Pharmaceutical Excellence

KENYA PHARMACEUTICAL ASSOCIATION

Strategic Plan

2012/13 – 2016/17

&

Operational Plan

2012/13 – 2013/14

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STRATEGIC PLAN
2012/13 – 2016/17

AUGUST 2012

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FOREWORD

As we launch the KPA Strategic Plan, 2012/13 – 2016/17, we should not be distracted by weaknesses found in the implementation of the previous Strategic Plan. The team working on this Strategic Plan has done their best to minimize, if not to eliminate, all the bottlenecks of the past Strategic Plan.

The current Strategic Plan is all inclusive. CCM officials laid the foundation path after exhaustively interrogating the previous Strategic Plan and agreeing on the strategic areas of focus for this plan. KPA members were then given a chance to comment and adopt the Strategic Plan at the Annual Scientific Conference (ASC) held in Nakuru on 27/07/2012 and 28/07/2012.

This Strategic Plan is capable of catapulting KPA to higher levels of efficiency if KPA abides by its recommendations. It will guide KPA in governance, increase efficiency and maintain cohesiveness in the Association. It will enable KPA to be responsive to members' needs and help us move en masse without leaving any responsibility behind.

Some issues like investments, Sacco, Financial empowerment of members, CPD were not properly captured in the previous Strategic Plan. They are now articulately addressed in this Strategic Plan, which is showing clearly where KPA is and where KPA shall be in the next 5 years. It is my humble prayer that we aim there and believe that we can reach the target.

Implementation of the previous Strategic Plan was not properly undertaken but this time we intend to have in place an implementation committee of KPA trustees and NEC officials. This committee will safeguard continuity between outgoing and incoming NEC officials.

I urge all KPA members to find time to go through the Strategic Plan, own it and be part and parcel of its implementation.

This plan has been formulated through the help of specialists, friendly sponsors and KPA officials. A lot of consultations have taken place and in my view, it is a good strategic plan. It should be embraced by all KPA members to instill proper checks and balances in the Association.

I am confident that the strategic plan provides the necessary framework to move KPA ahead. I urge KPA officials and members to put all the necessary effort into its implementation to enable KPA to move towards the vision ***"TO BE A LEADING PROFESSIONAL ASSOCIATION IN THE PROMOTION OF QUALITY PHARMACEUTICAL PRACTICE".***

Evanson K. Kagotho
KPA National Chairman

PREFACE

This is the second strategic plan the association has drawn. The first plan covered a three year period, starting from 2009 – 2011. This Plan aims at creating a clear road map for the association activities geared towards achieving our vision ***"To be a leading professional association in promotion of quality pharmaceutical practice"***.

This strategic plan shall be availed to all the associates. It will constantly remind them of our mission ***"To promote excellence in pharmaceutical practice".*** This mission is achievable if the members are guided by our values as elaborated in this plan.

The Strategic Plan development process involved all the elected officials of the Branch Executive Committee (BEC) and National Executive Committee. The resulting document was discussed by the Central Council before being ratified by the highest organ of the Association the Annual Scientific Conference cum AGM. It is thus all participatory and members owned.

We aim to strengthen the institutional capacity of our Secretariat and KPA's governing bodies, creating an effective and efficient leadership and management, resulting in the achievement of the association's long-term goals. We shall ensure professional development of the members while enhancing their economic empowerment. We shall also aim to increase and broaden the institutional income base, hence making the association self sustainable.

This plan covers a period of 5 years and activities are divided into annual plans each with its Annual Operation Plan (AOP). Each year will be subjected to monitoring and evaluation that will help guide the development of the next AOP.

The long term strategic plan period is aimed at avoiding the loss of track of activities, and sometime direction, due to change of office bearers at the end of each tenure of the six elected office bearers. Since the constitutional term is 3 years, there is an overlap of the plan across two office tenures.

This Strategic Plan can only be successfully implemented if we all pull together and in the same direction. This is only possible if the officials and members are selfless and see the association as reflection of self. The constitution of the association and the code of ethics are two very important guides to this strategic plan.

Yes we can!! …Quoting US President, Barrack Obama.

Githinji J. Maina
Hon. Secretary General
Kenya Pharmaceutical Association

ACKNOWLEDGEMENTS

This Strategic Plan is the result of a concerted effort of a number of organizations and individuals, whose contributions we acknowledge.

We would like to thank the members of National Executive Council (NEC), the office of the National Chairman together with all the Executive Members for meeting and discussing the planning of the Strategic Planning.

We thank the Central Council Members (CCM) for meeting and participating in Strategic planning workshop.

We wish to acknowledge the technical assistance and support provided by Management Sciences for Health/Health Commodities and Services Management (MSH/HCSM) Program through funding from United States Agency for International Development (USAID) specifically for sponsoring the Strategic Plan development process and consultative workshops. Our special thanks go to Dr. Ndinda Kusu, for her technical assistance in the whole process including the end-term review of the 2009-2011 strategic plan.

We wish to also appreciate Dr. Nicholas Njoka for facilitating the stakeholder workshops and entire strategic plan development process. Additionally we wish to recognize James Maina Githinji the KPA Hon. Secretary General for his commitment and the hard work towards the strategic plan development process.

Finally, we wish to acknowledge the staff at the KPA Secretariat, Janet and Maurine, for providing the support needed during the Strategic Plan development period.

ACRONYMS AND ABBREVIATIONS

AGM	Annual General Meeting
BNF	British National Formulary
CC	Central Council
CCM	Central Council Meeting
CPD	Continuous Professional Development
DOMC	Division of Malaria Control
DPM	Directorate of Personnel Management
EAC	East African Community
HELB	Higher Loans Education Board
HIV	Human Immunodeficiency Virus
ICT	Information and Communication Technology
KAPA	Kenya African Pharmaceutical Association
KEMRI	Kenya Medical Research Institute
KEMSA	Kenya Medical Supplies Agency
KIE	Kenya Institute of Education
KMA	Kenya Medical Association
KNDP	Kenya National Drug Policy
KPA	Kenya Pharmaceutical Association
M&E	Monitoring and Evaluation
MOEST	Ministry of Education, Science and Technology
MOH	Ministry of Health
MOU	Memorandum of Understanding
MSH	Management Sciences for Health
NACADA	National Campaign against Drug Abuse
NASCOP	National AIDS and STIs Control Program
NEC	National Executive Committee
NGO	Non Governmental Organization
PPB	Pharmacy and Poisons Board
PSK	Pharmaceutical Society of Kenya
SACCO	Savings and Credit Cooperative society
SOP	Standard Operating Procedure
SP	Strategic Plan

1. INTRODUCTION AND BACKGROUND

1.1 Background on Pharmacy Practice in Kenya

The health system in Kenya is organized and implemented through a network of facilities organized in a pyramidal pattern at six levels. At the lowest level (Level 1) is the Community, followed by dispensaries and health clinics at level 2, health centers at level 3, sub-district hospitals and district hospitals at level 4, provincial general hospitals at level 5, and the Kenyatta National Hospital and Moi Referral Hospital at level 6.

The Ministry of Health (MoH) is the major provider of health care services in Kenya. Out of all the health facilities in the country, the MoH controls and runs about 58% while the private sector, the mission organizations and the Ministry of Local government runs the remaining 42%. Public health services account for 52% of hospital beds and 70% of health personnel[1].

The public sector controls about 79% of the health centers, 92% of the sub-health centers, and 60% of the dispensaries. The NGO sector is dominant in health clinics, maternity and nursing homes controlling 94% of the total while also controlling 86% of the medical centers in the country.

For healthcare service delivery to be complete and effective, pharmaceutical services have to be provided at all facilities at the various levels of health service delivery. Ideally, pharmaceutical services should be provided by those specifically trained in pharmacy, namely the pharmacists and the pharmaceutical technologists.

To ensure that the pharmaceutical products are available at all the health facilities, an effective pharmaceutical industry should also be in place. The pharmaceutical industry consists of three segments namely the manufacturers, distributors and retailers. All these play a major role in supporting the country's health sector and also require qualified pharmaceutical personnel.

Since the first National Drug Policy (KNDP) was developed in 1994, Kenya's population has grown from 26.8 million to the current 40 million. Over the last decade, key health indicators have, overall, been on the decline and a significant number of Kenyans cannot reliably access the medicines they need. The overall health of the population is threatened by numerous diseases. Access to medicines, medical devices and diagnostics to manage these diseases still remains a great challenge. This has put a significant demand on the health system overall and the pharmaceutical sub-sector specifically, including on pharmaceutical personnel, procurement and supply management.

Following incomplete implementation of the KNDP, there are many areas in need of attention in order to strengthen the pharmaceutical sub-sector and improve key indicators, among them increasing the ratio of pharmaceutical personnel/population (0.08 per 1,000 in 2006).

The Kenya National Pharmaceutical Policy 2008 states that *"the number of appropriately trained pharmaceutical personnel will be increased to respond to existing gaps and increased*

[1] The Kenya National Pharmaceutical Policy 2008

demand. Appropriate skills will be developed and maintained at all levels of care and roles clearly defined. Within the public sector, personnel will be rationally deployed to meet service delivery demands'[2]. It further adds that though the numbers of pharmaceutical personnel (pharmacists and pharmaceutical technologists) has increased with time, they are still insufficient relative to the population in need and are inequitably distributed across the country with the majority concentrated in the private sector and in urban areas, and there are notable skills gaps in key areas, such as management, pharmaceutical procurement and supply, etc.

As a result of the above, the key areas of focus for the Kenya National Pharmaceutical Policy 2008 are building and promoting a coherent pharmaceutical care program; standardizing curricula and training of personnel; and developing and retaining of pharmaceutical human resources.

There has been an enormous development of the local pharmaceutical market over the last decade. A vibrant pharmaceutical manufacturing industry has been established in Kenya, with great potential and opportunities to serve the East African region and beyond.

Pharmaceutical services are regulated by the Pharmacy and Poisons Board, as provided for by the Pharmacy and Poisons Act (Chapter 244) and the Narcotic drugs and Psychotropic Substances (Control) Act of the Laws of Kenya. The Registrar to the Board is the Chief Pharmacist. One Pharmaceutical Technologist, who is appointed by the Minister for Medical Services from a panel presented by KPA, serves as a member of the Board.

1.2 Rationale for the Strategic Plan

A strategic plan is a useful tool for long term planning. It is a platform for facilitating discussion and debate around the strategic directions of the Association. It provides the opportunity for the association, its members and its stakeholders to share and agree on a desired future; analyze and understand their environment; uncover their challenges and opportunities; and outline the priority directions and strategies for the future. It is a valuable leadership and management tool that provides the association with a road map that establishes clear goals, strategies and key activities. It is also an effective tool for resource mobilization as the key activities can be costed and a comprehensive resource analysis done to establish available resources and gaps.

The Pharmaceutical sub-sector in Kenya is currently facing numerous challenges which must be overcome so as to improve health service delivery to the population. As a key player in promoting excellent pharmaceutical practices and ensuring efficient and effective pharmaceutical service delivery, the Kenya Pharmaceutical Association must have a current strategic plan to guide its activities. Its previous strategic plan which ran from 2009 expired at the end of 2011. It was therefore imperative that KPA formulates the next strategic plan to ensure that there is no gap. This new strategic plan will run for five years, 2012 to 2016.

[2] The Kenya National Pharmaceutical Policy 2008

1.3 Development process of the strategic plan

The strategic planning process was conceptualized around having wide participation of members, evaluation of the previous strategic plan, getting input from relevant stakeholders, and as far as possible, consensus building around the key strategic issues.

The process involved review of relevant documents; consultations with the officials of KPA; a three day workshop to undertake an evaluation of the previous strategic plan and agree on the key strategic issues; collation of inputs; preparation and circulation of draft strategic plan; collation of feedback and preparation of final draft; and validation of final draft at a stakeholders' meeting.

An Operational Plan for the first two years was also prepared and presented to stakeholders during the Strategic Plan validation meeting. The drafts of the OP were also reviewed by the KPA officials during the development process.

Engaging the various stakeholders in the strategic planning process ensures that there is a shared sense of purpose, and a shared understanding of what the association is trying to achieve and how to achieve it. It ensures shared ownership and vision for the association's strategic directions. The strategic plan helps to focus the attention of stakeholders to the priority areas which will help the association to achieve its vision.

The three day workshop was used to establish the current situation of KPA. It focused on the members' knowledge and perception of how the previous strategic plan was developed and how implementation was managed. An evaluation of what had been achieved to date on the various strategic objectives of the previous strategic plan was undertaken and the current situation was established through group discussions and presentations. The participants also made recommendations on the way forward which have been used as the basis for the new strategic plan, 2012 – 2016.

The draft strategic plan was presented to KPA members during the Annual Scientific Conference (ASC) held in Nakuru on 27th and 28th July 2012 for their inputs, comments and adoption.

2. THE KENYA PHARMACEUTICAL ASSOCIATION (KPA)

2.1 Overview

The Kenya Pharmaceutical Association (KPA) is an umbrella professional organization that brings together all Pharmaceutical Technologists enrolled in Kenya. It currently has about four thousand members drawn from nine branches across the country. The KPA Central Council (CC) is the governing body of the Association and is made up of all members of the National Executive Committee (NEC), four Branch executives and all Provincial Pharmaceutical Technologists who are members of the Association. The NEC is the organ responsible for the day to day general management of the Association and consists of: the Honorary National Chairman, the Honorary Secretary General, the Honorary National Organizing Secretary, the Honorary National Treasurer, one Deputy each for the National Chairman and the Secretary General, representative(s) in the Government's Pharmacy and Poison's Board (PPB) and the Chief Pharmaceutical Technologist.

The NEC, which runs the day-to-day activities of the Association, is responsible to the CC, which in turn is responsible to the Annual General Meeting (AGM), as the highest policy making forum for the Association. The AGM is advised by a Board of Trustees. There are several committees and offices that perform under the NEC and therefore operationalize the decisions of the policy making organs of the association. Among these offices and committees are the branch secretariats, branch executive committees, and other standing committees. The KPA Organogram is shown in Annex 1.

2.2 Historical facts on KPA and training of pharmaceutical technologists

Listed below are notable historical dates relating to KPA and training of Pharmaceutical Technologists:

1927: The training of compounders – Certificate; 1 year. Worked under sister in charge of Hospital

1950: Course for Dispensers – Certificate; 1 year. Worked under sister in charge of Hospital. The Kenya African Dispensers Association was formed

1958: Course for Pharmaceutical Assistants – Certificate; 2 years. Worked under matron of Hospital

1968: Course for Pharmaceutical Technician – 1st Diploma 3 years. This cadre could be registered to work independently and take over the pharmaceutical services from the colonial "MZUNGU" Pharmacists, from MOHs and Matrons

1972: Name changed to Pharmaceutical Technologist. To conform to the Lab. Technologist who were pears

1973: Clamour for Legal Recognition began and thus on realizing that the law stipulated"Diploma in Pharmacy". KPA convinced KMTC to re-designate the certificates to "Diploma in Pharmacy"

1974: A crush programme introduced at KMTC to upgrade the serving certificate level pharmaceutical Assistants to Diploma Level. On the same year KAPA changed to KPA.

1985: On realizing that the KPA members were having problems in being registered by the Board, the KPA was pressurized to change the certificate to "Diploma in Pharmacy" as that was what the minimal recognition by the Law was. The Board, however, still rejected this!

1988: The 1st official recognition for the practice of Pharmaceutical Technologist was done. The Director of Medical Services issued certificates for practice. These were highly disputed by PSK.
In the same year, KPA pressed on for further Higher Training. This culminated to the KMTC developing the Higher Diploma curriculum - 1 $^{1}/_{2}$ years

2001: Ministry of Education unilaterally produced a draft curriculum for Diploma in Pharmacy. This was highly disputed by MOH, KPA and PPB as this compromised Human Health.

2002: Pharmaceutical Technologists and their practice were legally recognized.

2004: The PPB Diploma in Pharmaceutical Technology curriculum was approved by the KIE and MOEST ACADEMIC BOARD and implemented by the Pharmacy and Poisons Board.

2004: The rules for the enrollment of the Pharmaceutical Technologists and the Practice were gazzeted.

2004: The Pharmacy and Poisons Board in conjunction with KPA, evaluated all the Pharmaceutical Technologists who had qualified from KMTC before 2004 and enrolled the first 1000

2004: The Pharmacy and Poisons Board inspected and approved 4 additional Colleges to offer the diploma in Pharmaceutical Programme. To date the Board has approved a total of 24 Institutions to offer the programme.

2005 The Board began conducting the pre-enrollment Examinations and to date, 4,850 have been enrolled.

2008: KPA entered into discussions with Mount Kenya University on upward progression of Pharmaceutical Technologists.

2009: The Degree program at Mount Kenya University commenced.

2.3 Role of Pharmaceutical Technologists

The Pharmaceutical personnel in the health sector comprise the pharmacists and the pharmaceutical technologists. The practice of pharmacy is regulated by the Pharmacy and Poisons Board under the Ministry of Medical Services. Both pharmacists and pharmaceutical technologists are represented in the Board.

Within the Civil Service, both cadres are under the Pharmacy Division which is headed by the Chief Pharmacist, supported by the Deputy Chief Pharmacists and the Chief Pharmaceutical Technologist.

Within the civil service, pharmaceutical technologists and pharmacists are deployed in the health facilities, in the MOH programs, at the Kenya Medical Supplies Agency (KEMSA), KMTC and other parastatals, and at the National Quality Control Laboratory to deliver pharmaceutical services; and at the Pharmacy & Poisons Board and the Ministry of Health Headquarters to undertake administrative duties.

There are also many pharmaceutical technologists working in Non-Governmental organizations, private and mission health facilities, private sector organizations, pharmaceutical industry (as medical representatives, marketers and in production), universities, training and research organizations, the Armed Forces and in the pharmaceutical business sector as importers, wholesalers and retailers.

The roles of Pharmaceutical Technologists are already clearly defined and recognized in law, but the practice needs to be more pronounced or defined. The revision of the Pharmacy and Poisons Act of the Laws of Kenya (Cap 244) is expected to take care of this issue.

There are currently twenty four institutions in Kenya that are training Pharmaceutical Technologists at the Diploma level. One of the main training institutions, the Kenya Medical Training College, has several campuses across the country, with six of them offering the Pharmaceutical Technology Diploma Course; these are Kisumu, Nakuru, Machakos, Nyeri, Mombasa and Nairobi.

Currently, about four thousand nine hundred Pharmaceutical Technologists are enrolled by the Pharmacy and Poisons Board.

3. SITUATIONAL ANALYSIS

During a three-day workshop in March 2012, the KPA officials and members deliberated and were able to establish the current situation of KPA. The workshop focused on the members' knowledge and perception of how the previous strategic plan was developed and how implementation was managed. An evaluation of what had been achieved to date on the various strategic objectives of the previous strategic plan was undertaken and the current situation was established through group discussions and presentations. The participants also made recommendations on the way forward which have been used as the basis for the new strategic plan, 2012 – 2016.

The evaluation was undertaken using some pre-prepared tools. It covered: i) Assessment of the strategic plan development process, ii) Assessment of the strategic plan dissemination process and ownership by KPA members, and iii) Assessment of strategic plan implementation progress/status by strategic goals.

The current situation as established at the workshop and the recommendations made are presented in the tables below:

3.1 Assessment of Strategic Plan Development Process

Review Area	Response	Comment
Was the Strategic Plan Development process fully participatory and all-inclusive?		
i. Were all the branches/members and key stakeholders involved in the preparation of the Strategic Plan?	Partial participation.	***Comments*** 1. Change in office bearers led to new officials who are not fully aware of the content and process of the current KPA strategic plan. 2. Few members participating in this workshop were involved 3. Few stakeholders were involved 4. Full participation was only at the NEC where all branches were represented and adopted the plan. 5. Generally, members did not participate in the planning process. 6. The plan was not disseminated to the branch level. ***Recommendations:*** 1. Process of handing over to be established from outgoing to incoming officials so that there is continuity. 2. Need to identify stakeholders who will assist in the review - PPB, MOH, Trainers e.g. training institutions.
ii. Were the new and emerging issues that would affect implementation taken into account?	Very minimal.	1. Strategic Plan didn't take into account any changes in the office bearers. 2. New office bearers were not factored that they might come with new plans/ideas. 3. Changes in the political and government structure were not considered. 4. Devolved system of government was not factored. 5. Strategic plan was hardly implemented, hence not measurable. 6. The strategic plan facilitated other activities of the NEC. e.g. development of the constitution in use today
iii. Were adequate time and resources afforded for the process?	1. No resources and time allocated to implementation. 2. Only a few donors provided resources.	1. Most members were ignorant about the strategic plan; therefore it was not actualized. 2. No time and resources were allocated to the Strategic plan development process, other than in the last one year by the NEC. 3. The previous NEC shrouded the SP development process 4. Some funds and resources were allocated by a few donors and we were grateful to them.
iv. Were the various inputs adequately deliberated on and were the recommendations validated?	Various inputs were deliberated exhaustively. No validation carried out after other issues came up	1. The process of validation was not implemented. There was no provision for validation in the process. ***Recommendation*** 2. Proper process of validation to be put in place.

Recommendations in general:

1. To have a capable executive that is not feared by members.
2. To have members with integrity; to avoid meetings with a calculated moves/intentions or strategy and avoid the agenda of select few being moved forward.
3. Executive chair to take charge; Have an executive office that is always available and answerable to members.

3.2 Assessment of the dissemination and ownership by all KPA members/Secretariat staff

Review Area	Response	Comment
Are KPA members aware of the content and existence of the KPA Strategic Plan?		
i. Are there printed copies of the Strategic Plan that are accessible to all members?	Yes, but very few copies	1. Lack of member sensitization. 2. Lack of accessibility to the information. 3. Sensitization of documents not done. Only copies distributed. 4. Only a few copies were availed. 5. No sensitization done; Those who had them didn't understand. 6. No adequate resources – copies instead of originals. 7. No capital. ***Recommendations*** 1. Soft copies to be produced and made available via the web 2. There should be sessions for sensitization of members. 3. There should be sensitization during the branch meetings.
ii. Was the Strategic Plan officially launched?	No effective launch.	1. Was mentioned at the AGM in August 2009 in Mombasa; but it was not given the prominence it deserved. It was overshadowed by other perceived critical matters at the AGM. 2. The process was not prioritized during the AGM and there was total black out of the strategic plan. 3. Not done in appropriate manner. 4. Lack of good will to implement it from the NEC.
iii. Are the annual operational plans informed by the Strategic Plan?	No	1. Some things are done partially. 2. Partial implementation during the first year but subsequent years there was no implementation. Problem begun during handing over between outgoing and incoming officials. 3. There was partial implementation due to incomplete cohesiveness by members involved (not working as a team). It was not a consultative process. 4. Committee to oversee implementation was not put in place and one should be formed for

		the next strategic plan. 5. The strategic plan was not fully adopted. 6. Branches don't use the same SOPs. Work plans are not harmonized. ***Recommendations:*** 1. Outgoing officials should not only do physical handover. 2. An SOP to be done detailing proper handover process. 3. Work as a team next time for full implementation.
iv. Are other capital development activities informed by the Strategic Plan?	No	1. KPA issues are handled adhoc and not as per the strategic plan. 2. No integration of investment activities and plan within KPA. 3. Each branch has their own planned investment plan ***Recommendations*** Areas of investment need to be identified and plans integrated.
v. What do members and Secretariat staff view as having been strengthened by the implementation of the Strategic Plan?	Very little impact form Strategic plan.	1. Increased enrollment of members to KPA. 2. Increased number of people pursuing further education. 3. Lack of implementation committee. 4. Lack of clear indicators. 5. Currently there is improved communication. 6. No working secretariat. 7. Members don't understand the strategic plan. 8. No strategic way of investing money collected. ***Recommendations*** 1. House needs to be put in order from the branches up to the national level.

General statement:

The strategic plan was a beautiful document but the initial implementation was not done in a transparent manner and in good faith. It took the current NEC office to start its implementation.

3.3 Assessment of Implementation Progress/Status

Strategic Goal 1: Establishment of effective Institutional Systems and Structures for KPA

Review Area	Response	Comment
1. A functional hierarchy with clear communication channels both vertically and horizontally	Yes, but inadequate and inefficient	1. Present at both national and branch level, but not efficient (once in a while communication breaks down). 2. Communication both vertically and horizontally good but not so efficient. 3. Done as per the constitution, however there are challenges. ***Recommendations*** 1. Strengthen secretariat from the national office to the branch level. Establish offices at each branch, some branches have no offices.
2. Operational financial systems including standard operating procedures (SOPs), improved revenue collection and generation	Yes	1. SOPs present at national office. 2. Some branches following the SOPs but don't have actual document. 3. Discussed in previous CCM's but guidelines not finalized. 4. Improved revenue due to increased membership; every branch has registered an increase in membership. 5. Branch and national office – improvement in revenue generation. 6. Improved revenue collection based on membership subscription fees. No other sources of revenue collection. 7. Mobilization to new members. 8. Use of the journal, website and direct soliciting from development partners for funds. 9. Branches and the national office solicited funds from development partners and also from registration fees from CPD; have increased revenue. 10. SOP was ratified at Kisumu Central Council Meeting. ***Recommendations:*** 1. Revenue generation can be improved at all levels e.g. recruit associate members from the learning institutions. 2. There is still need for more membership recruitment 3. Financial system needs to be fully implemented. 4. Devise other ways of income generation.
3. Standard functional operational policy manuals for financial, human resources and procurement management	Partially done, but most management policies not disseminated and implemented	***Comments*** 1. Implementation to be done soonest of those SOPs not implemented. 2. SOPS on financial management done. 3. Policies functioning well at national office, but not at branch level as documents not finalized for dissemination to the branches. 4. No manual for human resources management.

		5. An SOP done for procurement management but not implemented yet. 6. A draft was presented to the CCM held at Kisumu, it was discussed and updated but it has not been distributed to the branches. 7. Clear at national level only. ***Recommendations*** 1. SOPS need to be adopted by branches and implemented. 2. Human resource SOPs need to be done at both branch and national level. 3. NEC needs to dedicate time to finalize documents and make them final and distribute to the branches. 4. Branches to adhere to the SOPs. 5. SOPs for human resource management need to be strengthened. 6. This area needs to be passionately strengthened at branch levels.
4. Harmonized national and branch Action Plans	Plans exist, but: • not well done, • not implemented, and • not widely disseminated	1. They are there but not well documented. 2. National office- Year Plan exists 3. Branches-put the action plan for the sake but do not follow it. 4. Observable. Good work by NEC and national secretary general. ***Recommendations*** 1. Need for them to be disseminated to the branches and implemented. 2. Need for action plan to be harmonized and implemented nationally. 3. Need for branches to collaborate and communicate with other branches. 4. Need to know which action plan is being followed at which branch so that there is harmonization.
5. Effective resource mobilization strategies	Strategies poorly done and not well coordinated	1. There are claims that it is done but there are no guidance documents. Things done anyhow. 2. Branches getting out there without clear guidelines for getting sponsors or carrying out of activities. 3. Done in collaboration with other stakeholders and to be strengthened, use chief pharmaceutical technologist's office as a check off system to ensure the members in the public health sector pay membership subscription. 4. Fundraising from corporate sponsorships. ***Recommendations*** 1. Need to harmonize strategies at all branches and come up with a good monitoring and evaluation plan. 2. Need to identify strategies, document and use them regularly.

6. Enforcement of governance organ decisions	Inadequate	1. NEC not supervising branch executives. 2. Poor collective responsibility at NEC and branch level. 3. Challenge; the organogram not being followed in some branches. 4. National office is trying to allocate funds based on where members practice. 5. No clear indicators at all levels. ***Recommendations*** 1. Improve transparency and accountability. 2. Need for routine visits by NEC to the branches. 3. NEC to come up with a program for routine visits. 4. Need to induct new officials so that they can know how to run the KPA offices at the branches and also at NEC. 5. Instill more measures for improving accountability and transparency. 6. Establish a secretariat at each branch since the branch executives have other competing tasks and may not be always available for KPA work as it's voluntary. 7. Branch officials to supervise the secretariat so that the operations are run properly. 8. Involvement of branch officials in matters of members' contribution. 9. There needs to be a clear way of allocating of the members subscription to the various branches. 10. Strengthen audit, have monitoring and evaluation systems. 11. Introduce performance contracting and appraisal system for the KPA officials.

Strategic Goal 2: Development of effective communication systems for organizational effectiveness and repositioning of KPA external image

Result area	Implementation Status	Comments and recommendations
1. Feedback within stipulated time	Poorly done, and not across the board	1. Feedback from the national office to the branch level is not timely and needs to be implemented immediately. 2. Timely via e-mail, phones and courier. 3. Letters are slow because the post office is slow, and sometimes letters are not received. Branches are not opening their post office boxes daily. 4. Downward flow of information is fast and upward flow of information is slow. ***Recommendations*** 1. Should be looked into as soon as possible.

		2. Branch offices to have official e-mails and not personal e-mails. 3. Officials to take responsibility when quarterly reports are not sent 4. Need for intensive consultation.
2. Availability of functioning communication equipments including information and communication technology (ICT) and correspondence	Done, but still not effectively used	1. Fully implemented at the national level, Nairobi and Nakuru branches. 2. National office –post office boxes, e-mail and telephone available. 3. There is a website. 4. Works fairly well in some branches and not in some. ***Recommendations*** 1. All branches need to be empowered, and for those with functional ICT systems need to enhance and strengthen the systems. 2. Branches to open branch e-mails. 3. Recommendation for officials to get e-mails and post office boxes. 4. Need for database system.
3. Clear and precise regular updates both upwards, downwards and laterally	Poorly done and ineffective	1. The national office has employed an administrator who will give updates and feedback. 2. Fast downward movement. 3. Upward movement is slow. 4. Lateral movement to other branches almost nil. Communication to branch members is present via sms. 5. Postal boxes for letters. ***Recommendations*** 1. Strengthen upward movement of information from branches to NEC. 2. Strengthen lateral movement, currently NEC does communication. 3. Time an issue. It should be timely to allow for appropriate consultations before giving a response.
4. Clear communication from authorized source (recognized single source of communication)	Done, but needs improvement	1. Communication forthcoming from secretary general's office at both national and branch levels. 2. The communication method in place is working. I.e. Secretary General writing to branch chair and the branch chair writes to national chairman but action by secretary general. • For internal correspondence to the secretary general • For KPA to external organization via the chairman. • From branches, chairman communication to national chairman. • Communication from NEC by secretary general to the branch chairman.

		Recommendations 1. All external correspondences to be addressed to the chairman. 2. Needs improvement 3. Instill culture of collective responsibility at CCM whether a member supports it or not.

Strategic Goal 3: Health policy, legislative and regulatory adjustment to better accommodate Pharmaceutical Technologists

Result area	Implementation Status	Comments and recommendations
Revised Cap 244 to reflect the following changes: 1. Definition of the roles of the Pharmaceutical Technologists	Done in the revised cap 244, but it's not clearly coming out.	1. There is a chief pharmaceutical technologist, provincial pharmaceutical technologist and no district pharmaceutical technologist. This is because there was no clear definition of the role of a pharmaceutical technologist. 2. A copy of the definition was sent to Arusha – EAC, however it has not been disseminated to the branches by NEC. 3. There are a lot of grey areas that need to be looked at. ***Recommendations*** 1. To be done with immediate effect (in 3 months). 2. Grey areas need to be looked at
Revised Cap 244 to reflect the following changes: 2. Proportional representation of Pharmaceutical Technologists at the PPB	Not yet, but proposal already submitted	***Comments*** 1. Document sent to PPB. KPA to pursue the issue. Will depend on the reviewed Cap 244. 2. Yes. Suggestions have been made and sent to PPB and the committee handling the review of the health laws. 3. No, but in the revised cap 244, that has been presented to the ministry it has been done. 4. The current proportion is 1 pharmaceutical technologist to 6 pharmacists. ***Recommendations*** 1. The proportion should be in line with other stakeholders (equal proportion). 2. KPA needs to lobby for the revised Cap 244 to be effected.
Revised Cap 244 to reflect the following changes:	Not done, process has been initiated	***Comments*** 1. The diploma in pharmaceutical technology is the most strenuous out of all the diploma courses in the colleges, entry requirements are high, this is not taken into consideration as

3. Establishment of the office of Chief Pharmaceutical Technologist		the position of the chief pharmaceutical technologist is in job group N while that of the chief nursing officer is in job group R. 2. The scheme of service is inadequate in its input. The central council should have been involved in the development of the scheme of service. 3. Not mentioned in cap 244. Only mentioned in DPM at the ministry level. 4. Established via the scheme of service of pharmaceutical technologists; however it requires strengthening. This can only be done though the by scheme of service. There is a proposed draft of the scheme of service that has been forwarded to the Public Service Commission and KPA is waiting to be called to defend it. ***Recommendations*** 1. The scheme of service needs to be reviewed. 2. An agreeable scheme of service needed for all levels of pharmaceutical technologists. KPA to lobby vigorously and check if it's agreeable so that it doesn't need to be worked on again and ensure it is applicable in the future.
Revised Cap 244 to reflect the following changes: 4. Establishment of the office of Deputy Registrar of the PPB, to be held by a Pharmaceutical Technologist	Not done, but draft proposal in place	***Comments*** Draft review proposal has been sent to PPB. ***Recommendations*** 1. Look into these issues in line with the upcoming changes where PPB is being changed into a parastatal. 2. Check how pharmaceutical technologists will apply in the new PPB structure. 3. KPA to constitute a committee to engage with stakeholders in the review of the health laws. 4. KPA to lobby for implementation of revised cap 244.
Revised Health Policies reflecting the following: 5. Defined integration of the Pharmaceutical Technologist in health programmes	Not done	1. There are some pharmaceutical technologists in NASCOP, NACADA, KEMSA and KEMRI. Pharmaceutical technologists in the programmes are treated as underdogs. They are not included in decision making 2. They are now being posted but as middle level officers. They are not involved in implementing policies. 3. NEC following up with Ministry of Medical Services. ***Recommendations*** 1. KPA to follow up the issue comprehensively. 2. Deployment needs to continue to the programmes, however those deployed need to be persons of integrity and hard work.

6. Improved Terms and Conditions of Service for Pharmaceutical Technologists	Not done, but process is at advanced stage.	***Comments*** 1. KPA to lobby for implementation of the proposed scheme of service of pharmaceutical technologists. 2. Yes in the scheme of service of Pharmaceutical Technologists. 3. NEC has written to the Permanent Secretary on the same. ***Recommendations*** 1. Terms of Service need to be reviewed and KPA should be involved. 2. Intense lobbying by KPA is needed.
7. Institutionalized provision of training scholarships opportunities for Pharmaceutical Technologists, especially in public service	Not done	***Comments*** 1. Has always been self sponsorship. 2. However the problem is sector wide affecting all diploma holders in the public sector. There is a policy in the public service that diploma holders should not be sponsored. However this is in conflict with a policy from the ministry of education. ***Recommendations*** 1. To advocate having everything that other officers in the public service are getting. 2. KPA should sensitize members on HELB. 3. Social science courses should be encouraged to KPA members. 4. KPA to lobby for change in the policy of not sponsoring diploma holders.

Strategic Goal 4: Collaboration with other health stakeholders nationally, regionally and internationally to raise the value contribution by Pharmaceutical Technologists

Result area	Implementation Status	Comments and recommendations
1. Membership to existing regional and international health regulatory bodies	Regional yes, but not internationally	***Comments*** 1. There is membership to the East African Community. 2. There is linkage with the association in Uganda. 3. Yes to health bodies regionally. 4. Internationally- No 5. Regulatory bodies - No 6. Missing membership to international regulatory bodies. 7. Present membership to East African Community. Not taken advantage of this membership to expose members to other associations in East Africa.

		8. Collaboration with other bodies e.g. Ministry of Education to establish the progression of training. 9. Relationship with East Africa Health Authority in Arusha. 10. Regionally- Kenya Health Professionals Association ***Recommendations*** 1. There is need to be vigilant about the goings on at the regional conferences and KPA needs to be represented. 2. Look for and increase links with international bodies. E.g. linkage with BNF providers and not via PSK, India, Jamaica, Great Britain 3. Take membership to regional and international bodies very seriously; need to explore more opportunities. 4. Approach other associations in Uganda and Tanzania
2. Regular invitation/sponsorships to attend/host international health conferences	Yes for local events and the international events are supported through external means	***Comments*** 1. Minimal number of invites. 2. No international invitations other than from East Africa. 3. Activate website to reach other people. 4. Use the website to market KPA and to get to know other members of other organizations. 5. Invitations to attend international and regional conferences – New York, Uganda. 6. No sponsorship for such conferences. All internal sponsorship. 7. KPA is unique as they have properly trained pharmaceutical technologists and other countries don't have equally qualified people or they have people with pharmacy certificates or pharmacists. 8. Yes – there have been invitations to attend conferences outside the country. 9. Invitation to EAC health and scientific conference. 10. Not had a chance to host an international conference. ***Recommendation*** 1. Increase collaboration opportunities and increase access to information by use of the website.
3. Established communication links with the relevant stakeholders locally,	Yes, but locally and not internationally	***Comments*** 1. With MOH, PPB, PSK – good communication. 2. Regional and international communication with other stakeholders should be improved so as to reach out to other international stakeholders.

regionally and internationally		3. Local links e.g. with MSH. 4. Support from MOH and other organizations 2. Regionally – few occasions. Major undoing: - sending representatives who do not give feedback after attending such meetings. Should send representatives who will give feedback that will help in KPA activities ***Recommendations*** 1. Encourage collaboration with other similar health professional associations to provide CPD. **2.** Seek collaboration with marketers to endorse products e.g. dettol® and KMA, but maintain agreed standards and quality so as not to compromise KPA standards.

Strategic Goal 5: Installation of Monitoring and Evaluation processes for organizational effectiveness and accountability.

Result area	Implementation Status	Comments and recommendations
1. Financial statements availed in time	Done, but not effectively	***Comments*** 1. To be strengthened to make it more effective 2. Not timely and not as per the strategic plan. 3. Branches to get copies of constitution and follow them. 4. National treasurer to contact branch treasurer as per the constitution. 5. From the branch level to the national level. ***Recommendations*** 1. Time for submitting audited statements should be by the 2nd week of January with revision of financial year to Jan – Dec
2. Audited financial reports	Done	***Comments*** 1. Not in all branches, some don't send reports when needed. 2. Done at branch level. Not consolidated into one national report. 3. Presented at all AGM's in the branches. 4. All branches to ensure adherence to this. ***Recommendations*** 1. In future ensure all branches send the reports. 2. Should be consolidated by ASC.
3. Enrolment by PPB	Done	***Comments*** 1. All pharmaceutical technologists who qualified after the year 2003 have to sit for Board

		examinations before they are enrolled. 2. PPB to unify the enrollment process – accredited schools different from KPA & PPB, need for more pharmaceutical technologists has led to that being done by PPB. 3. Criteria established and implemented. 4. Done satisfactorily. ***Recommendations*** 1. Ensure adherence to this.
4. CPDs undertaken	Done – in most branches	***Comments*** 1. Green books used. 2. PPB working on a better way of making it more effective. 3. All branches meet the minimum of 32 hours. The PPB should follow on this issue. 4. PPB does not use this as a requirement for renewing their practice licenses. PPB needs to use this 5. But do they serve their intended purpose? It was felt that they were not. Members were still being hassled by PPB and not being cleared even though they have the required CPD points.
5. Practicing licenses smoothly issued	Partially smooth	***Comments*** 1. Takes a long time to get it from PPB. Some people have not received their last year's practicing licenses. 2. Process not transparent at PPB. NEC should follow up this with PPB. 3. There is a vetting system. People are called after the vetting has been done to go and pay for the license.
6. Increased Membership	Done	***Comments*** 1. 2009: - 1300 active members. 2. Current: - About 4000 members, 300% increase. 3. Can be improved. ***Recommendations*** 1. Need for branches to go out there on recruitment drives.
7. Protection from quacks	Not done	***Comments*** 1. Quacks are still rampant. 2. Some members contribute to this, change in attitude is needed. 3. Some stake holders contribute to this. 4. There is still competition with quacks. Other cadres are also having pharmacies e.g. nurses, clinical officers and they refer to them as clinics yet it's a pharmacy. They prescribe and dispense.

		5. KPA to be part of the drug inspectors; however from the past this has had a disappointing outcome. 6. Need for self regulation. 7. Need to establish a disciplinary mechanism ***Recommendations*** 1. Need to find a way to deal with all the above issues 2. Combined effort is needed.
8. Community acceptance	Partially done	***Comment*** 1. We are never in our practice areas most of the times. ***Recommendations*** 1. Need to create awareness through corporate social responsibility 2. Need to increase awareness of pharmaceutical technologists in the community through corporate social responsibility. 3. Involvement in more activities that will brand and define ourselves to the community via community activities.
9. Invitation to participate in trainings	Mostly done	***Comments*** 1. Invitations by MSH for HIV training courses- appreciated. 2. Approach donors – e.g. DOMC in 2011 conducted trainings. 3. CPD is taking place but needs to be enhanced 4. Trainings at PPB. 5. No in service training – to be put in place. ***Recommendations*** 1. Needs to be broadened in more branches. 2. KPA branches to strengthen this through writing concrete proposals to sponsors/donors.
10. Availability of upward progression in education, promotion, etc	Very little done	***Comments*** 1. Not marked outstanding. 2. Slow pace – stagnation in one job group for a long time in the public service sector. 3. This is a lot of complacency among the KPA members. ***Recommendations*** 1. There should be a legal provision to reinforce the gentleman's MOU. 2. There is need to lobby the government to give scholarships to civil service pharmaceutical technologists so as to be able to access higher courses which will help in job promotion. 3. Strengthen the scheme of service of pharmaceutical technologists in the public sector so that it can trickle into the private sector. 4. Pharmaceutical technologists to delve into other courses. 5. We should not be seen to have reached our strategic inflection point!

4. STRATEGIC FRAMEWORK

This section describes the strategic framework of KPA and expounds on its vision, mission, core values and the key strategic areas in which the association should focus its attention so as to fully achieve its vision and long term goals. It also expounds on the association's strategic objectives, the strategies it will adopt in the next five years, and the key interventions/activities that it will undertake. The vision, mission and values of KPA define the purpose of the Association and what it stands for, what it strives to achieve, and what its guiding principles are in achieving its goals. Commitment to the vision, mission and values drives the Association and ensures that the members and stakeholders get the appropriate guidance in whatever they do and they are constantly inspired.

4.1 Vision

The Vision of the Kenya Pharmaceutical Association is:

"To be a leading professional association in the promotion of quality pharmaceutical practice"

4.2 Mission

The Mission of the Kenya Pharmaceutical Association is:

"To promote excellence in pharmaceutical practice"

4.3 Core Values

The following values shall guide KPA as it strives to achieve its vision:

- **Integrity:** – Members shall maintain their integrity at all times wherever they practice
- **Knowledgeable**: - Members shall engage in continuous knowledge seeking so that they remain up to date with regard to pharmaceutical care and practice
- **Care:** – Members shall strive to ensure that patients receive wholesome pharmaceutical care.
- **Collaboration: -** Members will collaborate with other stakeholders to ensure quality health services
- **Empowerment:** - Members shall strive to remain socially and economically empowered.

4.4 Strategic Areas of focus

The Kenya Pharmaceutical Association will focus on the following strategic areas:

1. Commitment of members to the Association
2. Management and Coordination
3. Leadership and Governance
4. Professional Development and Financial Returns for members
5. Financial Viability and Sustainability of KPA
6. Ethical Behaviour and Integrity of members
7. Pharmaceutical Standards and Regulation

4.5 Strategic Objectives and Strategies

Strategic Area 1: **Commitment of members to the Association**

Strategic Objective: To enhance members' ownership and participation in KPA member-initiated activities.

Strategies	Interventions/Key activities
Increase member participation in KPA key processes	i. Create more awareness- open channels of communication, open a Facebook page, encourage the members by having motivational speakers. ii. Get members involved in the strategic plan and let them own it from the planning, implementing stages e.t.c.
Scale up members sensitization on core objectives of KPA	i. Sensitize members on the need to belong to an association. ii. Operationalize the engagement of officials with members and include it in the calendar of events - NEC to interact with branch officials, NEC with members, branch officials with members via Facebook, internet e.t.c.

Strategic Area 2: **Management and Coordination**

Strategic Objective: To strengthen the institutional capacity of the KPA secretariat and its governing bodies to provide effective leadership and management for coordinated action to achieving KPA long-term goals.

Strategies	Interventions/Key activities
Strengthen network management and coordination systems and structures.	i. Develop or finalize SOPs for all major processes/activities e.g. financial management, human resource management, procurement management, investment, communication, capacity building, lobbying etc. and circulate to branches ii. Establish the correct communication channels, especially taking advantage of information technology. iii. Develop and institute a good monitoring and evaluation plan to track implementation of planned activities
Increase resources for the KPA Secretariat and branches	i. Establish offices at each branch level ii. Facilitate sourcing of funds to furnish and equip offices and to install communication and management systems etc. iii. Identify and create a position of an executive officer iv. Empower the administrator to perform executive duties
Build technical capacity of Secretariat and branches	i. Have capacity building workshops on office management, financial management, how to write minutes, bookkeeping, accounting etc ii. Build capacity for work planning at branch level
Embrace the use of ICT to enhance information flow	i. Institutionalize the use of ICT through development and implementation of relevant ICT policies and supportive structures. ii. Ensure availability of modern ICT equipment at all network levels and encourage use of ICT for correspondence. iii. Enhance the capacity of all branches to use modern ICT e.g. internet, email, Facebook, twitter, mobile phones etc

Strategic Area 3: **Leadership and Governance**

Strategic Objective: To develop and maintain good leadership and strong governance mechanism that will enable KPA to accomplish its objectives.

Strategies	**Interventions/Key activities**
Streamlining KPA internal electoral process and structures.	i. Establish an electoral college to vet and supervise the election process and set criteria, rules and minimum requirements. ii. Clearly stipulate and define the role and mandate of the electoral college, while ensuring that the constitution is followed to the letter iii. Set a clear time frame for the electoral process iv. Develop guidelines and rules to govern the electoral process
Strengthen transparency and accountability.	i. Institute watchdog committees on implementation and to enforce the SOPs. ii. NEC to organize routine visits to branches iii. Involve branch officials in matters of members' contribution. iv. Develop a clear mechanism for allocating members subscriptions to the various branches v. Strengthen the audit function
Institutionalize member sensitization and empowerment.	i. Make sensitization and empowerment of members a continuous process. ii. Sensitize members on aspects of election of devoted and patriotic leaders and not selfish leaders.
Ingrain KPA constitution as a foundation and guide for all KPA activities.	i. Disseminate the constitution widely to all members to ensure it is strictly adhered to in all processes and activities of KPA ii. Develop SOP on handing over process after elections
Uphold and institutionalize the spirit of regional balance in the leadership	i. Regional balance should be taken care of through affirmative action in support of all regions. ii. Affirmative action by NEC in support of branches especially at the sub- committee levels and in negotiations with stakeholders.

Strategic Area 4: **Professional development and financial returns for members**

Strategic Objective: To ensure professional development of members and enhance their economic empowerment.

Strategies	**Interventions/Key activities**
Enhance the influence of the of the Pharmaceutical Technologists in the sector	i. Advocate for Cap 244 to be revised so as to establish the office of the Chief Pharmaceutical Technologist ii. Lobby for a scheme of service that places the Chief Pharmaceutical Technologist at the appropriate scale in the public service in relation to the other cadres iii. Advocate for Cap 244 to be revised and provide a clear definition of the roles of the pharmaceutical technologists iv. Advocate for Cap 244 to be revised and provide for proportional representation of Pharmaceutical Technologists at the PPB v. Lobby for an agreeable scheme of service for all levels of pharmaceutical technologists. vi. Advocate for Cap 244 to be revised to provide for the Office of the Deputy Registrar of the PPB that will be held by a Pharmaceutical Technologist. vii. Seek greater involvement/participation of KPA at meetings and forums relating to review of health policies/laws and reforms of the

	PPB viii. Follow up and demand appropriate and defined integration of the Pharmaceutical Technologist in health programmes
Enhance access to professional development by members.	i. Strengthen and institutionalize training and professional development processes for Pharmaceutical Technologists ii. Liaise with relevant ministries to secure support for educational advancement of Pharmaceutical technologists iii. Recall and streamline the scheme of service or lobby for a scheme of service that promotes professional development and is in tandem with other cadres. iv. Increase and enhance lobbying with the relevant stakeholders at policy level to support sponsorship of Pharmaceutical Technologists
Harmonize pharmaceutical sub-sector human resources remuneration	i. Intensify lobbying for the scheme of service to improve salaries in the public sector. ii. Produce a guideline for minimum remuneration in the private sector.
Enhance access to financial facilities for new entrepreneurs	i. Identify ways of accessing finances for members who are self employed e.g. SACCOS, loans, corporate support, etc
Strengthen entrepreneurship capacity of KPA members.	i. Encourage and support members to learn business management and entrepreneurial skills ii. Encourage and support members to learn interpersonal skills in order to relate well with patients, clients and staff.
Build partnerships and networks to increase knowledge and experience sharing	i. Enhance networking and collaboration other associations such as those in Uganda, Tanzania and the region where they have similar standards of practice & recognition ii. Consolidate and ensure effective dissemination of relevant information and best practices to all members iii. Seek membership of KPA to regional and international bodies that are relevant to pharmacy practice iv. Endeavour to attend and organize relevant major regional and international conferences and meetings v. Market KPA to the world using various channels such as the website, publications etc vi. Enhance and collaborate with other national associations, organizations and companies in the health sector such as the PSK, KMA, private pharmaceutical companies and others

Strategic Area 5: **Financial viability and sustainability of KPA**

Strategic Objective: To increase and broaden institutional income base and enhance long term financial sustainability.

Strategies	**Interventions/Key activities**
Enhance resource mobilization	i. Develop a resource mobilization strategy ii. Build capacity of Secretariat and branches on resource mobilization iii. Train Secretariat and branches on writing of proposals for funding from donors
Build partnerships relevant organizations	i. Establish a partnership coordination office ii. Build new and strengthen existing partnerships
Develop networks and promote investments within KPA	i. Build capacity for networking at the Secretariat and the branches ii. Link up with other organizations that may provide financial support

	iii. Plan on investments at national and branch levels and provide guidance to members on the same
Develop and implement membership contribution program	i. Broaden the membership base to enhance member contributions ii. Enhance collection of revenue from CPD programs iii. Recruit associate members from the learning institutions iv. Encourage a check off system to ensure the members in the public health sector pay membership subscription

Strategic Area 6: **Ethical behaviour and integrity of members**

Strategic Objective: To ensure ethical behavior, accountability and integrity among members is constantly reiterated, internalized and upheld

Strategies	**Interventions/Key activities**
Establish accountability structures and systems	i. Develop national code of conduct. ii. Operationalize a checklist for integrity iii. Revitalize disciplinary committee- define, give it more muscle. iv. Develop and implement sector monitoring structures
Institutionalize induction and mentorship program for new members and officers	i. Conduct inductions for every new officer and members. ii. Allocate funds for training and induction of new members iii. Facilitate the central council to understand their role through training
Sensitization of members on sector ethical obligations	i. Strengthen campaign mechanisms for continuous education on ethics ii. Sensitize all members so as to internalize issues on ethics and integrity

Strategic Area 7: **Pharmaceutical Standards and Regulation**

Strategic Objective: To strengthen and promote global norms, standards, and guidelines for the quality, safety, and efficacy of medicines.

Strategies	**Interventions/Key activities**
Enforce sector regulations, standards and policy guidelines.	i. Review and prepare rules and regulations based on the constitution, the code of ethics, organizational culture and standards of behaviour. ii. Advocate for proper regulation of pharmacy practice so that members are protected from quacks iii. Advocate for proper regulation of pharmacy practice so that members in the private sector are protected from unfair business competition from other health cadres in private practice iv. Liaise with PPB to ensure that members get their annual practice licenses promptly and without hustles
Scale up supervision and monitoring structures and framework	i. Put in place a supervisory structure or framework. ii. Sensitization of our inspectorate on the more serious charges they can prefer.
Enhance community acceptance of Pharmaceutical Technologists	i. Increase awareness of pharmaceutical technologists in the community through corporate social responsibility. ii. Increase involvement of members in more community activities that will help brand and define the members to the community

5. MANAGEMENT & IMPLEMENTATION

Coordination of the implementation of this strategic plan will primarily be the responsibility of the NEC which shall provide leadership in planning and implementation, and in coordinating the flow of information relating to the plan. As it operationalizes the strategic plan, the NEC will be guided by the decisions made at the CCM and at the AGM at all times as stipulated in the Association's Constitution.

The NEC comprises the National Chairman, the National Secretary General, the National Organizing Secretary, the Honorary National Treasurer, and one deputy each for the National Chairman and National Secretary, representative(s) in the Government's Pharmacy and Poison's Board (PPB) and Chief Pharmaceutical Technologist.

The actual implementation of the plan will be the responsibility of the NEC itself, the KPA National Secretariat, the branch officials and the members of the association. It will be implemented through a series of five annual operational plans which will be developed at the beginning of each year, following the review of the previous one. The review of the previous plan will allow KPA to measure its performance against the set targets and incorporate lessons learnt in the implementation process into the new plan.

The Implementation Matrix below shows the interventions and activities that will be implemented over the five year plan period. The branches will be expected to draw up detailed work plans at the beginning of each year and align them to the annual KPA operational plan and the strategic plan.

IMPLEMENTATION MATRIX

Key Activity	Timeframe																			
	Y1				Y2				Y3				Y4				Y5			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Strategic Area 1: **Commitment of members to the Association** ***Strategic Objective:*** To enhance members' ownership and participation in KPA member-initiated activities.																				
Create more awareness- open channels of communication, open a Facebook page, encourage the members by having motivational speakers.	→	→	→	→																
Get members involved in the strategic plan and let them own it from the planning, implementing stages e.t.c.	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Sensitize members on the need to belong to an association.	→	→	→	→	→	→	→	→	→	→	→	→	→							
Operationalize the engagement of officials with members and include it in the calendar of events	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Strategic Area 2: **Management and Coordination** ***Strategic Objective:*** To strengthen the institutional capacity of the KPA secretariat and its governing bodies to provide effective leadership and management for coordinated action to achieving KPA long-term goals.																				
Develop or finalize SOPs for all major processes/activities e.g. financial management, human resource management, procurement management, investment, communication, capacity building, lobbying etc. and circulate to branches	→	→	→	→																
Establish the correct communication channels, especially taking advantage of information technology.	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Develop and institute a good monitoring and evaluation plan to track implementation of planned activities	→	→																		

Key Activity	Timeframe																			
	Y1				Y2				Y3				Y4				Y5			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Establish offices at each branch level	→	→	→	→	→	→	→	→												
Facilitate sourcing of funds to furnish and equip offices and to install communication and management systems etc.	→	→	→	→	→	→	→	→												
Identify and create a position of an executive officer	→	→																		
Empower the administrator to perform executive duties	→	→																		
Have capacity building workshops on office management, financial management, how to write minutes, bookkeeping, accounting etc			→	→			→	→			→	→				→				
Build capacity for work planning at branch level			→	→			→	→			→	→				→				
Institutionalize the use of ICT through development and implementation of relevant ICT policies and supportive structures.	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Ensure availability of modern ICT equipment at all network levels and encourage use of ICT for correspondence.	→	→	→	→																
Enhance the capacity of all branches to use modern ICT e.g. internet, email, Facebook, twitter, mobile phones etc	→	→	→	→	→	→	→	→												
Strategic Area 3: **Leadership and Governance** ***Strategic Objective:*** To develop and maintain good leadership and strong governance mechanism that will enable KPA to accomplish its objectives.																				
Establish an electoral college to vet and supervise the election process and set criteria, rules and minimum	→	→	→	→																

Key Activity	Timeframe																			
	Y1				Y2				Y3				Y4				Y5			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
requirements.																				
Clearly stipulate and define the role and mandate of the electoral college, while ensuring that the constitution is followed to the letter	→	→	→	→																
Set a clear time frame for the electoral process	→	→	→	→																
Develop guidelines and rules to govern the electoral process	→	→	→	→																
Institute watchdog committees on implementation and to enforce the SOPs.	→	→	→	→																
NEC to organize routine visits to branches	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Involve branch officials in matters of members' contribution.	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Develop a clear mechanism for allocating members subscriptions to the various branches	→	→																		
Strengthen the audit function	→	→																		
Make sensitization and empowerment of members a continuous process.	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Sensitize members on aspects of election of devoted and patriotic leaders and not selfish leaders.	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Disseminate the constitution widely to all members to ensure it is strictly adhered to in all processes and activities of KPA	→	→	→	→																
Develop SOP on handing over process after elections		→	→	→																
Regional balance should be taken care of through affirmative action in support of	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→

Key Activity	Timeframe																			
	Y1				Y2				Y3				Y4				Y5			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
all regions																				
Affirmative action by NEC in support of branches especially at the sub-committee levels and in negotiations with stakeholders.	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Strategic Area 4: **Professional development and financial returns for members** ***Strategic Objective:*** To promote professional development of members and enhance their economic empowerment.																				
Advocate for Cap 244 to be revised so as to establish the office of the Chief Pharmaceutical Technologist	→	→	→	→																
Lobby for a scheme of service that places the Chief Pharmaceutical Technologist at the appropriate scale in the public service in relation to the other cadres	→	→	→	→																
Advocate for Cap 244 to be revised and provide a clear definition of the roles of the pharmaceutical technologists	→	→	→	→																
Advocate for Cap 244 to be revised and provide for proportional representation of Pharmaceutical Technologists at the PPB	→	→	→	→																
Lobby for an agreeable scheme of service for all levels of pharmaceutical technologists.	→	→	→	→																
Advocate for Cap 244 to be revised to provide for the Office of the Deputy Registrar of the PPB that will be held by a Pharmaceutical Technologist.	→	→	→	→																
Seek greater involvement/participation of KPA at meetings and forums relating to review of health policies/laws and	→	→	→	→																

Key Activity	Timeframe																			
	Y1				Y2				Y3				Y4				Y5			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
other associations such as those in Uganda, Tanzania and the region where they have similar standards of practice & recognition	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Consolidate and ensure effective dissemination of relevant information and best practices to all members	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Seek membership of KPA to regional and international bodies that are relevant to pharmacy practice	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Endeavour to attend and organize relevant major regional and international conferences and meetings	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Market KPA to the world using various channels such as the website, publications etc	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Enhance and collaborate with other national associations, organizations and companies in the health sector such as the PSK, KMA, private pharmaceutical companies and others	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Strategic Area 5: **Financial viability and sustainability of KPA** ***Strategic Objective:*** To increase and broaden institutional income base and enhance long term financial sustainability.																				
Develop a resource mobilization strategy	→	→	→	→																
Build capacity of Secretariat and branches on resource mobilization	→	→	→	→																
Train Secretariat and branches on writing of proposals for funding from donors	→	→	→	→																
Establish a partnership coordination office	→	→	→	→																
Build new and strengthen existing partnerships	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→

Key Activity	Timeframe																			
	Y1				Y2				Y3				Y4				Y5			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
reforms of the PPB																				
Follow up and demand appropriate and defined integration of the Pharmaceutical Technologist in health programmes	→	→	→	→																
Strengthen and institutionalize training and professional development processes for Pharmaceutical Technologists	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Liaise with relevant ministries to secure support for educational advancement of Pharmaceutical technologists	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Recall and streamline the scheme of service or lobby for a scheme of service that promotes professional development and is in tandem with other cadres.	→	→	→	→																
Increase and enhance lobbying with the relevant stakeholders at policy level to support sponsorship of Pharmaceutical Technologists	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Intensify lobbying for the scheme of service to improve salaries in the public sector.	→	→	→	→																
Produce a guideline for minimum remuneration in the private sector.	→	→	→	→																
Identify ways of accessing finances for members who are self employed e.g. SACCOS, loans, corporate support, etc	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Encourage and support members to learn business management and entrepreneurial skills	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Encourage and support members to learn interpersonal skills in order to relate well with patients, clients and staff.	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Enhance networking and collaboration																				

Key Activity	Timeframe																			
	Y1				Y2				Y3				Y4				Y5			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Build capacity for networking at the Secretariat and the branches	→	→	→	→	→	→	→	→												
Link up with other organizations that may provide financial support	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Plan on investments at national and branch levels and provide guidance to members on the same	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Broaden the membership base to enhance member contributions	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Enhance collection of revenue from CPD programs	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Recruit associate members from the learning institutions	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Encourage a check off system to ensure the members in the public health sector pay membership subscription	→	→	→	→	→	→	→	→												
Strategic Area 6: **Ethical behaviour and integrity of members** ***Strategic Objective:*** To ensure ethical behavior, accountability and integrity among members is constantly reiterated, internalized and upheld																				
Develop national code of conduct.	→	→	→	→																
Operationalize a checklist for integrity	→	→	→	→																
Revitalize disciplinary committee-define, give it more muscle.	→	→	→	→																
Develop and implement sector monitoring structures	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Conduct inductions for every new officer and members.	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Allocate funds for training and induction of new members	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→
Facilitate the central council to understand their role through training	→	→	→	→																
Strengthen campaign mechanisms for continuous education on ethics	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→	→

Key Activity	Timeframe																			
	Y1				Y2				Y3				Y4				Y5			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Sensitize all members so as to internalize issues on ethics and integrity																				
Strategic Area 7: **Pharmaceutical Standards and Regulation** ***Strategic Objective:*** To strengthen and promote global norms, standards, and guidelines for the quality, safety, and efficacy of medicine.																				
Review and prepare rules and regulations based on the constitution, the code of ethics, organizational culture and standards of behaviour.																				
Advocate for proper regulation of pharmacy practice so that members are protected from quacks																				
Advocate for proper regulation of pharmacy practice so that members in the private sector are protected from unfair business competition from other health cadres in private practice																				
Liaise with PPB to ensure that members get their annual practice licenses promptly and without hustles																				
Put in place a supervisory structure or framework.																				
Sensitization of our inspectorate on the more serious charges they can prefer.																				
Increase awareness of pharmaceutical technologists in the community through corporate social responsibility.																				
Increase involvement of members in more community activities that will help brand and define the members to the community																				

6. MONITORING AND EVALUATION

In a bid to monitor implementation progress and ensure intended outcomes are realized in an efficient and timely manner the KPA will put in place a comprehensive monitoring and evaluation (M&E) plan that will allow for systematic collection and analysis of data during the implementation period. The M&E plan shall be based on the targets set and activities planned. All these should be linked to the overall goal, mission and vision of the association.

Both the M&E plan and the performance monitoring framework outlined in the SP are intended to serve as a management tools to keep work on track, to inform the Association's management when things are going wrong and to determine whether the resources are well allocated and utilized.

The proposed M&E plan should be designed to enable the Association learn from the day to day activity implementation, by focusing on *efficiency*, *effectiveness* and *impact.* The M&E plan will thus enable KPA to review progress, identify problems in planning and/or implementation and most importantly allow it to make necessary adjustments so that it is more likely to achieve the intended results, both in the short and the long term.

Monitoring

Core Indicators

KPA will use a set of performance indicators that will enable accurate and timely monitoring of activities and measure results mainly at two levels:

Output level: These indicators will help the KPA monitor day to day implementation activities and processes. These are mostly quantitative/process indicators relating to immediate results of activity implementation. The KPA will be keen to ensure all planned activities are implemented on time.

Outcome level: KPA shall identify key outcome indicators that will help measure the intermediate results generated by outputs of key activities. The indicators will correspond to any change in members' or stakeholders' behavior as a result of the SP interventions. These indicators will thus help KPA to measure the effectiveness of the key interventions.

Monitoring Systems

The association will utilize some of the tools that it is currently using, such as the quarterly reports and annual reports, to collect the data but it will also design specific tools to capture specific data as determined by the type of intervention. This will be necessary so as to allow for accurate and timely data collection and analysis.

Monitoring plan

The Monitoring Plan will provide details on the following:

Data collection: This will be carried out at the point of activity implementation using relevant forms and tools.

Implementation reporting: Depending on nature of activity, most reporting will be done on quarterly basis. This will include progress reporting for activities with long implementation timeframes. Annual reporting will be done for activities with long implementation time frame. Annual reporting will also be used to consolidate and report on milestones.

Evaluation

The Association will plan two evaluations; the midterm evaluation and end-term evaluation. Both evaluations will be keen establish the extent to which the Association has achieved the intended outputs and outcomes.

Midterm evaluation: The Association will carry out an external midterm evaluation of the Strategic Plan. The main objective will be to measure implementation progress towards planned results, at both output and outcome levels. The evaluation will also seek to point out areas of adjustments, including dropping activities that are, for one reason or another, no longer relevant. It will also provide an opportunity for including new activities that better address emerging issues.

End-term evaluation: At the end of the implementation period, the Association will carry out an external end-term evaluation. This evaluation will assess implementation progress against set targets. The evaluation findings will inform the scope of the next KPA Strategic Plan and provide a basis for future strategic directions.

The Association will utilize the Performance Monitoring Framework shown in the following table:

Performance Monitoring Framework

Results Area	Performance Indicator	Means of verification	Frequency	Annual Targets					Responsible
				Y1	Y2	Y3	Y4	Y5	
Strategic Area 1: **Commitment of members to the Association** ***Strategic Objective:*** To enhance members' ownership and participation in KPA member-initiated activities.									
1. Increased number of active members (new and existing) KPA.	% increase in active members, participating in KPA activities	Annual report	Annual	30 %	40 %	50 %	60 %	80%	NEC
	# of forums to bring together KPA officials and members for KPA activities	Annual report	Annual	1	1	1	1	1	
Strategic Area 2: **Management and Coordination** ***Strategic Objective:*** To strengthen the institutional capacity of the KPA secretariat and its governing bodies to provide effective leadership and management for coordinated action to achieving KPA long-term goals.									
1. Strengthened management and leadership efficiency at KPA for effective implementation of KPA activities.	# of management policies and guidelines developed and disseminated	Annual report	Annual	4	2	0	0	0	NEC
	# of secretariat reports submitted on time (both programmatic and financial)	Annual report	Annual	4	4	4	4	4	
	KPA staff complement at secretariat, both in numbers and skill mix.	Annual report	Annual		100 %	100 %	100 %	10 0%	
2. Improved coordination of KPA activities at all decentralized levels and branches.	# of branches with functional offices.	Annual reports	Annual	9	9	9	9	9	NEC
	# of branch offices fully furnished with necessary office operational equipment (including IT, furniture…)	Annual report	Annual		9	9	9	9	
	# of branch level personnel trained in planning and reporting	Quarterly reports	Quarterly		18	18	18	18	
3. Communication and information management improved at branch level	# of branches with fully fictional ICT system including equipment	Annual report	Annual		9				NEC; Branch Executives
	# of branch level staff trained in modern communication technology and tools.	Quarterly reports	Quarterly		18				
Strategic Area 3: **Leadership and Governance** ***Strategic Objective:*** To develop and maintain good leadership and strong governance mechanism that will enable KPA to accomplish its objectives.									
1. Enhanced oversight by the NEC	# of branch visits by NEC.	Annual report	Annual	9	9	9	9	9	NEC

Results Area	Performance Indicator	Means of verification	Frequency	Annual Targets					Responsible
				Y1	Y2	Y3	Y4	Y5	
2. KPA electoral process, procedures and structures strengthened and streamlined to ensure equity and all inclusive participation in the leadership and governance of KPA	KPA officials election guidelines and processes	Annual report	Annual	1	0	0	0	0	NEC
	% of members sensitized on the revised and documented KPA elections guidelines and procedures.	Quarterly reports	Quarterly		100%				
	# of branches sensitized on the KPA constitution	Quarterly reports	Quarterly	9					
	# of branches represented in the established and functional KPA electoral college	Annual report	Annual		9				
	# of branches represented in the NEC.	Annual report	Annual		9				
	% of members sensitized on the terms of reference for the KPA electoral college.	Quarterly reports	Quarterly		100%				
Strategic Area 4: **Professional development and financial returns for members** ***Strategic Objective:*** To promote professional development of members and enhance their economic empowerment.									
1. Enhanced professional capacity and financial viability of KPA members.	% of KPA members in business accessing credit facilities for business development	Annual report	Annual		20%	40%	60%	80%	NEC
	% of KPA members accessing training in business development and entrepreneurship	Annual report	Annual		20%	40%	60%	80%	
2. Strengthened legislation and national policies governing the pharmacy practice in Kenya	# of pharmaceutical technologists sitting at the PPB	Annual report	Annual		6	6	6	6	
	Revised Cap 244 establishing: Office of the Chief Pharmaceutical Technologist, and one that captures revised roles and responsibilities.	Annual report	Annual	1					NEC
	Revised composition and structure of the PPB to include deputy registrar who shall be the Chief Pharmaceutical Technologist	Annual report	Annual		1				
	A revised scheme of service for pharmaceutical technologists	Annual report	Annual		1				
	% of national policy reviews and development in the pharmaceutical sector	Annual report	Annual	100	100	100	100	100%	

Results Area	Performance Indicator	Means of verification	Frequency	Annual Targets					Responsible
				Y1	Y2	Y3	Y4	Y5	
	that KPA has participated in			%	%	%	%		
3.Strengthened educational and professional development for KPA members	# of in-service training programs developed and implemented.	Annual report	Annual			1			
	# of educational scholarships accessed by KPA members.	Annual report	Annual			45		90	
4.Increase and strengthened KPA strategic partnerships	# of MoUs between KPA and its strategic partners	Annual report	Annual			5		10	
	# of membership bodies that KPA subscribes to.	Annual report	Annual			3		5	
	# of collaborative initiatives between KPA and other national and international institutions.	Annual report	Annual		2		4	8	
Strategic Area 5: **Financial viability and sustainability of KPA** ***Strategic Objective:*** To increase and broaden institutional income base and enhance long term financial sustainability.									
1.Enhanced income base and financial sustainability.	% increase in KPA annual income.	Annual report	Annual		20 %	40 %	60 %	80%	NEC
	% increase KPA income through members' subscription	Annual report	Annual		40 %	60 %	80 %	100%	
	% increase in income from CPD programme	Annual report	Annual		50 %	70 %	80 %	90%	
	# of branches recording increased funding	Annual report	Annual		6	9	9	9	
	% increase in strategic partnerships.	Annual report	Annual		30 %	40 %	50 %	60%	
	# of personnel at branch level trained in resource mobilization.	Quarterly reports	Quarterly		18				
	# of successful proposals developed by KPA members.	Annual report	Annual		9		18	27	
	# of income generating projects by KPA secretariat and branches.	Annual report	Annual			20		40	
Strategic Area 6: **Ethical behaviour and integrity of members** ***Strategic Objective:*** To ensure ethical behavior, accountability and integrity among members is constantly reiterated, internalized and upheld									
1.Enhanced accountability, integrity and transparency among KPA members.	# of branches signed up to uphold the national code of conduct.	Quarterly reports	Quarterly		9				Branch Executives
	% of disciplinary cases handled conclusively	Annual report	Annual			10	10	100%	

Results Area	Performance Indicator	Means of verification	Frequency	Annual Targets					Responsible
				Y1	Y2	Y3	Y4	Y5	
	by KPA					0%	0%		
	% of new members who are fully inducted when joining KPA	Quarterly reports	Quarterly		90 %	100 %	100 %	100%	
	% of KPA annual budget allocated to new members induction program.	Annual report	Annual			3 %	4 %	5%	
	% of central council members trained on their roles and responsibilities	Annual report	Annual			100 %			
	# of KPA branch members trained on accountability, integrity and transparency	Quarterly reports	Quarterly			9			
Strategic Area 7: **Pharmaceutical Standards and Regulation** ***Strategic Objective:*** To strengthen and promote global norms, standards, and guidelines for the quality, safety, and efficacy of medicine.									
1.Enhanced quality, safety and efficacy of medicine.	% decrease in quacks and unfair business in the pharmacy practice.	Annual report	Annual	1	1	1	1	1	NEC; Branches
	% of annual practice licenses issued promptly and with ease.	Annual report	Annual		60 %	80 %	90 %	100%	
	# of community campaigns to sensitize communities on role of pharmaceutical technologists in the health sector.	Annual report	Annual		9	9	9	9	

7. COSTING

Strategic Plan Financial Implication

This strategic plan has been costed using the Activity Based Coasting (ABC) model, where specific activities under each strategy have been identified and costed using the current market rates for year one of the strategic plan. For subsequent years (year 2 to 5), a 5% multiplier has been used for operational costs to cater for changes in the market rates, and 10% multiplier has been used for salaries adjustments.

To effectively implement this plan, a total of KES **156,830,651** will be needed over the five-year period.

Figure 1 below illustrates budget allocation by the investment areas listed below:

1. Program costs
2. Secretariat/branch operations costs
3. Other costs; M&E and audit

Up to 58% has been allocated to program costs mainly because the institution intends to increase efforts into strengthening its core activities and deliver on its mandate. Secretariat and branch office operations costs take up to 40% of the overall budget, totaling up to KES **61,948,328**, of which KES 40,702,580 (30 % of overall budget) has been set aside for establishing and strengthening branch offices.

Other costs, 2% of the total budget, has been earmarked for M&E and audit work, aimed at improving performance management and strengthening compliance to financial management.

Figure 1: Budgetary allocation by investment areas

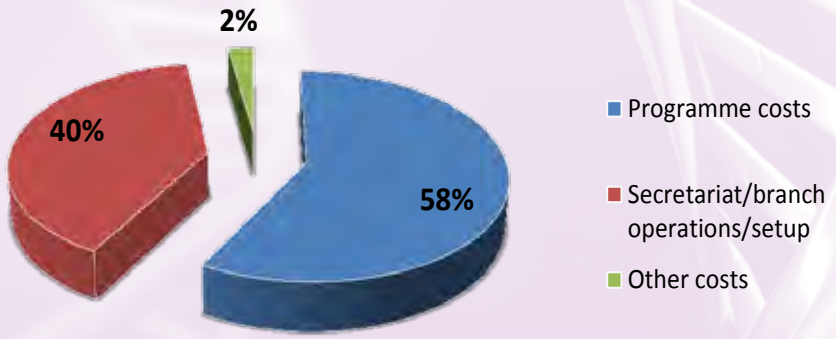
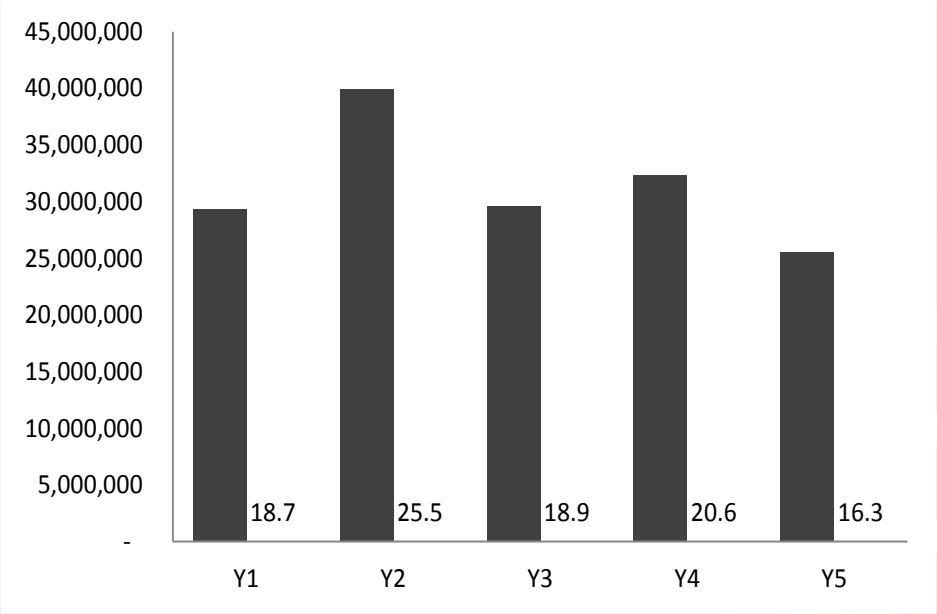


Figure 2 shows budgetary allocations for each of the 5 implementation years. The budget is evenly distributed throughout the 5 years with Year 2 taking up to 25.5% of the total budget. Year 5 being the last year with little program work has been allocated 16.3% of the total budget.

Table 1: Budget allocation by Strategic Plan years



Summary Budget

A. PROGRAMME COSTS	Y1	Y2	Y3	Y4	Y5	*Sub total*
Strategic Area 1: Enhance commitment of members to the Association	5,200,000	4,160,000	3,528,000	3,704,400	3,889,620	20,482,020
Strategic Area 2: Improve management and Coordination	4,270,000	2,683,500	717,675	1,153,559	791,237	9,615,970
Strategic Area 3: Improve leadership and governance	6,950,000	2,220,000	1,593,500	2,170,675	1,751,709	14,685,884
Strategic Area 4: Professional development and financial returns for members	50,000	8,452,500	7,690,125	9,239,631	1,334,163	26,766,419
Strategic Area 5: Enhance financial viability and sustainability of KPA	300,000	2,835,000	380,750	399,788	419,777	4,335,314
Strategic Area 6: Improve ethical behavior and integrity of members	200,000	4,010,000	1,795,500	1,885,275	1,979,539	9,870,314
Strategic Area 7: Pharmaceutical Standards and Regulation		3,010,000	472,500	1,294,125	520,931	5,297,556
Sub Total Others A	**16,970,000**	**27,371,000**	**16,178,050**	**19,847,453**	**10,686,975**	**91,053,478**
B. SECRETARIAT AND BRANCH OPERATIONS/SETUP COSTS	**Y1**	**Y2**	**Y3**	**Y4**	**Y5**	***Sub total***
Salaries	3,480,000	3,828,000	4,210,800	4,631,880	5,095,068	21,245,748
Office running costs	8,755,000	8,561,400	7,576,380	7,712,098	8,097,703	40,702,580
Sub Total B	**12,235,000**	**12,389,400**	**11,787,180**	**12,343,978**	**13,192,771**	**61,948,328**
C. OTHER COSTS	**Y1**	**Y2**	**Y3**	**Y4**	**Y5**	***Sub total***
Audit Costs	150,000	157,500	165,375	173,644	182,326	828,845
Evaluations			1,500,000		1,500,000	3,000,000
Sub Total C	**150,000**	**157,500**	**1,665,375**	**173,644**	**1,682,326**	**3,828,845**
TOTAL	**29,355,000**	**39,917,900**	**29,630,605**	**32,365,074**	**25,562,072**	**156,830,651**

Key investment areas

Though the budget highlights costs for implementing activities, it also focuses on key investment areas, these include (see detailed budget under Costing of the Strategic Plan - Annex 2)

1. Institutional strengthening;
    a. Systems – development of management systems (Financial management and Human Resource, manuals and guidelines)
    b. ICT and office set up infrastructure.
    c. Governance; strengthening governance processes including electoral process and KPA constitutions
2. Capacity building; including training that will target both governance and management levels. Capacity building, in terms of training will also target branch level staff and members.
3. Advocacy; ensuring KPA and its membership national role is recognized and institutionalized in national system.

Financing Strategy

Like most national membership network institutions, KPA is currently operating on an annual budgetary deficit. KPA will strive to close the deficit, and with this Strategic Plan, the association is seeking to fundraise more than KES 156 million over the five-year planned period. The KPA leadership is aware that this is an ambitious undertaking, considering the prevailing funding challenges and overall national economic situation.

A number of strategies have been identified to ensure KPA generates adequate resources and can sustain its operations and implement planned activities over the five-year planned period. The resource mobilization strategies will focus on the following:

1. Securing existing resources; KPA seeks to ensure all committed resources by partners, donors and also all possible member subscriptions by members are collected.
2. Seek additional income for planned activities; KPA will also seek to increase its annual income through a variety of strategies, outlined in the resource mobilization strategy that will be developed in the first year of the Strategic Plan implementation.
3. Ensure long term financial sustainability; KPA will also ensure the resource mobilization strategy focuses on financial sustainability, though institutionalizing resource mobilization in KPA and member programs and activities.

KPA will seek to institutionalize resource mobilization through 1) training both secretariat and branch staff on resource mobilization, 2) establishing resource mobilization structures such as standing committees, and 3) formalizing all partnerships with current and new strategic partners.

Possible areas identified for resource mobilization include;

1. Enhancing membership subscriptions and collections

2. Establishing and strengthening strategic partnerships. This will include structuring all partnerships through Memorandums of Understanding that clarify areas of partnership and partner expectations and accountabilities. KPA will establish a partnership management office with a dedicated staff that will ensure the association has a live database for existing partners, and establish partnership monitoring tools.
3. Initiating cost cutting measures to ensure all activities are implemented through most efficient and cost effective approaches.

8. ASSUMPTIONS AND RISKS

The main assumptions and risks tied to this Strategic Plan originate from the following:

Support from members and Stakeholders

It is assumed that members of KPA and other stakeholders will continue to support the association in the next five years. This risk was mitigated by ensuring that as many of the members and stakeholders as possible were involved in one way or another in the development of the plan. As it would not have been possible to call all the members to the planning workshops, the organizers ensured that members were represented through their branches. The draft was also circulated for input and comments. The risk will also be mitigated by ensuring that members will continue to be involved in various aspects of the implementation of the plan.

Financing

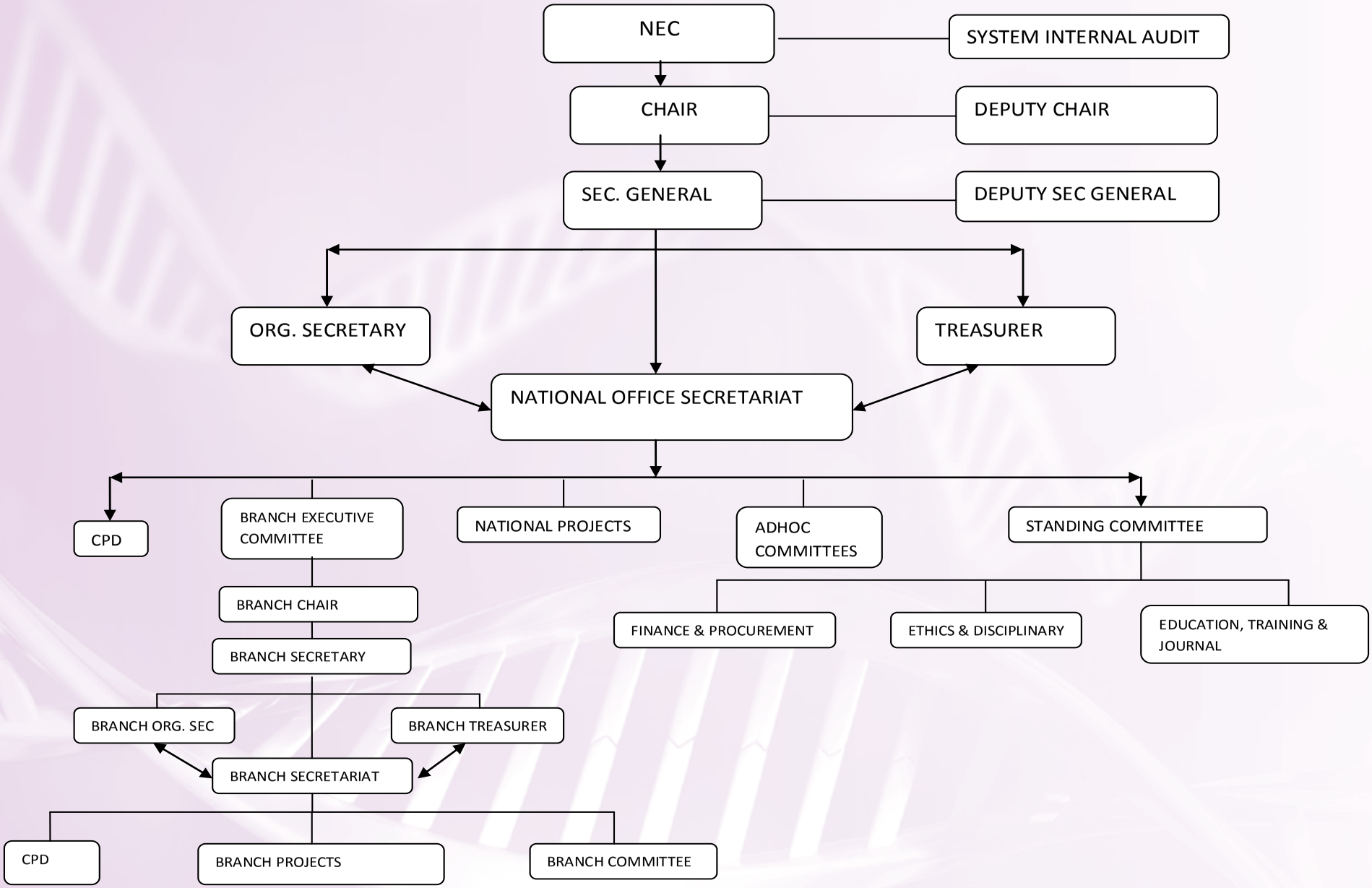
The assumption made is that members will continue to contribute their annual subscription fees and that other members, including associate and corporate members, will join the association, hence leading to an increase in the amount of revenue collected from member subscription. It is hoped that the current economic hardships in the country will not pose a challenge to increased membership recruitment. It is also assumed that the various partners and donors will continue to support the association financially.

Health sector policy and regulation reforms

It is assumed that the policy makers will be willing to listen to KPA as it lobbies and advocates for various policy changes and reforms. This may be quite a challenge in instances where there is conflict of interest among those entrusted to institute the proposed changes. Other changes may require passage through the legislative assembly and it is assumed that there will be a political will to push the changes through.

9. ANNEXES

Annex 1: ORGANOGRAM



Annex 2: COSTING OF THE STRATEGIC PLAN

A. PROGRAMME COSTS						
Strategic Area 1: Commitment of members to the Association						
Strategic Objective: **To enhance members' ownership and participation in KPA member-initiated activities.**						
Key Activity	***Y1***	***Y2***	***Y3***	***Y4***	***Y5***	***Sub total***
Stakeholder awareness creation about KPA and marketing activities	1,000,000	1,050,000	1,102,500	1,157,625	1,215,506	5,525,631
Printing and dissemination of KPA strategic plan	2,000,000	800,000				2,800,000
Members sensitization of KPA	1,500,000	1,575,000	1,653,750	1,736,438	1,823,259	8,288,447
Scale up of KPA officials engagement with members	700,000	735,000	771,750	810,338	850,854	3,867,942
Sub Total (SA1)	5,200,000	4,160,000	3,528,000	3,704,400	3,889,620	20,482,020
Strategic Area 2: Management and Coordination						
Strategic Objective: **To strengthen the institutional capacity of the KPA secretariat and its governing bodies to provide effective leadership and management for coordinated action to achieving KPA long-term goals.**						
Key Activity	***Y1***	***Y2***	***Y3***	***Y4***	***Y5***	***Sub total***
Strengthen management systems: development of management manuals for; Financial management, procurement, HR management for all branches	1,000,000			400,000		1,400,000
Develop and implement communication strategy for the network	1,500,000					1,500,000
Develop and implement monitoring and evaluation plan	1,500,000	400,000	420,000	441,000	463,050	3,224,050
Train secretariat staff on office management, financial management, minutes taking, bookkeeping and accounting	270,000	283,500	297,675	312,559	328,187	1,491,920
Train branches on planning and M&E						

		2,000,000				2,000,000
Sub Total (SA2)	**4,270,000**	**2,683,500**	**717,675**	**1,153,559**	**791,237**	**9,615,970**
Strategic Area 3: Leadership and Governance						
Strategic Objective: **To develop and maintain good leadership and strong governance mechanism that will enable KPA to accomplish its objectives.**						
Key Activity	***Y1***	***Y2***	***Y3***	***Y4***	***Y5***	***Sub total***
Develop and disseminate election guidelines and policies	2,650,000					2,650,000
Establish and train an electoral college to vet and supervise elections (with clear ToRs)	1,100,000	50,000	50,000	550,000	50,000	1,800,000
Hold National Annual Scientific Conference at which national KPA elections will be conducted.	1,800,000					1,800,000
Conduct NEC routine visits to branches	1,400,000	1,470,000	1,543,500	1,620,675	1,701,709	7,735,884
Disseminate KPA Constitution to all members		700,000		-	-	700,000
Sub Total (SA 3)	6,950,000	2,220,000	1,593,500	2,170,675	1,751,709	**14,685,884**
Strategic Area 4: Professional development and financial returns for members						
Strategic Objective: **To promote professional development of members and enhance their economic empowerment.**						
Key Activity	***Y1***	***Y2***	***Y3***	***Y4***	***Y5***	***Sub total***
Conduct members and stakeholder meetings and retreat to capture members' proposals for a revised Cap 244		1,700,000				1,700,000
Develop and disseminate remuneration guidelines for the private sector		2,000,000				2,000,000
Rollout training for members on entrepreneurial and business skills		3,600,000	3,780,000	3,969,000		11,349,000
Support benchmarking activities and exchange visits for branch officials			2,700,000		-	2,700,000

Consolidate and disseminate relevant information and best practices to all members	50,000	52,500	55,125	57,881	60,775	276,282
Organize relevant regional and international conferences and meetings				4,000,000		4,000,000
Participate in relevant regional and international conferences and meetings		600,000	630,000	661,500	694,575	2,586,075
Scale up KPA collaborative work with other institutions		500,000	525,000	551,250	578,813	2,155,063
Sub Total (SA4)	**50,000**	**8,452,500**	**7,690,125**	**9,239,631**	**1,334,163**	**26,766,419**
Strategic Area 5: Financial viability and sustainability of KPA						
Strategic Objective: **To increase and broaden institutional income base and enhance long term financial sustainability.**						
Key Activity	***Y1***	***Y2***	***Y3***	***Y4***	***Y5***	***Sub total***
Develop a resource mobilization strategy		1,050,000				1,050,000
Build capacity of Secretariat and branches on resource mobilization including proposal writing and partnership coordination		1,350,000				1,350,000
Strengthen collection of membership subscriptions		120,000	50,000	52,500	55,125	277,625
Enhance collection of revenue from CPD programs	300,000	315,000	330,750	347,288	364,652	1,657,689
Sub Total (SA 5)	300,000	2,835,000	380,750	399,788	419,777	**4,335,314**
Strategic Area 6: Ethical behaviour and integrity of members						
Strategic Objective: **To ensure ethical behavior, accountability and integrity among members is constantly reiterated, internalized and upheld**						
Key Activity	***Y1***	***Y2***	***Y3***	***Y4***	***Y5***	***Sub total***
Develop national code of conduct.		1,100,000				1,100,000
Revitalize and operationalize disciplinary committee	200,000	210,000	220,500	231,525	243,101	1,105,126

Allocate funds for training and induction of new members			1,500,000	1,575,000	1,653,750	1,736,438	6,465,188
Facilitate the Central Council to understand their role through training			1,200,000				1,200,000
Sub Total (SA 6)		200,000	4,010,000	1,795,500	1,885,275	1,979,539	**9,870,314**
Strategic Area 7: Pharmaceutical Standards and Regulation							
Strategic Objective: **To strengthen and promote global norms, standards, and guidelines for the quality, safety, and efficacy of medicine.**							
Key Activity		***Y1***	***Y2***	***Y3***	***Y4***	***Y5***	***Sub total***
Review and prepare pharmaceutical standards and regulations			1,800,000				1,800,000
Train the inspectorate on their roles and update their skills			760,000		798,000		1,558,000
Scale up community outreach activities and enhance KPA public outlook			450,000	472,500	496,125	520,931	1,939,556
Sub Total (SA 7)		-	3,010,000	472,500	1,294,125	520,931	5,297,556
SUB TOTAL PROGRAMS (A)		**16,970,000**	**27,371,000**	**16,178,050**	**19,847,453**	**10,686,975**	**91,053,478**
B. SECRETARIAT OPERATIONS AND BRANCH SETUP COSTS							
SALARIES	Basic annual Salary	Y1	Y2	Y3	Y4	Y5	***Sub total***
Head Offices salaries							
Office Administrator	360,000	360,000	396,000	435,600	479,160	527,076	*2,197,836*
Office Secretary/Typist	300,000	300,000	330,000				

				363,000	399,300	439,230	*1,831,530*
Office Attendant/Messenger	120,000	120,000	132,000	145,200	159,720	175,692	*732,612*
Sub Total salaries for head office		***780,000***	***858,000***	***943,800***	***1,038,180***	***1,141,998***	**4,761,978**
Branches Salaries	Basic annual Salary	Y1	Y2	Y3	Y4	Y5	***Sub total***
Office Manager (9 branches)	1,620,000	1,620,000	1,782,000	1,960,200	2,156,220	2,371,842	*9,890,262*
Messenger/Attendant (9 branches)	1,080,000	1,080,000	1,188,000	1,306,800	1,437,480	1,581,228	*6,593,508*
Sub Total salaries for 9 branches		***2,700,000***	***2,970,000***	***3,267,000***	***3,593,700***	***3,953,070***	**16,483,770**
Sub Total salaries		**3,480,000**	**3,828,000**	**4,210,800**	**4,631,880**	**5,095,068**	**21,245,748**
OFFICE RUNNING COSTS							
Office running costs - HQ	Annual Budget	Y1	Y2	Y3	Y4	Y5	***Sub total***
Office rent - HQ	420,000	420,000	441,000	463,050	486,203	510,513	2,320,765
Utility bills	240,000	240,000	252,000	264,600	277,830	291,722	1,326,152
Office stationery	600,000	600,000	630,000	661,500	694,575	729,304	3,315,379
office groceries	240,000	240,000	252,000	264,600	277,830	291,722	1,326,152
Internet (Zuku)	60,000	60,000	63,000	66,150	69,458	72,930	331,538
Communication (telephone, postage)	360,000	360,000	378,000	396,900	416,745	437,582	1,989,227
Sub Total office running costs - HQ		***1,920,000***	***2,016,000***	***2,116,800***	***2,222,640***	***2,333,772***	***10,609,212***
Office running costs - Branches	Annual Budget	Y1	Y2	Y3	Y4	Y5	***Sub total***

Office Rent	2,160,000	2,160,000	2,268,000	2,381,400	2,500,470	2,625,494	11,935,364
Utilities and miscellaneous	2,160,000	2,160,000	2,268,000	2,381,400	2,500,470	2,625,494	11,935,364
Sub Total office running costs 9 branches		***4,320,000***	***4,536,000***	***4,762,800***	***5,000,940***	***5,250,987***	***23,870,727***
Transport (Regional and national)	Annual Budget	**Y1**	**Y2**	**Y3**	**Y4**	**Y5**	**Sub total**
Ground Transport	350,000	350,000	367,500	385,875	405,169	425,427	1,933,971
Local flights	72,000	72,000	75,600	79,380	83,349	87,516	397,845
Sub Total transport costs		**422,000**	**443,100**	**465,255**	**488,518**	**512,944**	**2,331,816**
Office equipment							
	Units cost	**Y1**	**Y2**	**Y3**	**Y4**	**Y5**	**Sub total**
Desktop computers (10 units)	**50000**	**500,000**					**500,000**
Laptop computers (10 units)	**60000**	**300,000**	315,000				**615,000**
Printer with scanner (10 units)	**35000**	**175,000**	183,750				**358,750**
Photocopier (10 units)	**65000**	**325,000**	341,250				**666,250**
Video Camera (1 unit)	**15000**	**15,000**					**15,000**
LCD Projector (6 units)	**60000**	**180,000**	189,000				**369,000**
Digital Cameras	**10000**	**10,000**					**10,000**
TV Screen for Head Office.	**90000**		**90,000**				**90,000**
Sub Total equipment		**1,505,000**	**1,119,000**	-	-	-	**2,624,000**
Furniture		**Y1**	**Y2**	**Y3**	**Y4**	**Y5**	**Sub total**
Tables – 2 for each branch (18 units)	**9000**	**81,000**	85,050				**166,050**
Desk Seats – 2 for each branch (18 units)	**15000**	**135,000**	141,750				**276,750**
Visitors/Conference or meeting seats – 10 for each branch (90 units)	**7000**	**210,000**	220,500	231,525			**662,025**
Filing Cabinet – 1 for each branch (9 units)	**18000**	**162,000**					**162,000**

Sub Total furniture		***588,000***	***447,300***	***231,525***	-	-	***1,266,825***
Total office running costs		***8,755,000***	***8,561,400***	***7,576,380***	***7,712,098***	***8,097,703***	***40,702,580***
TOTAL SECRETARIAT AND BRANCH OPERATIONS B		**12,235,000**	**12,389,400**	**11,787,180**	**12,343,978**	**13,192,771**	**61,948,328**
C. OTHER COSTS							
Item		Y1	Y2	Y3	Y4	Y5	***Sub total***
Audit Costs		150,000	157,500	165,375	173,644	182,326	828,845
Evaluations				1,500,000		1,500,000	3,000,000
SUB TOTAL OTHERS C		**150,000**	**157,500**	**1,665,375**	**173,644**	**1,682,326**	**3,828,845**
Grand Total (A+B+C)		**29,355,000**	**39,917,900**	**29,630,605**	**32,365,074**	**25,562,072**	**156,830,651**

Pharmaceutical Excellence

KENYA PHARMACEUTICAL ASSOCIATION (KPA)

OPERATIONAL PLAN
2012/13 – 2013/14

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Introduction

This Kenya Pharmaceutical Association (KPA) Operational Plan (OP) highlights the key activities that will be implemented during the first twenty four months of the KPA Strategic Plan 2012/13 – 2016/17. All the activities and output results in this OP are logically linked to the Performance Monitoring Framework of the Strategic Plan, which details the output and outcome results, performance indicators and annual targets.

The structure of this OP is aligned to the seven strategic objectives outlined in the Strategic Plan and listed here below:

- ***Strategic Objective 1:*** To enhance members' ownership of KPA and increase participation in KPA member-initiated activities.
- ***Strategic Objective 2:*** To strengthen the institutional capacity of the KPA secretariat and its governing bodies to provide effective leadership and management for coordinated action to achieving KPA long-term goals.
- ***Strategic Objective 3:*** To develop and maintain good leadership and strong governance mechanism that will enable KPA to accomplish its objectives.
- ***Strategic Objective 4:*** To ensure professional development of members and enhance their economic empowerment.
- ***Strategic Objective 5:*** To increase and broaden institutional income base and enhance long term financial sustainability.
- ***Strategic Objective 6:*** To ensure ethical behavior, accountability and integrity among members is constantly reiterated, internalized and upheld
- ***Strategic Objective 7:*** To strengthen and promote global norms, standards, and guidelines for the quality, safety, and efficacy of medicines.

Section 1: How to use this Plan

This plan provides a framework and mapping of all activities through which intended outputs and outcomes outlined in the Strategic Plan will be achieved. The activities will be specific, targeted and time bound. The plan will seek to inform all implementers on the specific ways through which they will contribute to the results in the Strategic Plan. The quarterly results-based planning represented by this plan offers a high level of flexibility to allow for changes and relevant adjustments, as well as capture potential gaps and delays at real time.

Those responsible for implementing specific activities need to understand that they will have to report on results achieved during respective implementing quarters. Responsible persons are thus advice to;

1. Identify the results for which they are responsible;
2. Identify key process indicators to measure progress and achievements;

3. Breakdown key activities to specific process activities and link the same to available budgets;
4. Where possible, incorporate respective activities to individual work plans;
5. Link expected results to overall objectives and goals of the Strategic Plan.

Implementation results shall be consolidated into one overall quarterly report, outlining respective quarter targets, implementation status and where applicable comments on variance with regard to planned targets. The implementers may either design a reporting format or adopt their existing reporting formats.

Section 2: Organization and Structure of the Operational Plan

The planned activities are captured and presented in a table. The table links activities to measurable results, specific roles and responsibilities of key implementers. The results are clearly highlighted at output and outcome levels and also capture inputs and tasks to generate cost estimates. The table also indicates the accountabilities and ensures activities are time bound.

Key rows

The first row highlights the strategic objective for which the follow-up activities have been designed. The second row captures the expected outcome(s), while the third row details the titles/headings of the columns below.

Key columns

The first column captures key activities as reflected in the Strategic Plan, while the second row identifies the detailed description of specific process activities that if well implemented will logically lead to the achievement of the outputs related to key activities. The subsequent columns capture the time lines as quarters, broken down into months, with 24 months being the implementing period for the OP. The last column indicates the office or persons responsible for ensuring that the activities are planned for, implemented and reported on.

Strategic Objective 2: To strengthen the institutional capacity of the KPA secretariat and its governing bodies to provide effective leadership and management for coordinated action to achieving KPA long-term goals.

Outcome 2.1: Strengthened management and leadership efficiency at KPA for effective implementation of KPA activities.

SO 2: To strengthen the institutional capacity of the KPA secretariat and its governing bodies to provide effective leadership and management for coordinated action to achieving KPA long-term goals.																											
Outcome 2.1: Strengthened management and leadership efficiency at KPA for effective implementation of KPA activities.																											
Activity Description	**Detailed Activities and Outputs**	**2012/13**												**2013/14**												**Responsibility**	
		Q1			Q2			Q3			Q4			Q1			Q2			Q3			Q4				
		J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J		
Strengthen management systems	Develop financial management & procurement manual				x																					NEC	
	Develop human resource management manual				x																					NEC	
Enhance secretariat staff complement and management	Develop Job descriptions for secretariat staff				x																					NEC	
	Recruit an executive officer					x																				NEC	
Enhance management and administration capacity	Conduct training for secretariat and branch staff on financial management and office administration				x	x	x										x	x	x							NEC	
	Train secretariat and branch staff on planning and monitoring													x	x	x				x	x	x				NEC	

Outcome 2.2: Improved coordination of KPA activities at all decentralized levels and branches.

SO 2: To strengthen the institutional capacity of the KPA secretariat and its governing bodies to provide effective leadership and management for coordinated action to achieving KPA long-term goals.																											
Outcome 2.2: Improved coordination of KPA activities at all decentralized levels and branches.																											
Activity Description	**Detailed Activities and Outputs**	**2012/13**												**2013/14**												**Responsibility**	
		Q1			Q2			Q3			Q4			Q1			Q2			Q3			Q4				
		J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J		
Establish the correct communication channels, especially taking advantage	Develop and disseminate KPA communication strategy and policy							x	x	x																NEC	

SO 2: To strengthen the institutional capacity of the KPA secretariat and its governing bodies to provide effective leadership and management for coordinated action to achieving KPA long-term goals.																											
Outcome 2.2: Improved coordination of KPA activities at all decentralized levels and branches.																											
Activity Description	**Detailed Activities and Outputs**	**2012/13**												**2013/14**												**Responsibility**
		Q1			Q2			Q3			Q4			Q1			Q2			Q3			Q4			
		J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	
of information technology.																											
Develop and institute a good monitoring and evaluation plan to track implementation of planned activities	Develop monitoring and data collection tools				x																					NEC
	Develop semiannual reports							x						x						x					x	NEC
	Conduct training on monitoring and evaluation					x	x							x	x											NEC
Strengthen network presence at all branches	Establish branch offices					x					x	x		x		x										NEC/Branch Executives
	Recruit relevant staff for all branches					x					x	x		x		x										NEC/Branch Executives
Enhance functioning of all branch offices	Furnish and equip all branch offices.						x					x		x		x										NEC/Branch Executives

Outcome 2.3: Communication and information management improved at branch level

SO 2: To strengthen the institutional capacity of the KPA secretariat and its governing bodies to provide effective leadership and management for coordinated action to achieving KPA long-term goals.																											
Outcome 2.3: Communication and information management improved at branch level																											
Activity Description	**Detailed Activities and Outputs**	**2012/13**												**2013/14**												**Responsibility**
		Q1			Q2			Q3			Q4			Q1			Q2			Q3			Q4			
		J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	
Enhance communication at branch level	Equip all branches with reasonable modern ICT equipment									x	x	x														NEC/Branch Executives
	Conduct ICT training for branch staff												x	x	x	x	x										NEC/Branch Executives

Strategic Objective 3: To develop and maintain good leadership and strong governance mechanism that will enable KPA to accomplish its objectives.

Outcome 3.1: Enhanced oversight by the NEC

SO 3: To develop and maintain good leadership and strong governance mechanism that will enable KPA to accomplish its objectives.																											
Outcome 3.1: Enhanced oversight by the NEC																											
Activity Description	**Detailed Activities and Outputs**	**2012/13**												**2013/14**												**Responsibility**
		Q1			Q2			Q3			Q4			Q1			Q2			Q3			Q4			
		J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	
Streamline and enhance oversight by NEC	Constitute a committees to monitor implementation of relevant management tools (SoPs)					x																				NEC
	Conduct routine visits to branches						x						x						x						x	NEC
	Share reports and update meetings on member contributions							x												x						NEC
	Develop a clear mechanism for allocating members subscriptions to the various branches					x																				NEC
	Conduct annual audits						x												x							NEC
	Conduct KPA elections													x												NEC

Outcome 3.2: KPA electoral process, procedures and structures strengthened and streamlined to ensure equity and all inclusive participation in the leadership and governance of KPA

SO 3: To develop and maintain good leadership and strong governance mechanism that will enable KPA to accomplish its objectives.																											
Outcome 3.2: KPA electoral process, procedures and structures strengthened and streamlined to ensure equity and all inclusive participation in the leadership and governance of KPA																											
Activity Description	**Detailed Activities and Outputs**	**2012/13**												**2013/14**												**Responsibility**
		Q1			Q2			Q3			Q4			Q1			Q2			Q3			Q4			
		J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	
Strengthen the governance process and systems of KPA	Establish an electoral college to vet and supervise the election process and set criteria, rules and			x																						NEC

SO 3: To develop and maintain good leadership and strong governance mechanism that will enable KPA to accomplish its objectives.																												
Outcome 3.2: KPA electoral process, procedures and structures strengthened and streamlined to ensure equity and all inclusive participation in the leadership and governance of KPA																												
Activity Description	**Detailed Activities and Outputs**	**2012/13**												**2013/14**												**Responsibility**		
		Q1			Q2			Q3			Q4			Q1			Q2			Q3			Q4					
		J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J			
	minimum requirements.																											
	Clearly stipulate and define the role and mandate of the electoral college, while ensuring that the constitution is followed to the letter			x																						NEC		
	Set a clear time frame for the electoral process			x																						NEC		
	Develop guidelines and rules to govern the electoral process				x																					NEC		
	Disseminate the constitution widely to all members to ensure it is strictly adhered to in all processes and activities of KPA										x	x	x													NEC		

Strategic Objective 4: To ensure professional development of members and enhance their economic empowerment.

Outcome 4.1: Enhanced professional capacity and financial viability of KPA members.

SO 4: To ensure professional development of members and enhance their economic empowerment.																												
Outcome 4.1: Enhanced professional capacity and financial viability of KPA members.																												
Activity Description	**Detailed Activities and Outputs**	**2012/13**												**2013/14**												**Responsibility**		
		Q1			Q2			Q3			Q4			Q1			Q2			Q3			Q4					
		J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J			
Advocate for changes in the national policies affecting KPA and its membership	Hold a technical retreat to develop proposal for changes of the Cap 244. Proposal should include all desired changes affecting KPA and its														x											NEC		

SO 4: To ensure professional development of members and enhance their economic empowerment.																										
Outcome 4.1: Enhanced professional capacity and financial viability of KPA members.																										
Activity Description	**Detailed Activities and Outputs**	**2012/13**												**2013/14**												**Responsibility**
		Q1			Q2			Q3			Q4			Q1			Q2			Q3			Q4			
		J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	
	membership.																									
	Engage in lobbying activities for proposed changes in the cap 244															x	x	x	x	x	x					NEC/Branches
Initiate and support improvement of sector personnel management	Produce a guideline for minimum remuneration in the private sector.																x									NEC/AGM
Strength entrepreneurship of KPA members	Identify ways of accessing finances for members who are self employed e.g. SACCOS, loans, corporate support, etc							x	x																	NEC/Branch Executives
	Encourage and support members to learn business management and entrepreneurial skills													x	x	x	x	x	x	x	x	x				NEC/Branch Executives
Enhance professional capacity of members	Consolidate and disseminate relevant information and best practices to all members			x			x			x			x			x			x			x			x	NEC
	Participate in relevant regional and international conferences and meetings																x	x	x							NEC/Branch Executives/All members
	Scale up KPA collaborative work with other institutions													x	x	x										NEC

Strategic Objective 5: To increase and broaden institutional income base and enhance long term financial sustainability.

Outcome 5.1: Enhanced income base and financial sustainability.

SO 5: To increase and broaden institutional income base and enhance long term financial sustainability.																										
Outcome 5.1: Enhanced income base and financial sustainability.																										
Activity Description	**Detailed Activities and Outputs**	**2012/13**												**2013/14**												**Responsibility**
		Q1			Q2			Q3			Q4			Q1			Q2			Q3			Q4			
		J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	
Enhance resource mobilization capacity of KPA branches	Develop a resource mobilization strategy													x	x											NEC
	Train staff on resource mobilization															x	x	x								NEC
	Establish a partnership coordination office							x																		NEC
	Develop MoUs with strategic partners							x																		NEC
	Strengthen collection of membership subscriptions							x	x																	NEC/Branch Executives
	Enhance collection of revenue from CPD programs							x	x																	NEC/ Branch Executives

Strategic Objective 6: To ensure ethical behavior, accountability and integrity among members is constantly reiterated, internalized and upheld

Outcome 6.1: Enhanced accountability, integrity and transparency among KPA members.

SO 6: To ensure ethical behavior, accountability and integrity among members is constantly reiterated, internalized and upheld																										
Outcome 6.1: Enhanced accountability, integrity and transparency among KPA members.																										
Activity Description	**Detailed Activities and Outputs**	**2012/13**												**2013/14**												**Responsibility**
		Q1			Q2			Q3			Q4			Q1			Q2			Q3			Q4			
		J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	
Enhance discipline in the sector	Develop national code of conduct.													x	x											NEC
	Reconstitute the disciplinary committee						x								x											NEC
	Develop and undertake induction													x			x			x			x			NEC

SO 6: To ensure ethical behavior, accountability and integrity among members is constantly reiterated, internalized and upheld																											
Outcome 6.1: Enhanced accountability, integrity and transparency among KPA members.																											
Activity Description	**Detailed Activities and Outputs**	**2012/13**												**2013/14**												**Responsibility**
		Q1			Q2			Q3			Q4			Q1			Q2			Q3			Q4			
		J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	
	program for all members																									
	Conduct training for council members on their roles and responsibilities				x									x												NEC

Strategic Objective 7: To strengthen and promote global norms, standards, and guidelines for the quality, safety, and efficacy of medicines.

Outcome 7.1: Enhanced quality, safety and efficacy of medicine.

SO 7: To strengthen and promote global norms, standards, and guidelines for the quality, safety, and efficacy of medicines.																											
Outcome 7.1: Enhanced quality, safety and efficacy of medicine.																											
Activity Description	**Detailed Activities and Outputs**	**2012/13**												**2013/14**												**Responsibility**
		Q1			Q2			Q3			Q4			Q1			Q2			Q3			Q4			
		J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	
Establish ethical standards for the sector	Review and prepare rules and regulations based on the constitution, the code of ethics, organizational culture and standards of behavior.													x												NEC
	Train the inspectorate on their roles and update their skills													x	x											NEC
	Scale up community outreach activities and enhance KPA public outlook													x	x											NEC/Branch Executives

Section 4: Work Plan for Reporting and Reviews

Information Products	2012/2013												2013/2014											
	Q1			Q2			Q3			Q4			Q1			Q2			Q3			Q4		
	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J
A **Integrated Implementation Reports**																								
1. Quarterly project reports			x			x			x			x			x			x			x			x
2. Annual program report						x																		x
B **Review and Evaluations**																								
1. Midterm evaluation SP evaluation																								x
C **Planning Reports**																								
Second AOP																								x
D **Stand Alone Reports and Plans**																								
1. Officials Election Guidelines			x																					
2. Financial Management Manuals			x																					
3. Human Resources Management Manual				x																				
4. Code of Conduct									x	x														
5. Proposal for Revising Cap 244										x														
6. Terms of reference for the Electoral College				x																				
7. Job descriptions for secretariat staff				x																				
8. Communication strategy and policy													x											
9. Resource mobilization strategy						x	x																	

Section 5: Costing of the Operational Plan

Summary Budget

The following table shows the summary budget by Strategic Objective for the 24 months implementation period.

Summary Budget	Amount in KES								Total
	2012/2013				2013/2014				
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
SO1: To enhance members' ownership of KPA and increase participation in KPA member-initiated activities.	2,000,000	1,300,000	735,000	2,000,000	-	500,000	735,000	2,125,000	**9,395,000**
SO 2: To strengthen the institutional capacity of the KPA secretariat and its governing bodies to provide effective leadership and management for coordinated action to achieving KPA long-term goals.	-	2,770,000	1,500,000	-	400,000	1,283,500	-	1,000,000	**6,953,500**
SO 3: To develop and maintain good leadership and strong governance mechanism that will enable KPA to accomplish its objectives.	1,050,000	3,400,000	-	3,250,000		700,000	-	770,000	**9,170,000**
SO 4: To ensure professional development of members and enhance their economic empowerment.		50,000	-	-	3,400,000	3,852,500	1,200,000	-	**8,502,500**
SO 5: To increase and broaden institutional income base and enhance long term financial sustainability.	-	-	420,000	-	1,050,000	1,350,000	315,000	-	**3,135,000**
SO 6: To ensure ethical behaviour, accountability and integrity among members is constantly reiterated, internalized and upheld	-	200,000	-	-	1,685,000	1,575,000	375,000	375,000	**4,210,000**
SO 7: To strengthen and promote global norms, standards, and guidelines for the quality, safety, and efficacy of medicines.	-	--	-	-	3,010,000	-	-	-	**3,010,000**
Sub Total for SOs	**3,050,000**	**7,720,000**	**2,655,000**	**5,250,000**	**9,545,000**	**9,261,000**	**2,625,000**	**4,270,000**	**44,376,000**
Secretariat operational costs, branch set-up and other costs	2,852,000	4,673,000	2,430,000	2,430,000	4,761,900	2,595,000	2,595,000	2,595,000	**24,931,900**
TOTAL	**5,902,000**	**12,393,000**	**5,085,000**	**7,680,000**	**14,306,900**	**11,856,000**	**5,220,000**	**6,865,000**	**69,307,900**

Detailed budget

The following table presents the detailed budget by Strategic Objective for the 24 months implementation period.

SO 1: To enhance members' ownership of KPA and increase participation in KPA member-initiated activities.									
Activity	**Amount in KES**								**Total**
	2012/2013				**2013/2014**				
	Q1	**Q2**	**Q3**	**Q4**	**Q1**	**Q2**	**Q3**	**Q4**	
Media briefing and publication through both print and radio/TV channels	-	500,000	-	500,000	-	500,000	-	550,000	2,050,000
Publish and print strategic plan for dissemination	2,000,000	800,000	-	-	-	-	-	-	2,800,000
Annual KPA member forums	-	-	-	1,500,000	-	-	-	1,575,000	3,075,000
Annual official branch visits	-	-	735,000	-	-	-	735,000	-	1,435,000
Sub Total	**2,000,000**	**1,300,000**	**735,000**	**2,000,000**	**-**	**500,000**	**735,000**	**2,125,000**	**9,360,000**

SO 2: To strengthen the institutional capacity of the KPA secretariat and its governing bodies to provide effective leadership and management for coordinated action to achieving KPA long-term goals									
Activity	**Amount in KES**								**Total**
	2012/2013				**2013/2014**				
	Q1	**Q2**	**Q3**	**Q4**	**Q1**	**Q2**	**Q3**	**Q4**	
Develop financial management manual, procurement management manual and human resource management manual	-	1,000,000	-	-	-	-	-	-	1,000,000
Conduct training for secretariat and branch staff of: finical management and office administration	-	270,000	-	-	-	283,500	-	-	553,500
Train secretariat and branch staff on planning and monitoring	-	-	-	-	-	1,000,000	-	1,000,000	2,000,000
Develop and implement an M&E plan	-	1,500,000	-	-	400,000	-	-	-	1,900,000
Communication strategy and policy	-	-	1,500,000	-	-	-	-	-	1,500,000
Furnish and equip all branch offices.									
Equip all branches with reasonable modern ICT equipment									
Sub Total		**2,770,000**	**1,500,000**		**400,000**	**1,283,500**		**1,000,000**	**6,953,000**

SO 3: To develop and maintain good leadership and strong governance mechanism that will enable KPA to accomplish its objectives.									
Activity	**Amount in KES**								
	2012/2013				**2013/2014**				**Total**
	Q1	**Q2**	**Q3**	**Q4**	**Q1**	**Q2**	**Q3**	**Q4**	
Conduct routine visits to branches	-	700,000	-	700,000	-	700,000	-	770,000	2,870,000
Hold Annual Scientific conference during which KPA elections will be conducted	-	-	-	1,800,000	-	-	-	-	1,800,000
Establish an electoral college to vet and supervise the election process and set criteria, rules and minimum requirements.	1,050,000	50,000	-	50,000	-	-	-	-	1,150,000
Develop guidelines and rules to govern the electoral process	-	2,650,000	-	-	-	-	-	-	2,650,000
Disseminate the constitution widely to all members to ensure it is strictly adhered to in all processes and activities of KPA	-	-	-	700,000	-	-	-	-	700,000
Sub total	**1,050,000**	**3,400,000**	**-**	**3,250,000**	**-**	**700,000**	**-**	**770,000**	**9,170,000**

SO 4: To ensure professional development of members and enhance their economic empowerment.									
Activity	**Amount in KES**								**Total**
	2012/2013				**2013/2014**				
	Q1	**Q2**	**Q3**	**Q4**	**Q1**	**Q2**	**Q3**	**Q4**	
Hold a technical retreat to develop proposal for changes of the Cap 244. Proposal should include all desired changes affecting KPA and its membership.	-	-	-	-	1,700,000	-	-	-	1,700,000
Produce a guideline for minimum remuneration in the private sector.	-	-	-	-	-	2,000,000	-	-	2,000,000
Encourage and support members to learn business management and entrepreneurial skills	-	-	-	-	1,200,000	1,200,000	1,200,000	-	3,600,000
Consolidate and disseminate relevant information and best practices to all members	-	50,000	-	-	-	52,500	-	-	102,500
Participate in relevant regional and international conferences and meetings	-	-	-	-	-	600,000	-	-	600,000
Scale up KPA collaborative work with other institutions	-	-	-	-	500,000	-	-	-	500,000
Sub total	**-**	**50,000**	**-**	**-**	**3,400,000**	**3,852,500**	**1,200,000**	**-**	**8,502,500**

SO 5: To increase and broaden institutional income base and enhance long term financial sustainability.									
Activity	Amount in KES								Total
	2012/2013				2013/2014				
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
Develop a resource mobilization strategy	-	-	-	-	1,050,000	-	-	-	1,050,000
Train staff on resource mobilization	-		-	-	-	1,350,000	-	-	1,350,000
Strengthen collection of membership subscriptions	-	-	120,000	-	-	-	-	-	120,000
Enhance collection of revenue from CPD programs	-	-	300,000	-	-	-	315,000	-	615,000
Sub total	**-**	**-**	**420,000**	**-**	**1,050,000**	**1,350,000**	**315,000**	**-**	**3,135,000**

SO 6: To ensure ethical behavior, accountability and integrity among members is constantly reiterated, internalized and upheld									
Activity	Amount in KES								Total
	2012/2013				2013/2014				
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
Develop national code of conduct.	-	-	-	-	1,100,000	-	-	-	1,100,000
Reconstitute the disciplinary committee	-	200,000	-	-	210,000	-	-	-	410,000
Develop induction program for all members	-	-	-	-	375,000	375,000	375,000	375,000	1,500,000
Conduct training for council members on their roles and responsibilities	-	-	-	-	-	1,200,000	-	-	1,200,000
Sub total	**-**	**200,000**	**-**	**-**	**1,685,000**	**1,575,000**	**375,000**	**375,000**	**4,210,000**

SO 7: To strengthen and promote global norms, standards, and guidelines for the quality, safety, and efficacy of medicines.									
Activity	**Amount in KES**								**Total**
	2012/2013				**2013/2014**				
	Q1	**Q2**	**Q3**	**Q4**	**Q1**	**Q2**	**Q3**	**Q4**	
Review and prepare rules and regulations based on the constitution, the code of ethics, organizational culture and standards of behavior.	-	-	-	-	1,800,000	-	-	-	1,800,000
Train the inspectorate on their roles and update their skills	-	-	-	-	760,000	-	-	-	760,000
Scale up community outreach activities and enhance KPA public outlook	-	-	-	-	450,000	-	-	-	450,000
Sub total	**-**	**-**	**-**	**-**	**3,010,000**	**-**	**-**	**-**	**3,010,000**

The following table presents the detailed budget for operational costs and cost of equipment & furniture for 2012/13 and 2013/14.

Secretariat operational costs, branch set-up and other costs									
Activity	**Amount in KES**								**Total**
	2012/2013				**2013/2014**				
	Q1	**Q2**	**Q3**	**Q4**	**Q1**	**Q2**	**Q3**	**Q4**	
Head Office salaries	195,000	195,000	195,000	195,000	214,500	214,500	214,500	214,500	**1,638,000**
Branch salaries	675,000	675,000	675,000	675,000	742,500	742,500	742,500	742,500	**5,670,000**
Head Office running costs	480,000	480,000	480,000	480,000	504,000	504,000	504,000	504,000	**3,936,000**
Branch Offices running costs	1,080,000	1,080,000	1,080,000	1,080,000	1,134,000	1,134,000	1,134,000	1,134,000	**8,856,000**
Head Office transport costs	422,000	-	-	-	443,100	-	-	-	**865,100**
Office Equipment (head office and branches)	-	1,505,000	-	-	1,119,000	-	-	-	**2,624,000**
Office Furniture (head office and branches)	-	588,000	-	-	447,300	-	-	-	**1,035,300**
Other costs (Audit and evaluations)	-	150,000	-	-	157,500	-	-	-	**307,500**
Sub Total	**2,852,000**	**4,673,000**	**2,430,000**	**2,430,000**	**4,761,900**	**2,595,000**	**2,595,000**	**2,595,000**	**24,931,900**

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