi under the **Theme: Accelerating Progress Towards Universal Health Coverage in Kenya**, discussed how we can shape the realization of our national health sector goals. The forum takes place against the backdrop of His Excellency The President's commitment to dedicate the energy, time and resources over the next five years to the 'Big Four Agenda' to transform the lives of Kenyans from that of hardship and want to new lives of greater comfort and well-being which entails major policy and administrative reforms in the health sector, to ensure that all Kenyans have access to quality and affordable medical cover by 2022.

We took stock of the progress made in the last 4 years, reflected on the current challenges and issues affecting the health sector and discussed strategies to ensure acceleration towards Universal Health Coverage.

During our dialogues, the delegates;

**RECOGNIZED** that The Constitution of Kenya, 2010 in Article 43(a) provides for every person the right to the highest attainable standards of health, which includes the right to health care services including reproductive health,

**REITERATED** that Kenya as a part of the global community has committed itself to the goals and aspirations of the Global Sustainable Development Goals (SDGs), remains fully committed to the realization of these goals and especially Goal 3 on ensuring healthy lives and promoting the well-being of all,

We also **NOTED** that whereas devolution continues to provide an opportunity for the Health sector to expand services and become more accountable to citizens, it also provides immense opportunities for transforming health care in the country. Delegates underscored the need to re-dedicate efforts and mobilize political will at all levels towards supporting devolution and strengthening leadership, management, and governance in the health sector for the realization of national health and development goals.

We further noted and acknowledged that during the 2014-2018 period, the major goal was focused on building the capacity of the national and county governments to effectively steward their respective health agendas in line with the global and national focus. During this period, significant progress was made in the following areas:

- Enactment of the Health Act 2017
- Realigning the Human Resource for Health (HRH) agenda to ensure efficiency and equity in its management and use
- Strengthening the capacity for governance and leadership at the national and county levels of government
- Improving the evidence for equitable and efficient financing of health
- Putting in place innovative systems for evidence generation and use

We however acknowledge that despite the progress made, more effort is still required in the following areas;

- Sector governance, leadership, coordination, regulation, transparency, and accountability
- Prioritization of sector investments by all actors in the health sector
- Finalization of a health financing strategy
- Health facility accreditation.
- Human resource management and development
- Intra-sectoral and multi-sectoral coordination
- Leveraging on innovations and partnerships in the sector

From the foregoing therefore, we undertake to implement a wide range of commitments to address the following eight (8) critical priorities to improve health care.

## **1. Health Care Financing**

- Fast-track the adoption and implementation of the HCF strategy and UHC Roadmap, with an emphasis on covering the 30% indigent population within the year;
- Advocate for increased government funding including domestic resources mobilization, evidence-based planning, and the adoption of innovative financing mechanisms;
- Encourage enrollment of citizens into NHIF and other prepayment insurance schemes including community-based insurance schemes as well as private health insurance;
- Evaluate the impact of the new investments (free maternity, primary care, flagship projects etc.) on increasing access, demand, and quality;
- Institutionalize the utilization of health technology assessment in the design of the benefit package and in priority setting in the health sector.
- Institutionalize preparation of annual National Health Accounts (NHA)
- Promote Public Private Partnership models to improve service delivery
- Explore innovative financial instruments with the potential to direct private finance towards critical sustainability solutions in the health sector.
- Define an essential benefits package through a multi-stakeholder participatory process
- Review the Public Finance Management Act and ensure the ring-fencing of health revenues and budgetary allocations
- Cost the next KHSSP III and the ministerial plan and use them as a basis for financial resource allocation
- Encourage synergy between NHIF and private sector.
- Enhanced financing for prevention services.

## **2. Leadership, coordination, and governance in health sector**

- Develop a generic organization structure based on functions to help adjust the current organizational structures to fit for effective service delivery at all levels;
- Fast track the implementation of The Health Act 2017 and make the necessary amendments.

- Strengthen existing National and County governance structures to undertake their functions
- Establish and implement an effective communication strategy for the UHC Roadmap and inform the setting of health sector priorities
- Promote the application of good governance principles and practices including inclusiveness, transparency, flexibility, accountability and integrity in the health sector.
- Fast track the finalization of the Partnership Framework and ensure that its implementation is integrated as part of joint planning and review processes and guidelines;
- Coordinate and harmonize the planning and implementation of integrated plans with counties, the national level and stakeholders.
- Harmonize and align existing inter agency coordinating committees and technical working groups
- Strengthen efforts towards a *One plan, One financing mechanism and One M&E framework* for the health sector
- Inclusivity in leadership and governance of the Vulnerable and Marginalized Groups
- Strengthening institutionalization of health metrics and improved accountability at all levels.

### **3. Health information**

- Strengthen capacity for analytics and producing better communication products
- Institutionalize and finance performance measurements and reviews.
- Strengthen the utilization of information for decision making at all levels of the system
- Increase investments in ICT infrastructure and e-health development in particular
- Implementation of an enterprise architecture – The Kenya Health Enterprise Architecture that links all health systems countrywide
- Establish a unique health identifier to facilitate management of health information
- Strengthen coordination structures for Health Information Systems including the Health Data Collaborative
- Strengthening of CHIS and integration of the CHIS into DHIS
- Support the establishment and utilization of the Kenya Health Observatory by facilitating the integration and utilization of data that will enhance inter-county learning.
- Prioritize the development of a National Health Information System legal framework
- Revise the Health Information Policy
- Capacity development on health information technologies and systems that are user friendly
- Leverage on Public Private partnerships to mobilize resources through collaboration for the implementation of health information systems
- Develop tools and indicators to capture service delivery data from the use of improved infrastructure
- Strengthen improved health metrics through institutionalization of use of Complexity-Aware M&E tools for example RMNCAH Score-card Toolkit, Customized Suite of Dynamic Bottleneck Analysis Dashboards, Data Triangulation- use Geospatial Data and Technologies and Data Integration- Big Data Analytics; for integrated performance management and accountability for health

#### **4. Health Infrastructure**

- Develop and implement a roadmap and investment plan for infrastructure development and rehabilitation at national and county levels to guide prioritization and rational investments
- Strengthen the implementation of the standard norms and guidelines for health infrastructure including the renovation, repair, and maintenance of equipment,
- Upgrade and equip health facilities to provide essential health service package according to the norms and guidelines
- Ensure the rational utilization of equipment through commensurate investment in HRH and utilities necessary to run the equipment
- Capitalize on the MES to improve specialized services including medical tourism and promotion of regional centers of excellence
- Institutionalize M&E for infrastructure

#### **5. Human Resource for Health**

- Address HRH shortages and improving quality of healthcare workers by increasing investments to ensure adequate numbers of health personnel, with positive attitudes and right competencies for optimal delivery of good quality services to respond to population needs.
- Enhance Health workforce to support PHC
- Increase investments in upgrading of skills and ensure appropriate skills mix for quality service delivery including the development of guidelines for post-graduate training for doctors at the County Level
- Develop a dedicated funding mechanism to address HRH in disadvantaged areas
- Prioritize the fast tracking and implementation of the Human Resource Advisory to address human resources management and welfare issues including statutory deductions, promotions, and timely payment of salaries.
- Develop a mechanism for sharing of specialists across the counties.
- Introduce accelerated training for some key cadres where shortages persist in the country
- Invest in a functional IHRIS to manage HRH
- Establish mechanisms that ensure rational and needs based training, deployment, and distribution of HRH
- Establish a central mechanism for managing the specialist workforce that will moderate training and deployment of specialists and sub specialists to ensure equitable distribution of the service across the country.
- Development of online learning methods for competence development and skills.

#### **6. Organization of service delivery**

- Promote social and political accountability on health service delivery such as the use of scorecards and performance contracts
- Improve participation of communities in design and implementation of interventions
- Strengthen implementation of the community health strategy
- Commit resources to implement the strategies in the KHSSP
- Strengthen cooperation and consultation of the national and county levels to increase compliance to service delivery guidelines
- Strengthening of primary healthcare in service delivery

- Structuring of county, regional and national referral system
- Institutionalize the use of client exit surveys and interviews to improve responsiveness in service delivery
- Promote holistic maternal health services delivery to include a focus on the mother, skilled personnel and supplies
- Undertake capacity development plan for improving quality of care
- Designing, and operationalize integrated and person-centered service delivery systems with a shift from a disease centered approach
- Strengthening of referral system, including emergency preparedness and access to emergency medical care.

## **7. Health Products and Technology**

- Increase budgetary allocation for HPT procurements to at least 90% of quantified needs
- Establish annual budget lines for HPT system strengthening both at national and county levels
- Enhance counties' capacities on quantification and costing of commodities
- Ring fence funds for HPT in the Counties
- Capitalization of KEMSA for specialized meds for NCDs and renal
- Develop and implement legislation to make mandatory provisions with regard to the development, utilization, monitoring and updating of the 'commodity lists' as part of the minimum essential package of health to be defined for UHC;
- Develop and implement a demand forecasting and quantification capacity strengthening plan
- Enforce quality of essential products and technologies during registration, procurement and distribution.
- Strengthen the ownership and participation of County Governments in the leadership of KEMSA

## **8. Research and development**

- Prioritization of operational research and its role in informing policy and program design and implementation
- Establish the Kenya Health Research Observatory
- Strengthening partnerships for research among academic institutions, governments and the industry
- Increase funding for research for health and strengthen capacities for health research
- Build capacity on the adoption of best practices, innovations and use of available evidence for improved healthcare delivery
- Increase need-driven research by adopting the micro-research approach
- Institutionalize health policy dialogues to improve quality decision making
- Institutionalize research as a continuous process that regularly informs decision making

From the foregoing therefore, we undertake to implement a wide range of specific commitments above and, prioritize and fast track;

### **National Ministry of Health**

- Fast-track the adoption and implementation of the HCF strategy and UHC Roadmap;
- Institutionalize the utilization of health technology assessment in the design of the benefit package and in priority setting in the health sector.
- Fast track the implementation of The Health Act 2017 and make necessary amendments.
- Promote the application of good governance principles and practices including inclusiveness, transparency, flexibility, accountability, and integrity in the health sector.
- Strengthen coordination structures for Health Information Systems including the Health Data Collaborative
- Develop and implement a roadmap and investment plan for infrastructure development and rehabilitation at national and county levels to guide prioritization and rational investments
- Establish mechanisms that ensure rational and needs based training, deployment, and distribution of HRH
- Designing, and operationalize integrated and person-centered service delivery systems with a shift from a disease centered approach
- Strengthen the ownership and participation of County Governments in the leadership of KEMSA
- Institutionalize health policy dialogues and research as a continuous process to improve quality decision making
- Monitor and support implementation of the Kenya Health Enterprise Architecture and system interoperability standards.
- Promote synergy between NHIF and the private sector
- Ensure inclusivity of the vulnerable and marginalized groups in leadership and governance.
- Moderate training and deployment of specialists and sub specialists through development of a central mechanism for managing the specialist workforce in order to ensure equitable distribution of the service across the country.
- Strengthening of referral system and emergency preparedness.
- Development of online learning methods for competence development and skills.

### **County Governments**

- Support the implementation of the HCF strategy and UHC Roadmap;
- Promote the application of good governance principles and practices including inclusiveness, transparency, flexibility, accountability, and integrity in the health sector.
- Strengthen the utilization of information for decision making at all levels of the system
- Strengthen the implementation of the standard norms and guidelines for health infrastructure including the renovation, repair, and maintenance of equipment,
- Upgrade and equip health facilities to provide essential health service package according to the norms and guidelines
- Prioritize the fast tracking and implementation of the Human Resource Advisory to address human resources management and welfare issues including statutory deductions, promotions, and timely payment of salaries.
- Strengthen implementation of the community health strategy and improve participation of communities in design and implementation of interventions
- Increase budgetary allocation for HPT procurements to at least 90% of quantified needs

- Institutionalize research as a continuous process that regularly informs decision making
- Implementation of Kenya Health Enterprise Architecture and system interoperability standards.
- Enhance linkage with county assembly for planning, monitoring, and budgeting.
- Strengthening of referral system and emergency preparedness.
- Inclusivity in leadership and governance of the Vulnerable and Marginalized Groups

### **Development Partners**

- Support the finalization, adoption, and implementation of the HCF strategy and UHC Roadmap at National and County levels.
- Provide support capacity building to enable counties to deliver accessible and affordable high quality PHC/RMNCAH integrated person-centered services to achieve UHC.
- Support the finalization of the Partnership Framework, and support and participate in its implementation as part of joint planning and review processes and guidelines.
- Harmonize, coordinate, and align DP support to UHC and existing priorities of the National and County Governments.
- Strengthen efforts toward One Plan, One Financing mechanism, and One M&E framework for the health sector.
- Support strengthening of critical health systems at National and County levels.
- Support and strengthen structures for HIS, including Health Data Collaborative, and build capacity to use data for decision-making at National and County levels.
- Mobilize funding and build capacity at National and County levels for health research to inform policy and progress toward UHC.
- Support capacity building for leadership governance management and accountability for results at National and County levels.
- Promote and build capacity for domestic resource mobilization at National and County levels for sustainable UHC.

### **Private Health Sector**

- Support and participate in the adoption and implementation of the HCF strategy and UHC Roadmap;
- Recommend fast tracking implementation of The Health Act 2017;
- Promote Public Private Partnership models to improve service delivery in the implementation of the HCF strategy and UHC Roadmap;
- Support innovations in healthcare within Counties to achieve UHC;
- Advocate for appropriate health policy and legislation to enable the private sector contributes to implementation of UHC;
- Increase investments in ICT infrastructure and e-health development in particular;
- Improve compliance to standard norms and guidelines for health infrastructure including the renovation, repair, and maintenance of equipment in private facilities;
- Adhere to routine reporting of health information;
- Operationalize integrated and person-centered service delivery systems with a shift from a disease centered approach;
- Adhere to guidelines for the provision of quality of essential products and technologies during registration, procurement, and distribution;
- Focus on primary care services to achieve UHC
- Work synergistically with NHIF for service delivery.

## **Civil Society organizations**

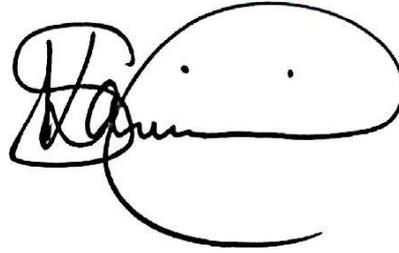
- Advocate for the review of the Public Finance Management Act and ensure the ring-fencing of health revenues and budgetary allocations
- Advocate for increased government funding including domestic resources mobilization, evidence-based planning, and the adoption of innovative financing mechanisms;
- Encourage enrollment of citizens into NHIF and other prepayment insurance schemes including community-based insurance schemes as well as private health insurance;
- Promote the application of good governance principles and practices including inclusiveness, transparency, flexibility, accountability and integrity in the health sector.
- Support the utilization of information for decision making at all levels of the system
- Promote social and political accountability on health service delivery such as the use of scorecards and performance contracts
- Improve participation of communities in design and implementation of interventions
- Strengthen implementation of the community health strategy
- Ensure patient accountability
- Affirm issue of rights-based approach to health especially in issues of equity and inclusivity.

## **Faith Based Organizations**

- Increase investments to improve service delivery in the implementation of the UHC Roadmap;
- Improve compliance to standard norms and guidelines for health infrastructure including the renovation, repair, and maintenance of equipment in FBO facilities
- Adhere to routine reporting of health information
- Operationalize integrated and person-centered service delivery systems with a shift from a disease centered approach
- Adhere to guidelines for the provision of quality of essential products and technologies during registration, procurement, and distribution.
- Encourage enrollment of citizens into NHIF and other prepayment insurance schemes including community-based insurance schemes as well as private health insurance;
- Promote the application of good governance principles and practices including inclusiveness, transparency, flexibility, accountability, and integrity in the health sector.
- Promote social and political accountability on health service delivery such as the use of scorecards and performance contracts
- Improve participation of communities in design and implementation of interventions
- Strengthen implementation of the community health strategy

Agreed and signed on the 28<sup>th</sup> Day of March 2018, in Nairobi as follows;

Ministry of Health  
Hon. Sicily Kariuki, EGH  
Cabinet Secretary



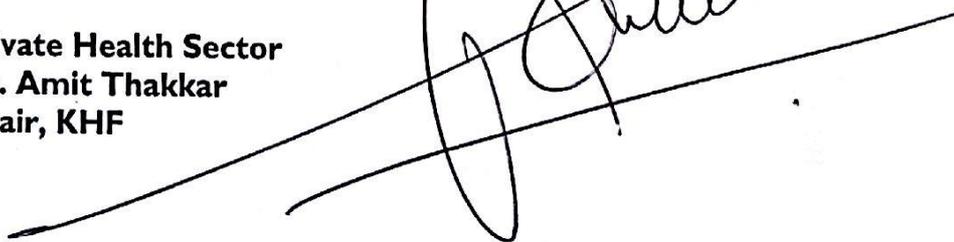
Council of Governors  
H.E Hon., Dr. Mohammed Kuti  
For County Governments



Development Partners in Health  
Kenya  
Dr. Randolph Augustin  
Chair, DPHK



Private Health Sector  
Mr. Amit Thakkar  
Chair, KHF



CSOs  
Ms. Alie Eleveld  
Chair, HENNET



FBOs  
Dr. Samwel Mwenda  
Chair, CHAK



**CECs for Health  
Dr. Andrew Mulwa  
Chair of CECs for Health**

  
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Date: 28/3/2018