

winner Features

Quality Healthcare Awards

3rd Edition 2022



Prof. Miriam Were

.....
The foundation she has laid for expanding access to quality healthcare services to all Kenyans is indeed, bearing fruit.

Lifetime Achievement

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FROM THE DIRECTOR'S DESK



Ms. Grace W. Ndegwa
Executive Director
Quality Healthcare Kenyan Awards

It is with great pleasure that we share with you this third edition of the Quality Healthcare Kenyan Awards (QHKA) Winner Features Publication.

The Quality Healthcare Kenyan Awards takes a health systems strengthening approach to improve the standards of health service delivery by honouring excellence and innovation in the health sector, advocating for high quality health systems and promoting a culture of continuous Quality Improvement.

The publication features remarkable contributions by individuals and organisations in the health sector to facilitate sharing of best practices and benchmarking.

We acknowledge the enormous participation of health professionals, health sector organisations, the public, and media in the award process. Since 2019 when we set off on this journey, we have received more than 2,400 nomination entries across the flagship categories, upwards of 28,000 votes for the three people's choice categories, and 45 award recipients have been recognised for their outstanding contributions and efforts toward improving the quality of care.

We would like to extend our sincere appreciation all our sector-wide partners and we look forward to your continued support as we embark on the next phase of this noble cause.

In this edition, we will showcase the work of the QHKA 2022 winners as we acknowledge their efforts towards improving the quality of care in our country.

Happy Reading!

“

We acknowledge the enormous participation of health professionals, health sector organisations, the public, and media in the award process.

IMPROVING ACCESS TO PRIMARY CARE SERVICES

Shining Hope for Communities



Shining Hope for Communities (SHOFCO) is a Non-Government Organization that seeks to combat the core systemic challenges that perpetuate urban poverty with an innovative transformation model that creates a ripple effect of improvements across programs in Health, Education, Gender, Water and Sanitation, as well as Sustainable Livelihoods, Advocacy and Essential services.

SHOFCO improves access to primary care health services to promote, restore and maintain health by addressing delays in deciding to seek medical care, delays in reaching a health facility and delay in receiving adequate care at the health facility. The healthcare model is scalable and has continued to be a reliable source of health care for the vulnerable and marginalized communities.

The services offered include primary healthcare services targeted towards preventive and curative interventions, COVID-19 treatment of mild infections and prevention interventions including vaccination, and integrated special clinics in maternal and child health,

nutrition and HIV management areas. The health program aims at improving and sustaining health outcomes, strengthening preventive and health promotion interventions, and building a robust Community Health Volunteer network.

The organisation empowers communities with information on how to be proactive by investing in their health and adopting health seeking behaviours. They work with more than 100 community health workers who represent households and conduct dialogues, campaigns and sensitizations in partnership with the community leaders. The SHOFCO team has been able to mobilise community leaders into organised leadership structures through which they are able to identify key areas of need and also respond to these needs appropriately.

The organisation has further worked with 1800 community health volunteers in Nairobi, Mombasa and Kisumu in door-to-door sensitization and education for communities on health prevention strategies.

To achieve their goals, they have come up with a Youth Friendly Service team and designated areas to help handle health issues among youths; introduced quality improvement projects while incorporating successful projects into policies; conducting monthly physical stock count of drugs to help mitigate cases of stock-outs; conducting staff Continuous Medical Education, offering free health services to the most vulnerable; conducting school health outreaches; empowering teen mothers through social work department and liaising with their gender department to attend to GBV clients. SHOFCO has three clinics within Mathare and Kibera impacting more than 100,343 lives through the primary health projects in the year ending 2020-2021. They have also influenced home safe deliveries from 54% to 92% among clients; achieved a reduction in water borne illnesses and respiratory tract infections by 22%; influenced drilling of boreholes for clean water supply within SHOFCO sites and distribution of clean water to communities using water trucks.

ADVANCING MATERNAL AND CHILD HEALTH

Jacaranda Health



Jacaranda Health is a non-profit organization that works to sustainably improve quality of care in public hospitals with the vision of a world where all mothers experience childbirth safely and with respect, and all newborns get a safe start in life.

The organisation works with the Ministry of Health and county governments to design and deploy affordable and scalable solutions across more than 1,000 health facilities.

Jacaranda launched PROMPTS (Promoting Mums Through Pregnancy & Postpartum Through SMS) in 2017; an AI-enabled low-cost digital health tool that empowers mothers with information and amplifies their voices to drive better quality of care.

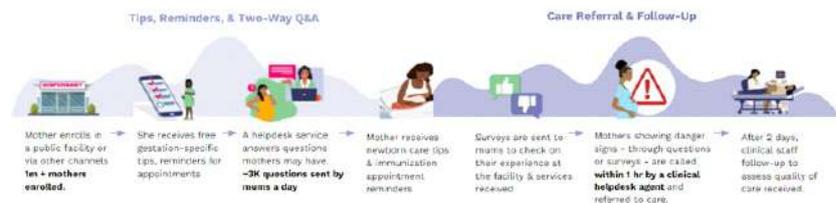
In an audit of deaths that occurred in 2014, a national committee identified that delays in care-seeking contributed to a third of all maternal deaths. Low care seeking behavior can stem from a number of factors, including lack of access to adequate, clinically-accurate

information to make informed choices which can lead to inadequate support during pregnancy, limited care during the critical postpartum period, and poor uptake of postpartum family planning at the appropriate time.

The dual approach by PROMPTS

seeks to improve care seeking behavior by empowering mums with information via SMS and driving better quality of care by centering mums' voices at less than 1 USD in operating cost per mother.

The two-way SMS messaging platform combines; Rigorously-tested SMS "nudge" messages tracked to mums' stage of pregnancy which is designed to influence key health seeking behaviors, A two-way clinical help desk service which reads and responds to mothers' questions about pregnancy and the postpartum period in both English and Swahili, A sophisticated AI-based system which triages and categorizes mothers' questions and flags clinically urgent cases to the helpdesk for rapid follow-up and referral to care, and finally Quality of Care Reports which capture and analyze data on mums' experiences and the clinical quality of care they receive.



PROMPTS is a digital health tool that empowers expectant women with information to safely navigate their pregnancies



PROMPTS is driving better quality of care through feedback.

HEALTH FACILITY INNOVATION PROJECT

Portreitz Sub County Hospital

Port Reitz Sub County Hospital is a level 4 health facility in Mombasa County, Changamwe constituency; with catchment population of 100,000. The health facility offers curative, preventive, promotive and rehabilitative health services.

The facility set out to improve quality of wound care using locally available materials to shorten wound healing period hence reducing the duration of hospital stay.

Wounds are common surgical conditions of which some take as long as 4 weeks to heal resulting to a long hospital stay and high cost implications to the patient and the health facility. A baseline survey was done between 2017 and 2018 in male and female surgical wards at Port Reitz Sub-County Hospital. Out of 210 patients attended to, a random sample of 21 patients was

taken. The baseline data from January 2017 to August 2018 showed an average healing period of 28 days for Diabetic wounds, 35 days for Burn wounds and 21 days for Chronic wounds.

'Gamjee'

'Gamjee' is made of a thick layer of absorbent cotton wool between two layers of absorbed gauze that can be made in varying sizes depending on the size of the wound.

The wound is cleaned as usual with an antiseptic lotion then either Silver Sulphadiazine or Framycetin gauze dressing is applied. A thin layer of gauze is placed on the wound and the 'Gamjee' pad is placed on top and secured with a crepe bandage or a gauze bandage. The dressing is then changed every alternate days or as need arises,

assess the of the wound is done and progress documented.

Use of this pad helps to hasten wound healing thus improving on quality of wound care through a cost effective approach.

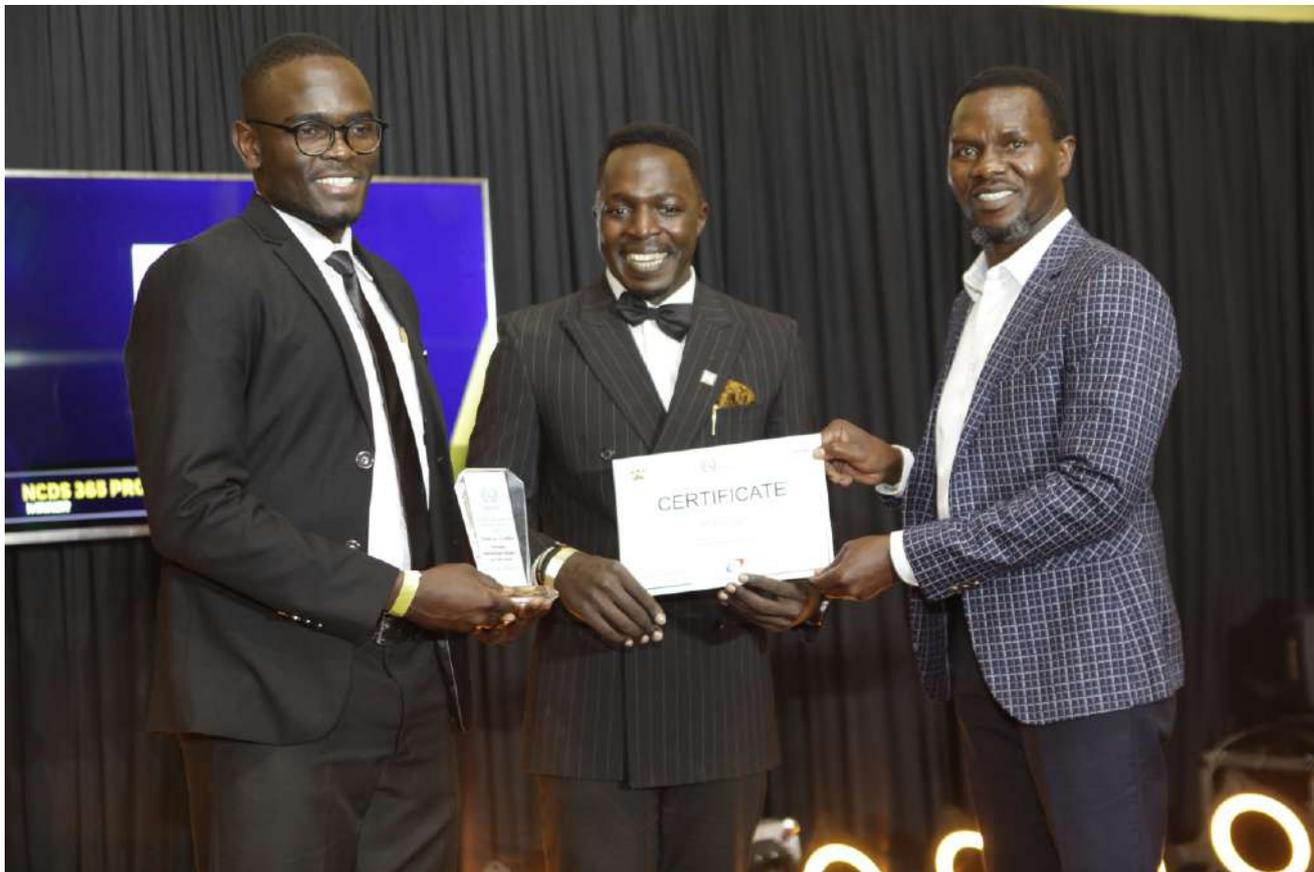
Data after use of 'Gamjee' showed an average healing period of **14 days from 28 days** for Diabetic wounds, **9 days from 35 days** for Burn wounds and **13 days from 21 days** for Chronic wounds.

Formulation of Standard Operating Procedures (SOPS), adhere to the SOPs and proper documentation on the use of "Gamjee" has led to patients recuperating within a shorter time period from an average of 4 weeks to 2 weeks and below, reduced hospital stay, reduced cost of care, improved quality of wound care and efficiency by use of available resource.



STUDENT INNOVATION PROJECT

NCDs 365 Project



NCDs 365 project creates awareness and improves literacy on NCDs through the social media platforms such as Facebook, WhatsApp, Twitter, Instagram and LinkedIn.

The aim of NCDs 365 project is to educate the general population on prevention, management, control and treatment of NCDs. They bridge the knowledge gap by sharing messages on NCDs, which are sourced from reputable organizations including the Global NCD Alliance and World Health Organization. The messages are curated and simplified to make them easy to understand.

NCDs project was conducted in two phases. Daily messages covering the major NCDs were

shared across all the social media platform by a team from Stowelink and Kenyatta University in 2020. The second phase which took place in 2021 focused on producing animated videos on NCDs which were shared weekly on social media throughout the year. In 2022, the team is sharing NCDs lived experience stories to give hope to people living with NCDs.

By virtue of partnering and collaborating with organizations, leveraging social media platform, and consistent health messaging through animated videos which are more engaging and reach a greater audience; the project has helped improve NCDs literacy, resulted to better health outcomes as a due to improved knowledge on NCDs, and

increased adherence to NCDs prevention mechanisms such as proper nutrition and physical exercise.

A number of beneficiaries revealed that the NCDs messages encouraged them to embrace physical exercise and proper nutrition.

... the team is sharing NCDs lived experience stories to give hope to people living with NCDs. 9

LIFETIME ACHIEVEMENT

Prof. Miriam K. Were



Prof. Miriam K. Were is a Medical Doctor with MB ChB from the University of Nairobi and specialised in Public Health with Master of Public Health (MPH) along with Doctors of Public Health (Dr PH) degrees from the School of Public Health of the **Johns Hopkins University** in USA.

Miriam Khamadi graduated from **William Penn College in USA** in 1964 with a Degree in the Natural Sciences. In 1965-66, Kenya's Ministry of Education sponsored her for the Postgraduate Diploma in Education at Makerere and she became a high school science teacher from 1966. While she enjoyed teaching biology, chemistry and physical education, she noted the struggle some students had with serious preventable diseases.

The opening of the Faculty of Medicine in the University of Nairobi in 1967 ignited desire in her to become a Medical Doctor. As a wife and mother her husband, Humphreys R. Were, supported her interest to apply in 1968 and she was admitted.

During medical studies, the Department of Community Health took students to rural areas and urban slums and this increased her awareness of many serious

preventable diseases while health service coverage was very low. She graduated in 1973 and was honored as **The Best All Round Graduating Medical Student**.

On completion of internship in 1974, she stated her preference to work on disease prevention and health promotion. The Ministry of Health (MOH) posted her to the Infectious Disease Hospital, the current Mbagathi Hospital, in Nairobi.

Professor Miriam Were has been nominated for the 2022 Nobel peace prize



Surprisingly even in Nairobi, most children under five years often arrived too late to be saved. Most died from common preventable diseases!

With the national health service coverage of less than 10%, Dr. Miriam K. Were looked out for opportunities to establish organised community participation in promoting their health and preventing diseases. In mid-1974 she was recruited to teach in the Department of Community Health in the Nairobi University Faculty of Medicine and took it up in October 1974.

While in the department, opportunity came in 1975/76 to specialise in public health at the Johns Hopkins University in USA. While there, she wrote an Operations Research Proposal on PEOPLES PARTICIPATION IN THEIR OWN HEALTH CARE AND DEVELOPMENT for the Doctor of Public Health degree and completed the required course work.

On return to Kenya in 1976 with the MPH, she taught at the Medical School and carried out research in communities sponsored by UNICEF. This included training of the first Community Health

Workers (CHWs). Impressive results within a year resulted in the project being adopted by MOH as the **National Pilot Project in Community-Based Health Care (CB-HC)**. In 1977 AMREF joined the CB-HC approach in Kibwezi and later Prof Dan Kaseje researched on control of Malaria through this approach.

In 1978, following the International Conference on Primary Health Care where Kenya MOH presented a report from the project, this project was awarded the **UNICEF Maurice Pate Award of 1978** that recognises innovative approaches to problem solving; the first time the award came to Africa. In 1980, the MOH established the **CB-HC Unit** at its Headquarters and in 1981, Dr. Miriam K. Were was awarded the Doctor of Public Health degree by Johns Hopkins University after successfully defending the thesis from this research. The book she wrote from this work **Organisation and Management of Community-Based Health care** has been used globally including in Universities as a guide.

In 1982 Dr. Miriam K. Were was appointed **Head of the Department of Community Health**, the first woman to head a Department in the Faculty of Medicine at the

University of Nairobi. Aware of the severe shortage of teaching staff in the department, she galvanized national and international support to mount the first Master of Public Health (MPH) program in Kenya in 1983. Since then MPH graduates constitute a pool from which the Department recruits teachers and from which MOH obtained public health technical experts and managers for departments at the MOH headquarters, provinces and districts; Now they are also serving Counties.

Other universities came up in Kenya and established Colleges of Health Sciences, such as Moi and Kenyatta Universities, and they also produce public health experts to the benefit of the nation.

Miriam K. Were's professional successes resulted in working with the UN agencies of WHO, UNICEF and UNFPA as well as membership in numerous international boards & committees.

In 1982 Dr. Miriam K. Were was appointed Head of the Department of Community Health, the first woman to head a Department in the Faculty of Medicine at the University of Nairobi.

These include Membership on the Independent Expert Review Group (IERG) of the UN Secretary General's Global Strategy for Women and Children's Health, WHO Global Advisory Committee for Medical Research, Advisory and Planning Committee of the Dag Hammarskjold Foundation, Board of Trustees of the International Centre for Diarrhoeal Diseases Research, Bangladesh, and Prince Mahidol International Advisory Committee among others. Through Professional Associations in Kenya, Prof Were has contributed to improving health care through positive examples as a member of the Kenya Medical Association, Founder Chair of the Kenya Medical Women's Association, and Founder Chairperson of the Public Health Association of Kenya, later renamed Community Health Association of Kenya. To address specific challenges of Adolescent Reproductive health, she co-sponsored the registration of a youth-focused NGO, Uzima Foundation, in 1995 which is still active.

Prof Were was **Chair of Kenya's National AIDS Control Council** (2003-2009) during which time the national HIV prevalence dropped from 14 to 5%. In 2006 the President awarded her the National Honour of EBS and in 2010 she was recognized as a Hero in Public Health on National Heroes Day, 20th October. She also served as **Chair of the AMREF International Board** and spread the Community Approach to other countries. Prof Were and Dr. Naphtali Agata were the consultants to the first **National Convention on Community Health Services in 2010**. In 2011 she was appointed the inaugural **Goodwill Ambassador for The Community Health Strategy**. She has also been Chancellor of Moi University. International recognitions include the **UNCEF Maurice**

Pate Award in 1978, **Queen Elizabeth II Gold Medal in Public Health** in the Commonwealth 2007, and the **Hideyo Noguchi Africa Prize by Japan in 2008** as the first recipient, among others.

Prof Were continues to be called upon globally for specialist health services and UHC. From 2008, she is a member of **Champions for AIDS-Free Generation** consisting mostly of former African Presidents.

The foundation Prof Miriam K. Were has laid for expanding access to quality healthcare services to all Kenyans is indeed, bearing fruit. The **2006-2010 Kenya National Health Sector Strategic Plan II** spelt out the **Community Health Strategy** focused on establishing Community Health Services (CHS) at the Sub-location level through

CHWs trained to work with communities on health promotion, disease-prevention and selected first line curative services. This has been reinforced in the **Health Act of 2017**. Currently, Community Health Services are in all counties of Kenya but at different levels of achievement.

The contribution of strong CHWs programs to improving people's health is now widely recognised and seen as critical for global achievement of UHC. By 2018, over 60% of sub-locations in Kenya had Community Health Services! She anticipates that through stepped up efforts this will reach 100% by 2022 with the impetus from President Uhuru Kenyatta's Big Four Agenda of which Universal Health Coverage (UHC) is one.



USE OF INFORMATION TECHNOLOGY TO IMPROVE PATIENT CARE

Gertrude's Children's Hospital



Gertrude's Children's Hospital is a Level 5 Tertiary Referral and Teaching Children's Hospital located in Nairobi County. The health facility is licensed to provide healthcare to children and teens up to 21 years of age and provides a full range of health services including preventive care, accident and emergency, outpatient care, Inpatient Medical and Surgical care, and rehabilitation services. The hospital further provides specialist care covering over twenty aspects of paediatric specialisation.

Children born with Congenital Heart Defects (CHD) in Kenya are approximately 10,000. Cardiovascular diseases contribute to more than 25% of the total deaths globally. Most of these lives can be saved by ensuring timely diagnosis and treatment of the condition.

As per the medical standards, chances of surviving a heart attack is far higher if the treatment is given within the 'golden hour' which is the first 90 minutes of the onset of the condition. On the contrary, the average time for treatment of a heart attack patient is around 6-10 hours in most developing countries.

Tricog has developed an AI based healthcare technology model which enables a faster diagnosis of modalities like ECG, which not only sets the patient in the care pathway much faster but also saves numerous lives. Tricog saves lives by expediting cardiac diagnosis and accelerating cardiac treatment for Low-Resource, Under-served Populations.

The Tricog solutions enables diagnosis in less than 10 minutes,

thus ensuring that patient can reach the Cardiac Centre for next steps in the golden hour.

With Tricog, Gertrude's Children's Hospital set out to screen at least 50-100 patients every month, reduce the time taken for patient to enter the care pathway, establish a seamless ECG interpretation service, improve patient outcome and reduce mortality rate of cardiac patients.

So far the health facility has been able to meet the monthly target of patients served, of whom 20% required medical intervention. All this has been achieved at a lower cost on account of the fact that Tricog costs about a third of the commercial charges in the country consequently translating to 60-65% reduction in cost to the patient.

USE OF SOCIAL MEDIA IN HEALTHCARE

Chiromo Hospital Group

Chiromo Hospital Group is a group of Psychiatric facilities, with the only level 5 psychiatric hospital in Sub-Saharan Africa. The hospital offers Promotive, Preventive and Curative Mental Health Care and has been serving clients for 25 years.

The Digital Relations department spearheads mental health advocacy, awareness, Promotive & prevention programs with initiatives on Social Media and Public Engagements. The programs are heavily geared on sensitizing and breaking the stigma through normalizing the conversation surrounding mental illnesses.

Tufunguke campaign is a global initiative, titled in Swahili and translates to 'Let us Open Up'. The campaign seeks to create a safe space for conversations around matters mental health; to destigmatize and contextualize mental health experiences through shared lived experiences; and to lobby for allocation of needed resources to the mental health sector.

Due to the stigma and Discrimination related to matters mental health, many people living with mental illnesses, or giving care to persons living with mental illnesses suffer in silence. This initiative purposes to promote conversations around mental health in multiple spaces, to mobilize and lobby for allocation of more resources to this epidemic.

The Tufunguke campaign reaches an average 100,000 individuals every month on social media. The target audience is mostly the youth who gain mental health awareness, psychosocial support and evidence based mental health tools.

‘Tufunguke campaign is a global initiative, titled in Swahili and translates to 'Let us Open Up'. The campaign seeks to create a safe space for conversations around matters mental health; to destigmatize and contextualize mental health experiences through shared lived experiences;...’

The Tufunguke Social Media Campaign takes various approaches which include #Tufunguke Testimonials that involves Chiromo Hospital Group clients sharing their stories either in written, audio or video format and having them published widely (with consent) on the hospital's social media platform as well as the website and #Tufunguke, My Story Counts which is specifically curated for care-givers of persons living with a mental illness.

Other strategies are #Tufunguke Tournament, #Tufunguke na

Wanahabari, #Tufunguke Magerezani, #Tufunguke na Wanaspoti, #Tufunguke Shuleni, and #Tufunguke Campus Tours.

They also on board social media influencers to help push the #Tufunguke and to encourage the audience to open up and share their mental health journey.

The Tufunguke campaign has increased awareness on mental health, improved help-seeking behaviour and enhanced partnerships in the healthcare spectrum.



IMPROVING ACCESS TO ESSENTIAL MEDICINES AND VACCINES

MedSource Group Ltd



MedSource Group Ltd is a group purchasing organization dedicated to improving the accessibility, availability, and affordability of quality-assured medicines and other health products for health care providers and the people they serve.

MedSource seeks to reduce costs while promoting quality across the entire pharmaceutical supply chain through its membership of hospitals, clinics, pharmacies, distributors, and manufacturers by working with suppliers to streamline access and reduce the overall cost of medical supplies.

The organisation provides its members with a platform through which they can place orders directly with the suppliers at pre-negotiated prices as well as training, market intelligence and business support. MedSource Group Ltd has a presence in 38 of the 47 counties and has over 600 members.

Incorporated in Kenya, the organisation is an independently operated subsidiary of the US based Management Sciences for Health (MSH).



Emergency Plus Medical Services (E-Plus) is the leading private pre-hospital care and ambulance services provider in the East Africa region, operating on commercial and Corporate Social Responsibility (CSR) basis in Kenya and in the Gambia with an estimated market share of 75%.



- We offer:**
- Air and Ground ambulance services and evacuations
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 - Online virtual medical consultation platform, eDoc
 - First Aid Kits
 - Events Coverage and Home based Care services
 - Medical Escort/Taxi
 - e-Pharmacy (your drugs prescription delivered to you)

E-Plus boasts of a fleet of 128 fully equipped state-of-the-art ambulances (both Advanced Life Support and Basic Life Support) manned by highly qualified paramedics experienced in pre-hospital care operating in over 97 stations across the 47 counties, enabling it to maintain its position as the region's emergency medical services market leader.

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HEALTHCARE LEADERSHIP

Dr. James Mwangi



As the Executive Chairman for Equity Group Foundation (EGF), Dr. James Mwangi is passionate about transforming lives and livelihoods, giving dignity and expanding opportunities for wealth creation through multiple social impact interventions in various sectors of the economy including health.

Dr. Mwangi's position as the Equity Group CEO and Managing Director, the EGF Executive Chairman and the Chair of the Health Committee of the Kenya COVID-19 Fund Board has played a critical role in contributing to impacting the health sector through various initiatives.

Health Sector Initiatives

The initiatives include the establishment of Equity Afia, a franchise of outpatient medical facilities that seek to increase access to quality and affordable healthcare services to Kenyans. There are 53 registered Equity Afia Medical Centres run by 38 Equity Leaders Program scholars and employing over 1000 medics. Over 700,000 cumulative patients have been served across 47 Equity Afia medical centres as at 2021 end of year. The establishment of Equity Life Assurance Kenya Limited, an insurance subsidiary that has received licensing from the

Insurance Regulatory Authority to offer insurance services. The bank through Equity Bank Assurance also provides a medical insurance cover dubbed Equimed for individuals and SMEs with an option for Insurance Premium Financing (IPF) for customers who need the same. Championing healthcare financing through the provision of financial advisory services & financing facilities to healthcare institutions including both short term and long term financing solutions such as medical equipment financing, working capital loans and construction financing

COVID-19 interventions in Kenya

The Covid-19 response initiative distributed PPEs valued at Ksh 1 billion to 25 public hospitals, 60 mission hospitals, 71 KMTC campuses and 11 Universities that offer medical training.

A further Ksh 85M was used for the case management training and psychosocial wellness program for 50,000 Public Healthcare Workers Dealing with COVID-19.

Ksh 8 billion was disbursed to multiple hospitals in Kenya and 9,500 clinics and hospitals supported through their branch network.

Championing the expansion of staff medical cover up to Ksh 2million for COVID-19 treatment as from April 2020 and instituting a work from home policy in support of COVID-19 prevention.

The sensitization and distribution of COVID-19 health information and training of Kenyans through Equity branches and the Equity Afia franchise where over 1 million fliers and leaflets on COVID-19 were distributed.

Recognition

Dr. Mwangi holds six honorary doctorate degrees in recognition of his positive impact on the Kenyan society and has been honoured three times with National Presidential Awards: The First Class Chief of the Order of the Burning Spear (CBS), the Moran of the Burning Spear (MBS) and Head of State Commendation (HSC).

On the global front, he has won several awards including the G8 Global Vision Award, 2007. He was named among the Top 50 Emerging Market Business Leaders and the 20 most influential people in Africa in 2011; the World Entrepreneur of the Year by Ernst & Young in 2012; the Forbes Africa Person of the Year in 2012 and was named in the Bloomberg 50 list of people who defined 2019 globally. He is an honoree of the 2020 Oslo Business for Peace Award, and has been named among the Top 50 most reputable bank CEOs in Africa.

Dr. Mwangi's position as the Equity Group CEO and Managing Director, the EGF Executive Chairman and the Chair of the Health Committee of the Kenya COVID-19 Fund Board has played a critical role in contributing to impacting the health sector through various initiatives.

HEALTHCARE IN THARAKA NITHI COUNTY



Tharaka Nithi County lies in the Mid-eastern region of Kenya. It borders Meru County to the North, Mt Kenya forest to the west, Kitui County to the East and Embu County to the South. The County is made up of 6 administrative sub-counties which cover a surface area of 2,639 Sq. Kilometers served by 151 Health facilities (GOK, FBOs, NGOs and Private facilities).

The County has a Vision to have a county free from preventable diseases and ill Health and the Mission is to provide effective leadership and participate in provision of Equitable, Responsive, accessible and accountable high-quality health care services to Tharaka Nithi Citizens.

The County Government of Tharaka Nithi enhances financing of health services through automation of revenue collection in the main hospitals, Increase in the County Health budget allocations, Enhanced partnerships to finance health programs in the County and Adoption Programme Based Budgeting.

The County is served by 189 health facilities; 102 (54%) health facilities under the county government, 52 (28%) Private health facilities and 31 (16.4%) Faith based organizations and 4 health facilities under NGOs. The number of facilities has increased from 151 to 189 (38) health facilities.

Community Health Strategy

The Community Health Strategy was adopted in Tharaka Nithi County primarily to improve Primary Health Service delivery at the community level with the objective of restoring, promoting and maintaining health in the community. The community Health Programme in Tharaka Nithi County was initiated in 2009 with twenty-eight (28) Community Health Units and Two hundred and eighty (280) Community Health Volunteers (CHVs). The programme has steadily grown over years through focused improvements to the programme and a strong dedicated County leadership. By 2020, the County had 100 Community Health Units with 1,000 active Community Health Volunteers offering Community Health Services.

In mid- year 2020, under Universal Health Coverage programme, Tharaka Nithi County recruited additional 265 Community Health Volunteers, increasing the number to 1,265. The Community Health Programme is composed of Community Health Units (CHUs), that are governed by a Community Health Committee (CHC), and supervised by Community Health assistants (CHAs) and Community Health Extension Workers (CHEWs). The CHAs and CHEWs are government officers who are nurses, Public Health Officers or any other health professionals whose work mainly is to offer technical assistance to CHVs.

Besides supervising CHVs, the CHAs and CHEWs perform other roles in the Community and at the link facility.

Each Community Health Unit is linked to a health facility to facilitate referrals, feedback, and continuous learning. Each community unit is made up of 10 CHVs selected by the community members in a public 'Baraza' as per the set criteria. CHVs are distributed based on population served and household coverage.

Tharaka Nithi County Community programme is well anchored in the CIDP (2018- 2022), Tharaka Nithi County Health Bill, Annual Work plan, and County Health Sector Strategic Investment Plan 2018-2019, and Tharaka Nithi County Strategy 2021- 2025. This is in line with the National Health Policy (2014-2030) and the Kenyan Big 4 Agenda on Universal Health Coverage. The process of establishing the new Community Health Services entailed mapping out the community health needs; identification and sensitization of community health extension workers; selection and training of community health Volunteers followed by selection and training of community health committees.

The Community Health Strategy in Tharaka Nithi County seeks to accelerate attainment of Universal Health Coverage and Strengthen Primary Health Care to reduce the disease burden in the County by improving access and utilization of Primary Health Services, eliminating Communicable diseases through immunization, defaulter tracing, good hygiene and promotion of healthy lifestyles, reducing non-communicable diseases through health education and promotion of healthy lifestyles, strengthening provision of community Health services and monitoring performance of community health indicators.

RESPONSE TO COVID-19

Shining Hope for Communities



Shining Hope for Communities (SHOFCO) is focused on building urban promise from urban poverty and operates in the urban informal settlements of Nairobi, Mombasa, Nakuru, Kisumu, Kakamega, Bungoma, Kilifi and Siaya.

In response to COVID-19 pandemic, SHOFCO developed mechanisms targeted towards COVID-19 prevention interventions in rural-urban settlements to limit the spread through initiation of health prevention and health promotion activities at community level; distribution of Information, Education and Communication materials to the community through community health volunteers and community champions; training and supporting Community Health Workers on COVID-19 disease prevention measures and ensuring facility-based infection prevention and staff protection by decongesting offices, providing Personal protective equipment and offering financial and social support to those affected or infected by the disease.

SHOFCO further partnered with Ministry of Health to provide free COVID-19 testing for urban informal settlers sensitized and referred following screening at the community level and walk ins in Nairobi, Kisumu and Kakamega Counties. They ensured timely roll out of COVID-19 Vaccination programs in the urban informal settlements increasing availability and accessibility of equitable vaccine distribution. The organisation also initiated community empowerment projects aimed at improving social-economic status of vulnerable individuals, created an enabling environment that promotes child protection, food security, education and gender equality.

SHOFCO has managed to reach over 2.4 million people with emergency response activities across 22 slums. The SHOFCO COVID-19 response activities started in March 2020 and include Community sensitization, Screening of over 1,856,598 individuals, Establishment of 354 handwashing stations across 17 sites in Kenya,

Provision of free clean water to the vulnerable, Distribution of soap and hand sanitizers to households in 11 slums, and Provision of free face masks to the community on a frequent basis.

There was also the Production of sanitizers, soap, masks and PPEs by SHOFCO Women Enterprise Program team and Combating of misinformation via an SMS platform which has had 351,054 contacts enrolled.

Other activities were Direct cash transfers by partnering with GiveDirectly thereby disbursing \$2,899,740 USD equivalent to 34,457 vulnerable families in the SHOFCO Urban Network (SUN); Emergency food support through food distributions and food vouchers and Gender-based violence response through their Gender Department which responded to 2,280 cases.

SHOFCO also provided learning centres equipped with books for Primary, Secondary and University students during the period when schools were closed; Equitable COVID-19 vaccination in the urban informal settlements of Mathare and Kibera; and Economic empowerment through casual employment opportunities for instance in managing hand washing stations.

To ensure timely testing and diagnosis, they further procured Antigen test kits and distributed them to three counties namely Nairobi, Kisumu and Kakamega. The response to COVID-19 pandemic has had an impact as follows: over 13,583 people tested; over 21,722 referrals from community by Community Health Volunteers; over 35,3267 households visited and over 1,183,965 household members reached.



MEASURING PATIENT
EXPERIENCE IS FUNDAMENTAL
TO IMPROVING HEALTH
OUTCOMES.



PUBLIC HOSPITAL OF CHOICE

Mama Lucy Kibaki Hospital



Mama Lucy Kibaki Hospital is a level 5 Hospital located in Nairobi's populous Embakasi Central Constituency along Kayole Spine road, off Kangundo road. The hospital was built as a donation by the People's Republic of China to

the Government and the people of Kenya and services commenced on 5th August 2011.

The 188 bed capacity hospital is the main referral health facility for Eastlands area, Nairobi County. It serves approximately an average of

19,000 people in the in-patient department and 300,000 people annually in the out-patient department annually. This translates to an average of 1,200 patients per day in the outpatient department.

Mama Lucy Kibaki Hospital offers an array of services which include; In-patient services, Outpatient services, Specialist clinics, Health promotion services, Rehabilitative services, Farewell services, Blood Donation Centre and training facilities for interns and other students on attachment.

The hospital is establishing a new wing with a capacity of 180 beds. The new wing will incorporate additional theatres, a Burn unit, an ultramodern Dental unit, a Youth Centre and a fully-fledged ICU. Mama Lucy Kibaki Hospital has also established Tumaini clinic a sexual gender-based violence centre and Comprehensive Care Clinic (CCC).



PRIVATE HOSPITAL OF CHOICE

RUAI FAMILY HOSPITAL (RFH)

Ruai Family Hospital is located along Kangundo Road, Ruai, Nairobi County. The facility was founded in 2011 by Dr Maxwell Okoth.

Dr. Okoth started Ruai Family Hospital at the age of 26, a year after completing his Bachelor of Medicine and Surgery from the University of Nairobi.

The Ruai Family Hospital has a bed capacity of 50 while the RFH Specialist Hospital which is a level 5 health facility has a

bed capacity of 100. The hospital offers a variety of health services ranging from Accident and Emergency, General Medicine, Surgery, Obstetrics and Gynecology, Maternity, ICU/HDU, Dialysis, Oncology, Ophthalmology, Dental and Pharmacy.

RFH additionally has a branch in Tala and satellite Medical Centers in Embakasi, Kahawa West, Ruiru, Komarock and Ruaka.

FAITH-BASED HOSPITAL OF CHOICE

ST. THERESA MISSION HOSPITAL



St. Theresa Mission Hospital is a level 5 Health Facility located in Meru County. It was founded in 1967 by the Congregation of the Little Sisters of St. Theresa of the Child Jesus as a dispensary in the Church Sacristy.

The hospital currently has a bed capacity of 235 and offers a wide range of primary and secondary healthcare services in addition to specialist services which include Renal, Oncology and Critical Care services. The Hospital also has a satellite dispensary in Gitare, Gilgil, Nakuru County.

St. Theresa Mission Hospital further serves as a teaching facility for Human Resources for Health of all cadres including Medical Officers, Clinical Officers, and Anesthetists.

The facility has been recognized by SafeCare for its commitment towards providing safe health care to clients and also emerged the 2nd runner up in the QHKA 2021 for Excellence in Response to Covid-19.

As part of giving back to the community, the facility raises funds for patients with orthopedic complications who need surgery through an annual initiative charity walk.



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APPENDIX

EXCELLENCE IN IMPROVING ACCESS TO PRIMARY CARE SERVICES	RANK	CONTACT DETAILS
Shining Hope For Communities	Winner	https://www.shofco.org/
Tharaka Nithi County	1 st Runner Up	https://tharakanithi.go.ke/
Likoni Sub County Hospital	2 nd Runner Up	https://www.mombasa.go.ke/
EXCELLENCE IN ADVANCING MATERNAL AND CHILD HEALTH POWERED BY UNFPA		
Jacaranda Health	Winner	https://www.jacarandahealth.org/
MomCare	1 st Runner Up	https://www.pharmaccess.org/stories/care-bundles/
Village HopeCore International	2 nd Runner Up	https://www.villagehopecore.org/
HEALTH FACILITY INNOVATION PROJECT OF THE YEAR		
Portreitz Sub-County Hospital	Winner	https://www.mombasa.go.ke/
Magongo MCM Dispensary	1 st Runner Up	https://www.mombasa.go.ke/
Oresi Sub-county Hospital – (AHF Kenya)	2 nd Runner Up	https://www.aidshealth.org/global/kenya/
STUDENT INNOVATION PROJECT OF THE YEAR		
NCDs 365 Project	Winner	https://stowelink.com/
Medswipe Africa	1 st Runner Up	https://medswipe.co.ke/
LIFETIME ACHIEVEMENT AWARD		
Prof. Miriam Were	Winner	
USE OF INFORMATION TECHNOLOGY TO IMPROVE PATIENT CARE POWERED BY SMART APPLICATIONS INTERNATIONAL		
Gertrude's Children's Hospital	Winner	https://www.gerties.org/
Penda Health	1 st Runner Up	https://www.pendahealth.com/
Red Splash Kenya	2 nd Runner Up	https://www.redsplash.org/
BEST USE OF SOCIAL MEDIA IN HEALTHCARE		
Chiromo Hospital Group	Winner	https://chiromohospitalgroup.co.ke/
Jipin na Kiss Condoms Campaign	1 st Runner Up	https://www.dktinternational.org/country-programs/kenya/
NCDs 365 Project	2 nd Runner Up	https://stowelink.com/
EXCELLENCE IN IMPROVING ACCESS TO ESSENTIAL MEDICINES AND VACCINES		
MedSource Group Ltd	Winner	https://medsource-group.com/
Signature Healthcare Ltd	1 st Runner Up	https://signaturehealthcareltd.co.ke/
HEALTHCARE LEADERSHIP AWARD		
Dr. James Mwangi	Winner	https://equitygroupfoundation.com/egf-leader/dr-james-mwangi/
Dr. Kajira Mugambi	1 st Runner Up	https://www.villagehopecore.org/about#founder
Phyllys Kemunto Onkoba	2 nd Runner Up	phyllyskemunto@gmail.com
COUNTY WITH THE BEST MANAGED HEALTHCARE		
Tharaka-Nithi County Government	Winner	https://tharakanithi.go.ke/
Nakuru County Government	1 st Runner Up	https://nakuru.go.ke/
THE AWARD OF EXCELLENCE IN RESPONSE TO COVID – 19		
Shining Hope For Communities	Winner	https://www.shofco.org/
Emergency Plus Medical Services (EPLUS)	1 st Runner Up	https://www.eplus.co.ke/
Gertrude's Children's Hospital	2 nd Runner Up	https://www.gerties.org/
Kiambu County Government	3 rd Runner Up	https://kiambu.go.ke/
PUBLIC HOSPITAL		
Mama Lucy Kibaki Hospital	Winner	https://mamalucykibakihospital.or.ke/
Magunga Health Centre	1 st Runner Up	https://www.homabay.go.ke/
Malongo Dispensary	2 nd Runner Up	https://www.homabay.go.ke/
PRIVATE HOSPITALS POWERED BY GERTRUDE'S CHILDREN'S HOSPITAL		
Ruai Family Hospital	Winner	https://rfhhealthcare.co.ke/
Lion's Sightfirst Eye Hospital	1 st Runner Up	https://www.lionsloresho.org/
Jacaranda Maternity	2 nd Runner Up	https://www.jacarandamaternity.co.ke/
Penda Medical Centre	3 rd Runner Up	https://www.pendahealth.com/
FAITH-BASED HOSPITAL		
St. Theresa Mission Hospital - Kiirua	Winner	https://sttheresahosp-kiirua.com/
Kijabe (AIC) Hospital	1 st Runner Up	https://kijabehospital.org/
Tabaka Mission Hospital	2 nd Runner Up	https://www.tabakamissionhospital.or.ke/



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