

ANNUAL REPORT 2018

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Abbreviations & Acronyms

| | |
|--------|--|
| ACS | -American Cancer Society |
| AIC | - African Inland Church |
| APCA | - African Palliative Care Association |
| CMEs | - Continuing Medical Education |
| FBO | - Faith Based Organisations |
| HIV | - Human Immunodeficiency Virus |
| KEHPCA | - Kenya Hospices and Palliative Care Association |
| KEMSA | - Kenya Medical Supplies Authority |
| KENCO | - Kenyan Network of Cancer Organizations |
| MOH | - Ministry of Health |
| NCD | - Non-communicable disease |
| OSF | - Open Society Foundation |
| OSIEA | - Open Society Initiative East Africa |
| PC | - Palliative Care |
| PFHI | - Pain free hospital initiative |
| PLWPCN | - Persons Living With Palliative Care Needs |
| UHC | - Universal Health Coverage |
| UHC | - Universal Health Coverage |
| UK | - United Kingdom |
| USA | - United States of America |
| WHO | - World Health Organisation |
| WHPCA | - Worldwide Hospice Palliative Care Alliance |

Message from the Executive Director - Dr. Zipporah Ali



Dr Zipporah Ali
Executive Director

I would like to personally thank each and every one of you for continuing to support KEHPCA's vision of quality palliative care for all in Kenya. Without your support, our year 2018 would not have been as successful as it has been. We thank our friends, our development partners, funders and all our member organizations for standing with us throughout 2018.

In 2018, we held our 5th National Palliative Care Conference from 7th to 9th November. This was a great success with over 300 delegates from across Kenya and Africa Region. We also had a good number of International delegates and speakers. Our theme for the conference-Investing in Palliative Care for Universal Health Coverage (UHC) was in preparation for His Excellency President Uhuru's big agenda on UHC. Our President launched UHC on 12th December 2018 in four pilot counties, namely: Kisumu; Nyeri; Isiolo and Machakos. This is a great opportunity for us to advocate for and ensure that palliative care is not left out of the UHC package and that no one is left behind including Persons Living With Palliative Care Needs (PLWPCN). We need to be strategic in our advocacy and work with PLWPCN to be in the forefront of advocating for their needs.

Ah you are aware, UHC means that all individuals and communities receive the health services they need without suffering financial hardship. It includes the full spectrum of essential, quality health services, from health promotion to prevention, treatment, rehabilitation, and palliative care. It enables everyone to access the services that address the most important causes of disease and death, and ensures that the quality of those services is good enough to improve the health of the people who receive them. Protecting people from the financial consequences of paying for health services out of their own pockets reduces the risk that people will be pushed into poverty because unexpected illness requires them to use up their life savings, sell assets, or borrow – destroying their futures and often those of their children; a scenario that is too common in our communities.

Achieving UHC is one of the targets the nations of the world set when adopting the Sustainable Development Goals in 2015. Countries that progress towards UHC will make progress towards the other health-related targets, and towards the other goals. Good health allows children to learn and adults to earn, helps people escape from poverty, and provides the basis for long-term economic development (WHO Universal Health Coverage Fact Sheet 2017).

As we confront a time of many changes and trying to meet these changes during a time of larger nation-wide and global change, Palliative Care should remain relevant at all levels of care. It should be fully integrated in: our National & County Health Care Systems; Health Care Professionals' & Community Health Workers' training; Health policies and strategies as well as Kenya's UHC plan. To achieve these, in 2019 we will be focusing on Strategic Advocacy for Change. We cannot do this without you. We ask that you continue to work with us to ensure that NO PLWPCN is left behind.

Thank You Very Much for being there for us. We wish you all the best for the year 2019.

Dr. Zipporah Ali, MD, MPH, MPC, HonDUniv
Executive Director Kenya Hospices and Palliative Care Association (KEHPCA)

"I regard universal health coverage as the single most powerful concept that public health has to offer. It is inclusive. It unifies services and delivers them in a comprehensive and integrated way, based on primary health care." -Margaret Chan – Former WHO Executive Director

Introduction

The right to health is a fundamental human right guaranteed in the Constitution of Kenya. Article 43 (1) (a) of the Constitution provides that every person has the right to the highest attainable standard of health, which includes the right to health care services. Palliative care is an essential service that has been integrated in to the Universal Health Coverage (UHC). It means that all people and communities can use the promotive, preventive, curative, rehabilitative and palliative health services they need, of sufficient quality to be effective, while also ensuring that the use of these services does not expose the user to financial hardship.

It is the responsibility of both National and County Governments to develop necessary policies and allocate adequate resources including human resource, medical and non medical supplies to ensure palliative care services are available at all levels of care up to the community. The president has identified 4 key areas that his government will focus on; food security, affordable housing, manufacturing, and affordable healthcare for all. KEHPCA and other palliative care champions are taking advantage of this political commitment to advocate for more support towards palliative care. Some of the key areas of focus include; policy formulation, budgetary allocations and engagement of Persons Living With Palliative Care Needs (PLWPCN).

Palliative care is an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual (WHO). Palliative care services should be accorded to both children and adults faced with life threatening illness and customized to meet the individual's needs.

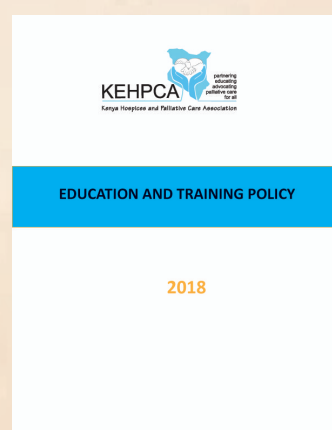
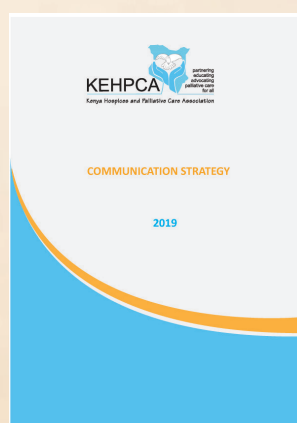
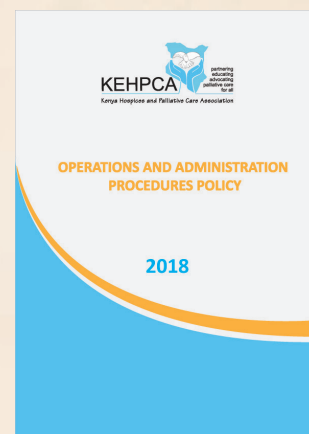
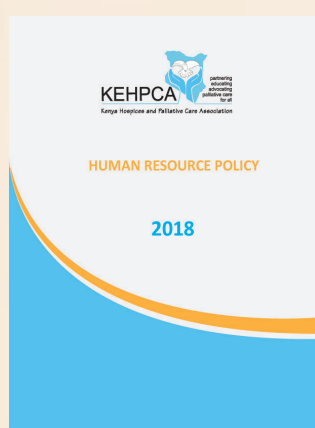
According to Lancet Commission on palliative care and pain relief 2018; Globally there is growing number of individuals suffering from serious illnesses that require palliative care due to the dual burden of both communicable and non communicable diseases. Over 80% of these individuals live in low and middle income countries like Kenya and have limited to palliative care services including pain management. 2.5 million children worldwide die in need of palliative care and pain relief, and more than 90% of paediatric deaths associated with serious health-related suffering are avoidable. HIV and cancer contribute to highest burden.

Kenya Hospices and Palliative Care Association (KEHPCA) is the umbrella body hospices and palliative care in Kenya, the association has partnered with national and county governments, private and faith based health care providers and other stakeholders to promote access to these services at all levels of care. KEHPCA identified the following key thematic areas to promote advocacy, access and budgetary allocations toward palliative care:

1. Improving internal systems to promote efficiency, accountability and sustainability
2. Scaling up to new horizons
3. Strategic advocacy for accelerated growth
4. Promote access to justice and legal services
5. Alleviating physical pain and suffering through pain management
6. Integrating patients, care givers and community led advocacy
7. Strengthen collaborations and partnerships
8. Research and Publications
9. Promoting access to safe chemotherapy treatment

Improving internal systems to promote efficiency, accountability and sustainability

The American Cancer Society (ACS) has partnered with Steps Ahead Consulting Company to empower Kenyan Network of Cancer Organizations (KENCO) members with knowledge and skills to improve their internal management systems and improve their financial sustainability. This program focuses on the following key domains: Governance, Operations and administration, Human Resources Management, Financial Management, Financial Sustainability, Program Management, External Relations and Partnerships. KEHPCA is a member of KENCO and has been enrolled in this program since 2017. The association has received training and technical support in the above domains. It has also managed to review and develop most of the essential manuals and policies.



Scaling up to new horizons

With support from the African Palliative Care Association (small grants project) KEHPCA worked with three county hospitals; Isiolo, Vihiga and iten to integrate palliative care services and establish coordination units. The three hospitals identified professionals who underwent training in palliative care. They also agreed on a coordinator for palliative care. The hospitals are now providing palliative care services to the patients in need.

KEHPCA jointly with Coast hospice again advocated for the need for integration of palliative care in Kilifi. The county health administration and the hospital administration bought in to the idea, and allocated a nurse for palliative care. The nurse has worked successfully to ensure palliative care is part of the vital services that the hospital provides.

Strategic advocacy for accelerated change

KEHPCA partnered with Open Society Initiative East Africa (OSIEA) to undertake projects on strategic advocacy and communication in palliative care. The objectives of the project include;

1. Increasing palliative care public awareness through strategic communication.
2. Strengthening patient- self advocacy through training and small grants
3. Increasing government accountability and resourcing palliative care through the UHC agenda
4. Developing and strengthening broader partnerships to expand the scope of national palliative care stakeholders

In November 2018, KEHPCA held a national convening of organizations working on, or interested in, palliative care development in Kenya. The aims of the meeting were to upgrade participants' skills in key areas of strategic advocacy and communications that are aligned with their identified needs, to reach a consensus on a palliative care advocacy and communications agenda for Kenya, and utilise information to draft a framework to develop a national palliative care advocacy and communications strategy. This meeting was facilitated by Dr. Faith Mwangi Powell, engaged as a consultant by OSF. The participants were from:

- Kenya (OSIEA, KEHPCA, PC service providers, patients, care takers, NCD Alliance Kenya, Kenya Network of Cancer organizations, Network of HIV/AIDS organization, Ministry of Health, Kenya)
- Uganda (Palliative Care Association of Uganda-PCAU, African Palliative Care Association- APCA)
- UK (WHPCA, Chatham House), USA (OSF)

The workshop came up with a proposed road map for strategic advocacy for palliative care in Kenya.

Alleviating physical pain and suffering through pain management

Access to pain relief is a human right and is a component of right to health as highlighted in the constitution of Kenya.

The Ministry of Health (MOH), Kenya Hospices and Palliative Care Association (KEHPCA), Kenya Medical Supplies Authority (KEMSA), and Kenyatta National Hospital (KNH) have embarked on an initiative to reconstitute oral morphine for distribution throughout Kenya. The reconstitution is being done at the KNH department of pharmacy with support from the University of Nairobi School of pharmacy to ensure quality control. This has been through the support of Treat the Pain, A program of the American Cancer Society. By December 2018, more than 10,000 bottles had been distributed across counties in Kenya.



So as to ensure that healthcare workers have access to correct information on pain management, there has been scale up of the pain free hospital initiative (PFHI). The Implementation of this initiative has happened across 11 health facilities in Kenya.

These include; Kenyatta National hospital, Moi teaching and Referral hospital, Maua Methodist Hospital, AIC Kijabe Hospital, Aga Khan University Hospital Nairobi, Machakos Hospital, Rift Valley Provincial Hospital, Defense Forces memorial Hospital, Kisii Teaching and Referral Hospital, Thika Level Five hospital and Embu Level 5 Hospital. A total of 3,634 staff have successfully completed all the modules since its inception in 2014. A preconference workshop was also held in November 2018 that brought together implementing partners from Kenya as well as Ethiopia, Nigeria, Swaziland, Uganda and Nigeria.

KEHPCA also organized and participated in forums that focused on pain management education such as hospital CMEs as well as symposiums across the country.

KEHPCA works closely with The Kenya Pain Society to advance pain management education for healthcare workers.

Integrating patients, care givers and community led advocacy

Persons Living With Palliative Care Needs (PLWPCN) and community play a key role in advocacy, improving service delivery and supporting those who have been faced with serious illnesses that require intervention of palliative care providers. KEHPCA has purposed to engage both PLWPCN and general community in ensuring that palliative care is accessible to all those in need. The association is working closely with palliative care providers to identify PLWPCN, Community health care workers and key members of the community who will be equipped with the necessary knowledge and skills to enable them advocate effectively at the county levels.

Palliative care week is celebrated every 2nd Saturday of October every year. It creates an opportunity for; awareness creation, advocacy and appreciating palliative care providers in a unified manner. This year KEHPCA partnered with member hospices and palliative care units to undertake various activities during the Palliative Care Week (7th – 13th October). The activities that were undertaken were in line with the Worldwide Hospice Palliative Care Alliance (WHPCA) theme for the year 2018; Palliative care-Because I matter. Some of the activities undertaken include; TV and radio shows, community talks, community walks among others.

KEHPCA uses various online platforms to disseminate information regarding palliative care including;

- Website (<http://kehpc.org/>)
- Ehospice a global online newspaper(<https://ehospice.com/kenya/>)
- Facebook <https://www.facebook.com/kehpc>
- Twitter(@KEHPCA)
- Instagram (KEHPCA)
- Youtube(<https://www.youtube.com/channel/UCWz8UJgFtSY78XC1Wt4MwSg>),
- Blog(<http://kehpc.org/category/blog/page/3/>) and WhatsApp group for palliative care providers.

Over 10,000 individuals have been engaged through these online platforms.

Research and Publications

Research plays a key role in influencing policy formulations and improvement of clinical care, KEHPCA has adopted an evidence based approach in integrating and scaling up access to palliative care services. To achieve this objective the association participated in various research initiatives including; Research on understanding social determinants and individual health seeking behaviour among women with and without a diagnosis of breast cancer in Kenya. The research was targeting 800 respondents. The association also undertook a review of the project it supported in integrating palliative care in the former provincial and level 5 hospitals. Below are the links to these publications:

1. Social determinants and individual health-seeking behavior among women in Kenya: protocol for a breast cancer cohort feasibility study; <https://bmjopen.bmj.com/content/9/1/e023171.abstract>
2. Increasing access to palliative care in Kenya's former provincial and Level 5 hospitals: A seven-year study; <https://www.ajol.info/index.php/eamj/article/view/184188>

Promoting access to safe chemotherapy treatment

The Ministry of Health, National Cancer Institute and Kenya Hospices and Palliative Care Association has partnered to promote safe handling and administration of chemotherapeutic agents under the project CHEMOSAFE. This initiative is funded by American Cancer Society.

There is an increase in health care professionals trained in oncology mostly doctors, pharmacist, nurses and clinical officers. In the past chemotherapy treatment was only available in few centers based in major towns like Nairobi, Eldoret, Kisumu and Mombasa. With the devolution of health care services, county governments are setting up oncology units mostly providing chemotherapy, surgery and palliative care. The number of Kenyans affected by cancer is growing rapidly, currently it is estimated that over 44,000 individuals are diagnosed with the disease every year. With the growing demand for services and setting up of oncology units there is need to empower health care providers deployed to work in these units with the necessary knowledge and skills to enable them handle chemotherapeutic agents safely.

Chemotherapeutic agents are used to cure cancer, control the size of the tumour or manage symptoms in palliative care. These agents are highly toxic and can cause severe damage to humans, animals and environment if not handled or disposed properly. The CHEMOSAFE project aims at equipping the staff working in chemotherapy units with knowledge and skills on how to handle chemotherapeutic agents throughout the supply chain; procurement, storage, compounding, administration to the patient, disposal and management of spillage. This year the three partners conducted two ToT training; one in Nairobi and the other one at Eldoret. They also conducted one cascaded training in Nyeri. A total of 79 health care workers have been trained.

Bi-annual KEHPCA Conference 2018

This was held in November 7th-9th 2018 at Laico Regency. It was well attended and successful with 288 participants mainly from Kenya, Uganda, Tanzania, Zambia, USA, UK and the Netherlands. KEHPCA received support from various organizations towards the conference and dinner.



Strengthening collaborations and partnerships

Membership

KEHPCA remains genuinely thankful to all member institutions and friends who consistently show their commitment through their Annual Membership and Friendship Subscriptions. KEHPCA has seen the growth of hospices and palliative care unit within the government hospitals, KEHPCA encourages active member/friend subscriptions which are made each calendar year.

Volunteers

KEHPCA acknowledges the selfless effort of the volunteers who generously give their time to make KEHPCA events run smoothly. In 2018, our volunteers devoted their time during the 5th National Palliative Care Conference and Annual Fundraising Dinner held from 7th – 9th November 2019. We deeply appreciate our volunteers and their steadfast commitment to service to KEHPCA.

Fundraising: KEHPCA Dinner 2018

This was held during the conference on the evening of 8th November 2018. The guest speaker was Dr. Sally Hull from Hospice Care Kenya (UK) who gave a talk on the ‘the Spirit of Giving’. Two Persons Living with Palliative Care Needs also spoke at the dinner. We also invited Hon. Rachael Shebesh to talk on her experience as a recipient of palliative care (through her father). The dinner was well attended





Financial Report

KENYA HOSPICES AND PALLIATIVE CARE ASSOCIATION

STATEMENT OF FINANCIAL POSITION - 31 DECEMBER, 2018

| | | 2018 | 2017 (Restated) |
|----------------------------------|------|-------------------|--------------------|
| | Note | KES | KES |
| NON-CURRENT ASSETS | | | |
| Property and Equipment | 4 | <u>18,166,904</u> | <u>18,249,709</u> |
| CURRENT ASSETS | | | |
| Cash and Bank | 5 | 33,559,622 | 25,522,487 |
| Accounts Receivable | 6 | 969,211 | 2,140,468 |
| Quoted Investments | 7 | 117,660 | 141,775 |
| Total Current Assets | | <u>34,646,493</u> | <u>27,804,730</u> |
| LESS: CURRENT LIABILITIES | | | |
| Accounts Payable | 8 | 3,712,848 | 2,600,467 |
| Deferred Income | 9 | <u>24,920,195</u> | <u>19,190,813</u> |
| Total Current Liabilities | | <u>28,633,043</u> | <u>21,791,280</u> |
| Net Current Assets | | <u>6,013,450</u> | <u>6,013,451</u> |
| NET ASSETS | | <u>24,180,354</u> | <u>24,263,160</u> |
| Represented by: | | | |
| General fund | | 23,008,228 | 23,091,034 |
| Restricted Funds | | <u>1,172,126</u> | <u>1,172,126</u> |
| TOTAL FUNDS (PAGE 8) | | <u>24,180,354</u> | <u>24,263,160</u> |

These financial statements were approved by the Directors on 14th June, 2019 and signed by:



Faustin Mgendi
(Honorary Treasurer)



Ruth N. Were
(Honorary Secretary)



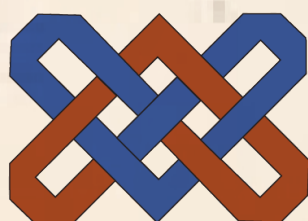
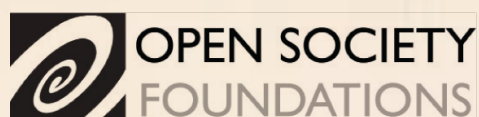
Dr. Zipporah Ali
(Executive Director)

Summary

Introduction of Universal Health Coverage (UHC) gives the palliative care champions both at national and county level an opportunity to advocate for recognition and integration of palliative care in to the UHC package. It is important to engage persons living with palliative care needs so that they can share the benefits of these services and challenges faced. KEHPCA will continue engage all the relevant stakeholders and partners to ensure all in need have access.

Partners

With your support, more Kenyans in need of palliative care have benefitted hence improving their quality of lives. Pamoja!



Hospice Care Kenya



Ministry of Health



Annex 1 - Service Providers

Free standing Hospices

1. Meru Hospice
2. Nairobi Hospice
3. Kisumu Hospice
4. Coast Hospice
5. Nyeri Hospice
6. Eldoret Hospice
7. Nyahururu Hospice
8. Nakuru Hospice
9. Embu-Mbeere Hospice
10. Kakamega Hospice
11. Siaya Roselyne Hospice
12. Laikipia Palliative Care Centre

Hospice and Palliative Care services in the Rural Community (FBO)

1. Kimbilio Hospice
2. VIAGENCO
3. Baraka Medical Centre - Nairobi
4. Our Lady Hospice Thigio
5. Shepherds of Life
6. Catherine Mc Auley Hospice - Muhoroni
7. KICOSHEP
8. FRACODEP

Hospices and Palliative Care Services in the Mission Hospitals

1. Our Lady Hospice Thigio: Limuru
2. AIC Litein Mission Hospital
3. PCEA Chogoria Hospital
4. Tenwek Mission Hospital
5. Maua Methodist Hospital
6. PCEA Kikuyu Hospital
7. Integrated AIDS Program
Mang'u Assumption Sisters
8. Nazareth Hospital
9. Consolata Kyeni Mission Hospital
10. AIC Kijabe Hospice
11. Consolata Hospital Nkubu
12. Catholic Archdiocese of Mombasa - Health Dept

Teaching and Referral Hospitals

1. Kenyatta National Hospital
2. Moi Teaching and Referral Hospital

Government Hospitals with Palliative Care

1. Kakamega County Referral Hospital
2. Coast Provincial General Hospital
3. Embu Level Five Hospital
4. Nyeri County Referral Hospital
5. Nakuru Teaching and Referral Hospital
6. Jaramogi Oginga Odinga Teaching and Referral Hospital
7. Meru Level Five Hospital
8. Thika Level Five Hospital
9. Garissa County Teaching and Referral Hospital
10. Kisii Teaching and Referral Hospital
11. Machakos Level Five Hospital
12. Busia General Hospital
13. Webuye Sub- County Hospital
14. Nanyuki County Referral Hospital
15. Homabay District Hospital
16. Malindi Sub County Hospital
17. Gatundu District Hospital
18. JM Olkalou Hospital
19. Kitui County Referral Hospital
20. Makueni County Referral Hospital
21. Kangundo Sub- County Hospital
22. Isiolo Referral Hospital
23. Kericho County Referral Hospital
24. Naivasha Sub-County Referral Hospital
25. Oloitoktok General Hospital
26. Kitale Sub- County Referral Hospital
27. Siaya County Referral Hospital
28. Murang'a Teaching and Referral Hospital
29. Kiambu County Referral Hospital

Private Hospitals with Palliative Care Units

1. MP Shah Hospital: Cancer Care Kenya
2. Aga Khan University Hospital Palliative Care Services
3. Shalom Hospital- Machakos
4. Alexandria Cancer Centre - Eldoret & Nakuru
5. Texas Cancer Centre
6. Equra Health Eldoret
7. Outspan Hospital - Nyeri
8. Niraobi Hospital

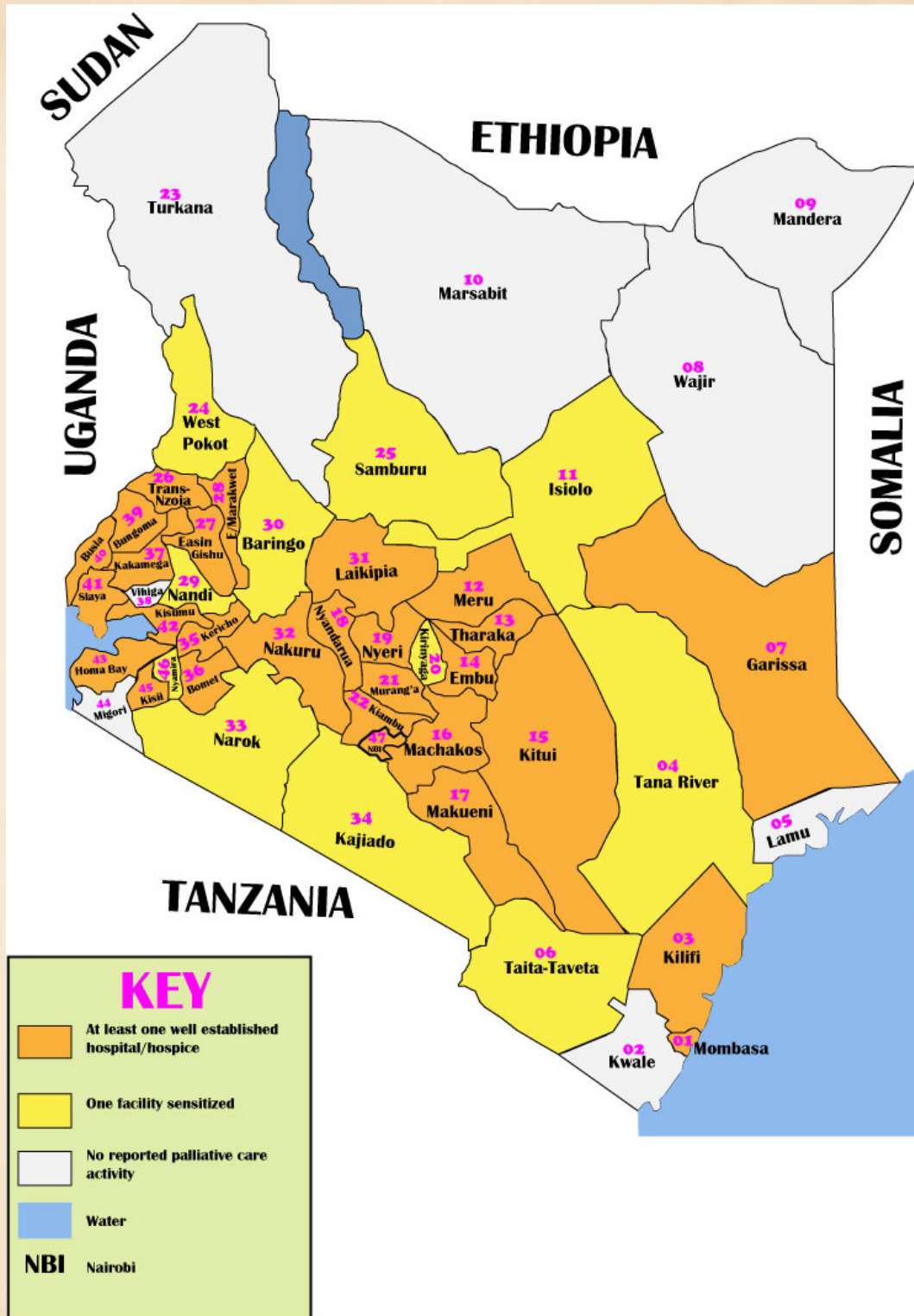
Annex 2 - Map of Hospices and Private Hospitals



Annex 3: Map of Ministry of Health PC Facilities in Kenya



Annex 4: Map of Palliative Care Services in Counties



Annex 5: Board



Dr John Weru
-Chair



Dr Meshack Liru - Vice Chair



Mr Faustin Mgendi -
Honorary Treasurer



Mrs Ruth Were -
Honorary Secretary



Mr Peter Bunde
- Member



Mrs Saraphina Gichohi
- Member



Dr Esther Munyoro
- Member



Mr Mohamud Jama
Madhar - Member



Mrs Elizabeth Ndung'u-
Member



Mr Kiran Suthar - Nominated
Member

Annex 6: Staff



Dr. Zipporah Ali -
Executive Director



Dr. Asaph Kinyanjui -
Director of Programs



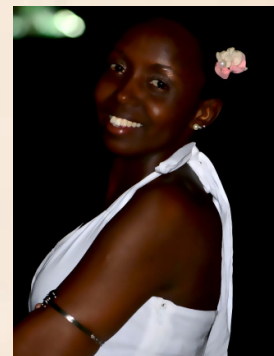
Miriam Igobwa - Admin/
Finance Manager



David Musyoki - Senior
Advocacy Officer



Dr. Esther Muinga -
Special Coordinator for
Access to Pain Relief and
Palliative Care



Josephine Muya -
Assistant Administrator



Patrick Bowen -
IT Manager



Stephen Shiyuka -
Support Staff