



KENYA SOCIETY OF ANAESTHESIOLOGISTS

STRATEGIC PLAN 2020 - 2024

The Aga Khan University Hospital Anaesthesia Faculty





FOREWORD



Appropriately managed perioperative space is a great determinant in the outcomes of surgical patients: improvements in clinical skills must go in tandem with a proportionate increment in well-trained healthcare personnel adequately empowered to deliver accessible, appropriate and timely perioperative healthcare to the country's populace.

Dr. Louis Litswa - KSA Chairman

Delivery of such ideal patient care in a resource-limited world, therefore, be well planned and professional societies are thus tasked, now more than ever before, to be at the forefront of ensuring that the highest standards of patient care are enforced. However, achievement of this noble goal dictates that the Kenya Society of Anaesthesiologists engages in structured long-term development of policy in a multi-stakeholder forum with various clinical and non-clinical players, whilst remaining cognizant of the professional and social wellbeing of its membership and be financially sound.

This Strategic Plan lays out a roadmap that will enable the Kenya Society of Anaesthesiologists to retain relevance to its members, meet its objectives and achieve its mission over the next five years as a key player in helping the country attain the goal of Universal Health Coverage, by ensuring access to affordable, timely and appropriate perioperative healthcare.



EXECUTIVE COMMITTEE

The KSA Executive Committee carried through the dreams and aspirations of members and came up with this strategic plan.

	Name	Position
1	Dr. Louis Litswa	Chairperson
2	Dr. Jane Gwaro	Vice Chairperson
3	Dr. Stephen Okelo	Secretary
4	Dr. Susane Nabulindo	Vice Secretary
5	Dr. Muthoni Ntonjira	Treasurer
6	Dr. Kimberly Kamau	Vice Treasurer
7	Dr. Maxine Okelo	Council Member
8	Dr. Wilson Ng'ang'a	Council Member
9	Dr. Angela Ongewe	Council Member
10	Shelmith Macharia	Administrator



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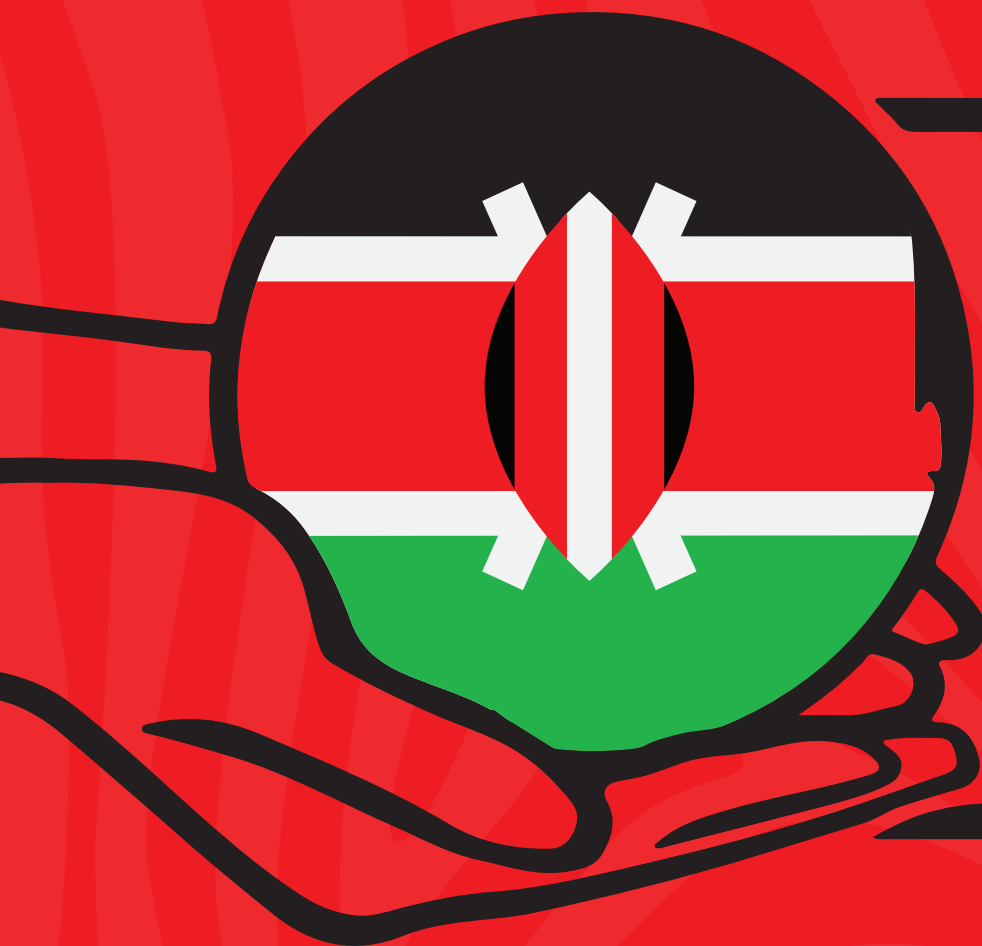
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ACRONYMS AND ABBREVIATIONS

AMREF	African Medical and Research Foundation
CoG	Council of Governors
CME	Continuous Medical Education
FAQ	Frequently Asked Question
GAT	Graduate Anaesthesia Training
G4 Alliance	The Global Alliance for Surgical, Obstetric, Trauma and Anaesthesia Care
GoK	Government of Kenya
ICES	International Collaboration for Essential Surgery
J&J	Johnson & Johnson
KMPDC	Kenya Medical Practitioners and Dentists Council
KSA	Kenya Society of Anaesthesiologists
MO	Medical Officer
MoH	Ministry of Health
N-PAP	Non-Physician Anaesthesia Provider
PAP	Physician Anaesthesia Provider
R&D	Research and Development
SHIP	Surgical Health Improvement Programme
SMS	Simple Messaging Service
SOP	Standard Operating Procedure
WFSA	World Federation of Societies of Anaesthesiologists



**Safe
Anaesthesia
Kenya**



DEFINITIONS

Channel

The means used by the office to communicate with and reach its co-creators of value and stakeholders in order to deliver a value proposition.

Co-Creator

A stakeholder who actively participates in the delivery of a service and in the process adds value and positively affects the impact of the service.

Core Values

The guiding principles and philosophy at the centre of the organization.

Impact Measure

A metric that provides information about the lasting effect of a service delivery.

Key Activity

An important activity that the Office must do to make its service business model work.

Key Performance Indicator

See definition of Performance Measure.

Key Resource

An important asset that the Office requires to make its service business model work.

Key Risk Indicator

A measure that supports the risk assessment process in order to develop an understanding of the impact on the organization of identified risks materializing and the likelihood of their materializing.

Mission

What the organization is about; its purpose.

Performance Measure

A measure that provides the most important performance information that enables an organization or its stakeholders to understand whether the organization is on track and make timely interventions if not.

Perspective

Different performance dimensions of an organization.

Risk

The effect of uncertainty on objectives.

Service Model

A model that describes the rationale of how an organization creates and delivers value as it provides its services.

Stakeholder

The universe of people with an interest in the success, including citizens, the government, vendors, suppliers, collaborators, other organizations, etc.

Strategic Initiative

High impact projects designed to significantly impact strategic performance.

Strategy Map

The “Big Picture” of how an organization creates value that demonstrates the cause-effect relationships among the objectives that make up the organization’s strategy.

Strategic Objective

A continuous improvement activity that must be performed to realize the organization’s goals.

Strategic Result

Desired outcome for the main focus areas of the strategy.

Strategic Theme

Main focal areas of the organization’s strategy, used to focus staff effort on accomplishing the vision.

Value Proposition

The bundle of the Office’s services that create value for a specific co-creator/stakeholder; what it must deliver to develop, retain and deepen its relationship with stakeholders.

Vision

What the organization wants to accomplish in the future.



ABOUT US

The Kenya Society of Anaesthesiologists (KSA) was registered on the 21st September 1994 under the Societies Act. Its operations are governed by a constitution, which establishes a Council and an Annual General Meeting (AGM). The society is affiliated to the international World Federation of Societies of Anaesthesiologists (WFSA) and the Kenya Society of Professionals.



KSA is a professional organization whose full membership is open to qualified anaesthesiologists working in Kenya. Associate members are the Registered Clinical Officers in Anaesthesia, Nurse Anaesthetists and all students of Anaesthesia. Anaesthesiologists from the rest of the world can be awarded Honorary Membership in relation to their contributions to the Society.



OUR SERVICES



The primary role of the Society is to:

1

Set standards for the provision of safe anaesthesia, perioperative care, critical care and pain management services;

2

Ensure the provision of safe anaesthesia, perioperative care, critical care and pain management services;

3

Facilitate the education and training for health care providers;

4

Ensure member wellness and growth;

5

Advocate for quality perioperative care, critical care and safe anaesthesia; and

6

Partner with stakeholders for the improvement of patient outcomes.

It does this through its Value Proposition, which includes:



Safe and Quality
Anaesthesia;



Education and Training;



Member Welfare;



Development of Protocols
and Guidelines; and



Partner Visibility

The KSA's value proposition is created and/or delivered through Channels, which include conferences, workshops, safe anaesthesia programmes, symposia, continuous medical education (CME), social, electronic and print media, and word-of-mouth.

In order to create and deliver its value proposition, the KSA must create and maintain certain Relationships with its co-creators of value. This includes creating a community among the co-creators and sharing information with them.

The value that the KSA creates only exists with the active participation and engagement of several stakeholders and is thus co-created with these stakeholders.

Such co-creators of the services include patients, members, associate members, the Ministry of Health, Council of Governors, public and private health institutions, teaching institutions, regulatory authorities, non-physician anaesthetists, and pharmaceutical and non-pharmaceutical companies. The co-creators set the context for the KSA's work.



KSA undertakes certain Key Activities as it creates and delivers its value proposition.

These key activities include:

1

Organizing and holding the Annual Scientific Conference;

2

Conducting symposia;

3

Facilitating continuous medical education for its members;

4

Conducting workshops;

5

Engaging in advocacy work and training;

6

Developing protocols and guidelines;

7

Engaging in research and development;

8

Providing peer review for its members;

9

Publishing the Quarterly Journal;

10

Acting as a liaison between the Government of Kenya (through the Ministry of Health & Council of Governors), the Kenya Medical Practitioners and Dentists Council (KMPDC), training institutions and hospitals;

11

Regularly auditing perioperative outcomes;

12

Mobilizing financial resources.

For these key activities to be performed, the KSA must have Key Resources, which include its **members, the Secretariat, financial resources, standard operating procedures (SOPs), and protocols.**



Given the fact that the KSA may not always possess all the resources it requires or the capacity to undertake all its key activities, it then works with some Key Partners to provide such additional resources or to undertake the certain activities. The key partners include:



Ministry of Health and
Council of Governors;



The World Federation of
Societies of Anaesthesiologists
(WFSA);



Pharmaceutical
companies;



Other professional
bodies/societies;



Insurance companies;



Medical institutions;



Training institutions; and



Non-physician
healthcare providers.

By providing additional resources or undertaking certain key activities, these key partners extend the KSA's value proposition.

The Society, however, incurs costs when it undertakes its key activities. The KSA's Cost Structure encompasses administration costs, remuneration for the Secretariat, office maintenance costs, conferencing costs, programme costs, professional development costs, and licensing and membership costs associated with the WFSA, the G4 Alliance and KMPDC.

Lastly, there are Outcome Streams associated with its value proposition. These outcome streams include revenue streams, which refer to the funding that the KSA attracts and the revenue that it generates; and impact streams that capture the impact that the Society creates. The revenue streams include member subscriptions, conference fees, sponsorship fees from partners, investment income, rental income and proceeds from adverts in the Quarterly Journal. The impact streams include reduction in morbidity and mortality related to anaesthesia and critical care, and the professional growth of its members.

The Nairobi University Anaesthesia Faculty



Table 1. Summary of the KSA's Service Model

Key Partners	Key Activities		Value Proposition	Relationships	Co-Creators
<ul style="list-style-type: none"> MoH & CoG WFSA Pharmaceutical Companies Other Professional Bodies/Societies Insurance Companies Medical Institutions Training Institutions Non-Physician Healthcare Providers 	<ul style="list-style-type: none"> Annual Scientific Conference Symposia CMEs Workshops Advocacy & Training Development of Protocols & Guidelines R&D Peer Review 	<ul style="list-style-type: none"> Publishing the Quarterly Journal Liaison between GoK (MoH & CoG), the KMPDC, Training Institutions & Hospitals Regular Auditing of Perioperative Outcomes Financial Resource Mobilization 	<ul style="list-style-type: none"> Safe & Quality Anaesthesia Education & Training Member Welfare Development of Protocols & Guidelines Partner Visibility 	<ul style="list-style-type: none"> Community Knowledge Sharing 	<ul style="list-style-type: none"> Patients Members Associate Members MoH & CoG Public & Private Health Institutions Teaching Institutions Regulatory Authorities Non-Physician Anaesthetists Pharmaceutical & Non-Pharmaceutical Companies
Key Resources			Channels		
<ul style="list-style-type: none"> KSA Members The Secretariat Finances Standard Operating Procedures Protocols 			<ul style="list-style-type: none"> Conferences Workshops Safe Anaesthesia Programmes Symposia CMEs 		
Cost Structure			Outcome Streams		
<ul style="list-style-type: none"> Administration Costs Human Resource Costs Office Maintenance Costs 		<ul style="list-style-type: none"> Conferencing Costs Marketing Costs Programme Costs Professional Development Costs Licensing and Membership Costs (WFSA/G4 Alliance/KMPDC fees) 	Financial Outcomes <ul style="list-style-type: none"> Member Subscriptions Conference Fees Sponsorship Fees from Partners Investment Income Rental Income Adverts 		Non-Financial Outcomes <ul style="list-style-type: none"> Reduction in morbidity & mortality related to anaesthesia and critical care Professional growth



OUR NEW STRATEGIC DIRECTION



Our Mission

To promote and encourage the science and art of good and safe anaesthesia and critical care practice in Kenya, and to ensure that the standards of training and practice are at par with international standards as recommended by the World Federation of Societies of Anaesthesiologists (WFSA).



Our Vision

Safe and quality anaesthesia, perioperative care, critical care and pain management services for every patient.



Our Core Values

The KSA lives by the four values, namely: physician-led safe anaesthesia and critical care practice; integrity; patient centricity; and innovation and excellence.

Our Core Values

Physician-led Safe Anaesthesia and Critical Care Practice

- We support the physician-led team-based provision of anaesthesia and critical care.
- We ensure that every patient receives the highest quality and safest level of care.

Integrity

- We uphold high standards of moral and ethical principles
- We take ownership and accountability
- We treat the people that we interact with and each other with courtesy, politeness and kindness.

Patient Centricity

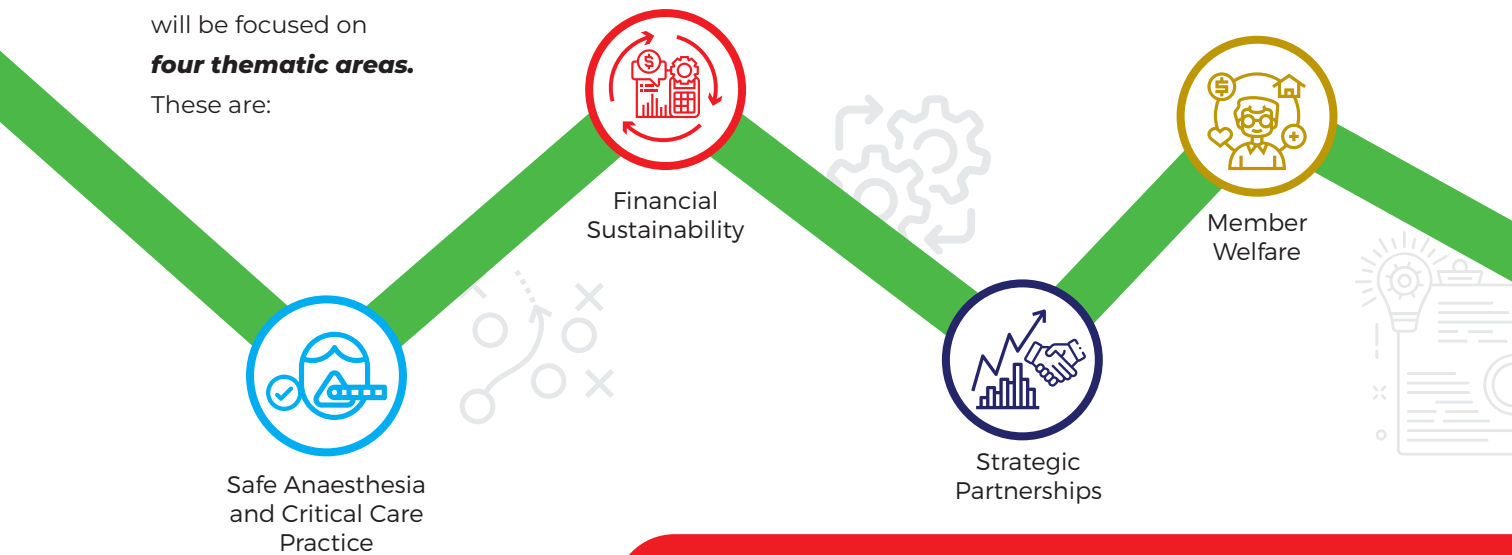
- We recognize the cultural traditions of our patients, their personal values and preferences, and their personal lifestyles.
- We understand and accommodate family situations, and integrate the patients, their families, close supporters and caregivers with healthcare providers in making clinical decisions as an extended care team.
- We respect and coordinate efficient transitions between providers, departments and healthcare settings.

Innovation and Excellence

- We constantly strive to redefine the standard of excellence.
- We are adaptable and responsive to change.
- We have a constant desire for improvements in critical safety and value for our patients.

Strategic Themes and Results

The society's strategy will be focused on **four thematic areas**. These are:



Each of these thematic areas has a strategic result associated with it. The strategic result is the desired outcome that we aim to achieve by concentrating in the respective area. These results are presented in Table 2.

Table 2: Strategic Themes & Desired Outcomes

	Strategic Theme	Strategic Objectives
1	Safe Anaesthesia and Critical Care Practice	Reduction in morbidity and mortality related to anaesthesia and critical care
2	Financial Sustainability	Self- reliance and financial independence
3	Strategic Partnerships	Increased benefits to members and patients
4	Member Welfare	Enhanced professional growth

Strategic Objectives

The following strategic objectives, captured in Table 3, will be implemented in order to realize the desired outcome associated with the respective theme:

Table 3: Strategic Themes and Objectives

	Strategic Theme	Strategic Objectives
1	Safe Anaesthesia and Critical Care Practice	<ul style="list-style-type: none">• Increase anaesthesia and critical care workforce• Enhance training of N-PAP/PAP• Improve quality of practice• Enhance public education on safe anaesthesia and critical care practice
2	Financial Sustainability	<ul style="list-style-type: none">• Increase Revenue• Optimize use of resources
3	Strategic Partnerships	<ul style="list-style-type: none">• Strengthen existing partnerships• Identify and create new partnerships• Enhance sharing of information and access to resources
4	Member Welfare	<ul style="list-style-type: none">• Mentorship• Increase membership• Active stewardship• Professional development• Wellness

Performance Scorecard

The progress of realization of each of the strategic objectives will be gauged through the performance measures and the performance targets shown in the thematic scorecards presented in the following tables. The scorecards also detail the strategic initiatives required to attain the performance targets, the implementation timelines for each of these initiatives, and the entities responsible for the execution of each strategic objective.

Table 4: Safe Anaesthesia & Critical Care Scorecard

Objective	Performance Measure	Performance Target	Strategic Initiatives	Implementation Timelines	Responsibility
Increase Anaesthesia and Critical Care Workforce	Anaesthetist/ Patient ratio	3: 100,000	<ul style="list-style-type: none">Retention of NPAP/PAP in practice through advocacy, lobbying to employment agencies (hiring and rational deployment)Increase number of training accredited sitesIncrease training positions at existing training institutionsEstablishment of new cadres of practice i.e. MO and Diploma in anaesthesia 2yrs courseOptimize duration of special rotations of anaesthesia undergraduates	2023	KSA Executive Council

Objective	Performance Measure	Performance Target	Strategic Initiatives	Implementation Timelines	Responsibility
Enhance Training of NPAP/PAP	Number of training per NPAP/PAP	Three (3) fellowship training sites	<ul style="list-style-type: none"> Establish fellowship positions in various subspecialties Internship rotation in anaesthesia Q & A (Board exams, license exams) Encourage Journal\ publishing 	2022	KSA Executice Council KSA Education and Training Subcommittee KMPDC
	% of workforce trained	100% with CPD coverage of at least 50 points annually per provider	Workshops <ul style="list-style-type: none"> Continue with GAT (Graduate Anaesthesia Training) <Need to synchronize terms used; e.g., GAT/ residency training) Outreach programmes Simulation training 		MoH & CoG KSA Executive Committee and the Training Institutions (UON, MOI & Aga Khan)
Improve Quality of Practice	Reduction of morbidity and mortality rate related to anaesthesia & critical care practice	100%	<ul style="list-style-type: none"> CME (case presentations) Workshops Audits (Baseline based on maternal mortality Policy on data collection and sharing Simulation training Adherence to national anaesthesia guidelines Establishment of department of anaesthesia at all hospital levels Benchmarking with best practice 	2023	KSA Safety and Standards Subcommittee KSA Education Subcommittee KMPDC MoH & CoG

Objective	Performance Measure	Performance Target	Strategic Initiatives	Implementation Timelines	Responsibility
Enhance Public Education on Safe Anaesthesia & Critical Care Practice	Number of national campaigns done per year	2 p.a	<ul style="list-style-type: none"> Media i.e. social media, electronic, print FAQ Health talks Representation in meetings by other professional bodies Patient information pamphlets Conduct patient surveys to gauge impact of campaigns 	2021	KSA Administrator KSA Education Subcommittee
Enhance Policy/ Advocacy Work	Representation in policy development and advocacy work related to anaesthesia and critical care practice	100%	<ul style="list-style-type: none"> Engage with policy makers Regular engagement with J&J, SHIP Role of KSA in policy development Attendance of policy meetings ICES AMREF Africa 	2020	KSA Chair and Secretary

Table 5: Financial Sustainability Scorecard

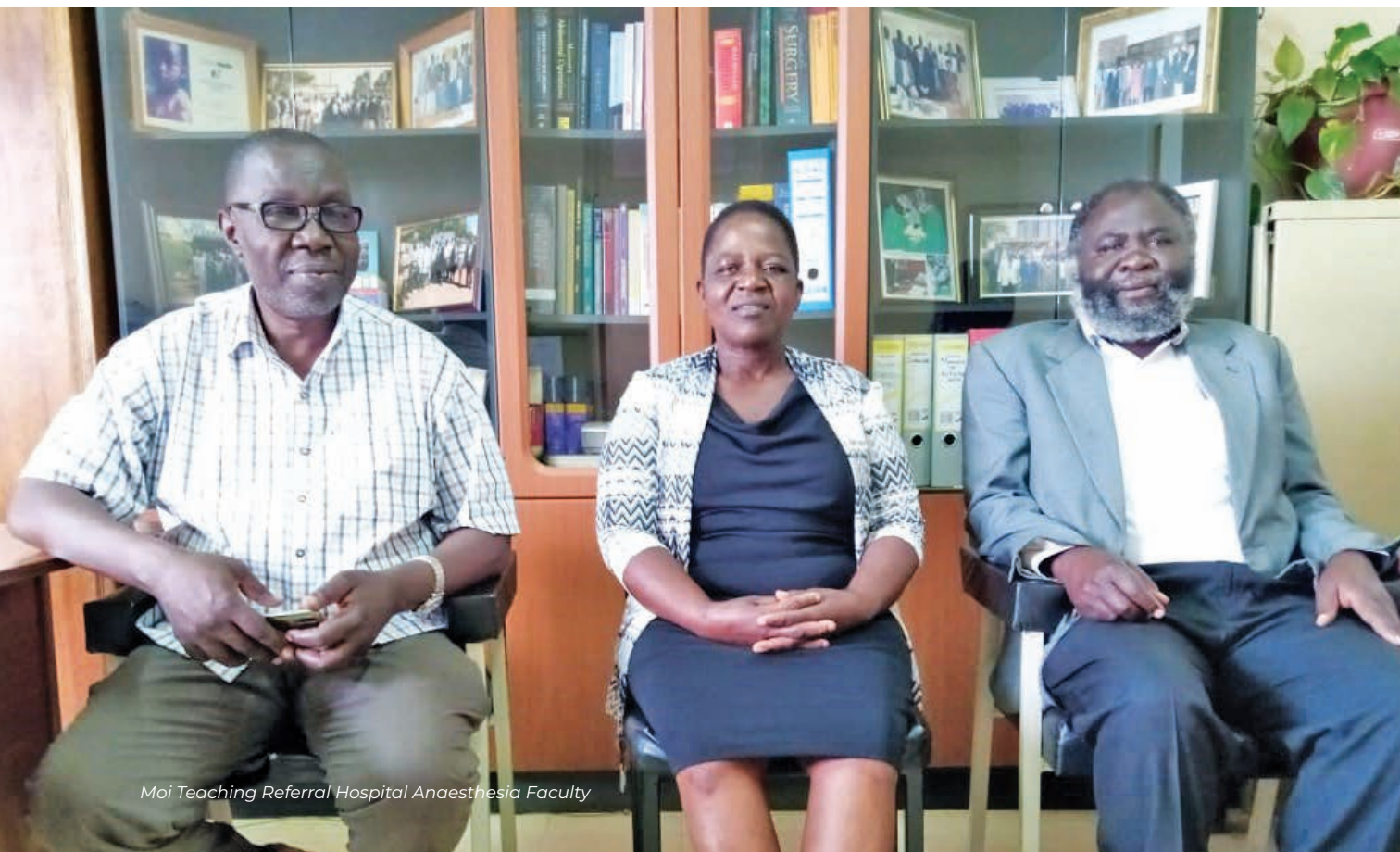
Objective	Performance Measure	Performance Target	Strategic Initiatives	Implementation Timelines	Responsibility
Increase Revenue	% growth in revenue	10% p.a.	<ul style="list-style-type: none">• Improve membership• Increase membership number• Increase fees collection• BLS training• Investment in property, equity• Sales of merchandise• Increase rent revenue• Lobby for corporate sponsorship	Annually	<ul style="list-style-type: none">• KSA Treasurer• KSA Executive Committee
Optimize Use of Resources	% reduction in operational costs	5% p.a.	<ul style="list-style-type: none">• Refurbishment of KSA office• Sale of unused assets• Paperless office• Creating a bigger and diverse group of trainers• Encourage volunteering• Reduction in utility cost• Competitive procurement of service providers• Recycling	Annually	<ul style="list-style-type: none">• KSA Treasurer• KSA Administrator

Table 6: Strategic Partnerships Scorecard

Objective	Performance Measure	Performance Target	Strategic Initiatives	Implementation Timelines	Responsibility
Strengthen Existing Partnerships	% of partners with active engagements	90%	<ul style="list-style-type: none">Regular engagementParticipating in activities of common interestPublishing/ presenting at various fora	Annual	KSA Chair and Executive Committee
Increase Partnerships	Number of new partnerships	5 p.a.	Identifying partners with common interest Partnership with training institutions Simulation training through creation of partnerships with other professional societies	Annual	<ul style="list-style-type: none">KSA Chair and Executive Committee
Enhance Sharing of Information and Access to Resources			Creating an information ie database through partnership Create an app to aid in collection of data (partial sponsorship) Publications Institutional subscription of online material	Contemporaneous	<ul style="list-style-type: none">KSA SecretaryKSA Administrator

Table 7: Member Welfare Scorecard

Objective	Performance Measure	Performance Target	Strategic Initiatives	Implementation Timelines	Responsibility
Enhance Mentorship Programmes	Number of global mentorship programs conducted per year	Two (2) p.a.	<ul style="list-style-type: none"> • Social meeting (coffee and gas) • Engage with GATs at entry and exit with EC • Formal mentorship (set up an ad hoc standing committee for setting the mentorship program, welfare committee, mentees to choose) 	2021	<ul style="list-style-type: none"> • KSA Welfare Subcommittee • KSA Secretary
Enhance Professional Development	% of members attaining minimum CPD points	100%	<ul style="list-style-type: none"> • Fellowship opportunities for member • CME/ workshop (organize and expand out) • Facilitate fellowship programs in local facilities • Facilitate non-medical workshops/seminars e.g. leadership, management • Legal aspects of practice • Practice as a business/ entrepreneurship 	2021	<ul style="list-style-type: none"> • KSA Education Sub committee



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