THE UHS CORRUPTION PREVENTION OPERATIONS.

BY:

DR. STEPHEN OCHIEL
CHIEF MEDICAL OFFICER,
UNIVERSITY HEALTH SERVICES
CONSTITUTION OF THE UHS CPC

• The UHS Constituted its CPC committee on the 25TH SEPTEMBER 2010.

• The constituted committee was to have the following as its members:
  
  – The Chief Medical Officer - Chairman
  – All UHS Section Heads - Members
  – Two Nurses:
    » Emily Chesumei - Member
    » Margaret Ndubi - Member
  – Two Doctors:
    » Dr. Lucy Kabare - Member
    » Dr. Billy Muigai - Member
  – Internal Auditor
    » Samwel N. Njoroge : - Secretary
Full Membership of UHS Corruption Prevention Committee

- Dr. S. Ochiel Chief Medical Officer - Chairman
- Dr. M.R.B. Otieno Deputy Chief Medical Officer (Student) - Member
- Dr. Doreen Asimba Deputy Chief Medical Officer (Adult) - Member
- Dr. O.B. Magoha Principal Medical Officer - Member
- Dr. M. Muigai Theatre - Member
- Dr. Sarah Omenda Pharmacists - Member
- Dr. Samuel Mwaniki SSc - Member
- Dr. Lucy Kabare SSce - Member
- Dr. Duncan E. Leoduma Pharmacists - Member
- Ms. Emmy Sumbeiywo Counselor - Member
- Mr. Vitalis O. Ooro Clinical Officers’ Coordinator - Member
- Mr. J. Mwololo Bursar - Member
- Mrs. Nelly W. Karenju Pharmaceutical Technologist - Member
- Mr. S. N. Njoroge Internal Auditor - Member
- Mr. Jonah Nyange Principal Lab technologist - Member
- Mrs Esther Alila Nursing Officers’ Coordinator - Member
- Ms Emily Chesumei Nurse – Students’ Sick Bay - Member
- Ms Margaret Ndubi Nurse – Senior Staff Clinic - Member
- Mr. J.M.Gichunge Hospital Administrator - Member
- Ms Mercy Dietto Procurement Officer - Member
UHS INTEGRITY ASSURANCE OFFICERS

• The UHS also identified the following members to be trained as Integrity Assurance Officer:

• Dr. Duncan. Leaduma - Pharmacist
  – Dr. Samuel Mwaniki - Pharmacist
  – James Mwololo - Bursar
  – Samwel N. Noroge - Internal Auditor

• Dr. Mwaniki and Mr Njoroge attended the IAO training held at the KSMS between the 21\textsuperscript{st} and 24\textsuperscript{th} February 2011.

• The CMO had attended a similar training held a week earlier for UON top management at the same venue.
UHS CPC DATES OF MEETINGS

• It was agreed:
  – that the CPC will be holding its meeting once very month
  – that the meetings will be held on the Monday falling a week before the end of the month.
  – that the members have to avail themselves for the meetings on the scheduled dates whether they are invited or not.
  – that the meetings will take the shortest time possible and a the maximum about an hour.
REVIEW OF CORRUPTION PREVENTION MEASURES AT UHS

Wet Areas:

• The members were informed that these are areas that have a high inclination and incidence for corruption.

• That the committee will have to identify them and with concerted efforts work towards mitigating corruption in the areas.

• The committee initially identified such areas at the UHS, reviewed them and recommended actions for prevention of corruption as below:
<table>
<thead>
<tr>
<th>Risk Area</th>
<th>Challenges</th>
<th>Action</th>
<th>Action by and Time Frame</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catering</td>
<td>Poor management of food Stocks.</td>
<td>To source foods from SWA</td>
<td>The administrator</td>
</tr>
<tr>
<td></td>
<td>Un-procedural Sourcing of items.</td>
<td>To follow-up on the implementation of the recommendations made earlier by the UHS sub-committee on the same.</td>
<td>Bursar, Sr. Alila and Sr. Chesumei to act on this.</td>
</tr>
<tr>
<td></td>
<td>Receiving of foods items.</td>
<td></td>
<td>Immediately</td>
</tr>
<tr>
<td></td>
<td>No qualified catering staff.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>No dietician.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Quality of food not assured.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Petty Cash</td>
<td>Management of petty cash</td>
<td>Bursar to provide guidelines on petty cash usage, and discuss with the FO on staffing so as to clear the outstanding problems.</td>
<td>Bursar</td>
</tr>
<tr>
<td></td>
<td>Guidelines on petty cash usage</td>
<td></td>
<td>Immediately</td>
</tr>
<tr>
<td>Risk Area</td>
<td>Challenges</td>
<td>Action</td>
<td>Action by and Time Frame</td>
</tr>
<tr>
<td>--------------------</td>
<td>----------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------</td>
<td>-----------------------------------</td>
</tr>
<tr>
<td>Consumables Stores</td>
<td>No Procurement Officer&lt;br&gt;The one recruited not posted to UHS yet Bin cards not updated</td>
<td>Bin cards to be updated</td>
<td>Administrator to follow up</td>
</tr>
<tr>
<td>Management</td>
<td></td>
<td></td>
<td>Immediately</td>
</tr>
<tr>
<td>Dugs Store</td>
<td>Poor records&lt;br&gt;Unaccountability</td>
<td>Proper records to be maintained to enhance accountability and guide in decision making</td>
<td>Dr Etemesi to address issues in the stores</td>
</tr>
<tr>
<td>JHS Equipment</td>
<td>Some old and new equipment not marked.&lt;br&gt;Equipment not posted in register/inventoried</td>
<td>Marking and inventorying to be executed</td>
<td>Administrator and respective section head</td>
</tr>
<tr>
<td>Risk Area</td>
<td>Challenges</td>
<td>Action</td>
<td>Action by and Time Frame</td>
</tr>
<tr>
<td>------------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------</td>
<td>--------------------------</td>
</tr>
<tr>
<td>Revenue collection from External sources</td>
<td>Not Invoicing of Services to outsider, ie -Chuna, -Pensions, -Unes, -Other universities -NHIF billings</td>
<td>To Invoice Follow up on the collection Seek the assistance of the legal officer to enforce payment at the worst. Follow up on NHIF billings</td>
<td>Bursar Immediately Bursar and Ms Musembi to follow up on the NHIF outstanding issues. Immediately</td>
</tr>
<tr>
<td>Revenues collection from Internal sources</td>
<td>Difficulty in collecting the medical fees from the colleges</td>
<td>Bursar to follow up Bursar to provide monthly status of such outstanding amounts. UHS management to put pressure on Principals to remit.</td>
<td>Bursar UHS management Immediately</td>
</tr>
<tr>
<td>Risk Area</td>
<td>Challenges</td>
<td>Action</td>
<td>Action by and Time Frame</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>---------------------------------</td>
<td>------------------------------------------------------------------------</td>
<td>--------------------------</td>
</tr>
<tr>
<td>Compliance with Financial Regulations</td>
<td>Efforts to comply fully compliance</td>
<td>Bursar and the Internal Auditor to identify areas of non-compliance, if any.</td>
<td>Bursar and Internal auditor Immediately</td>
</tr>
<tr>
<td>UHSMIS</td>
<td>System currently not operational</td>
<td>UHSMIS currently being re-engineered</td>
<td>UHS management</td>
</tr>
<tr>
<td></td>
<td>Satellite clinics not connected</td>
<td>Satellite clinics to be connected</td>
<td>Immediately.</td>
</tr>
<tr>
<td></td>
<td>Lack of computers in some clinics</td>
<td>All clinics to be provided with the computers</td>
<td></td>
</tr>
</tbody>
</table>


Areas Specifically Addressed by the committee

Petty Cash

• The committee agreed that management of petty cash should be guided by the UON financial policies and regulations.

• The regular supplies to Sick-Bay should be procured through established procedures and not through petty cash.
Areas Specifically Addressed by the Committee

**Budget**

- Budget projections for the period 2010/2011-201/2015 were tabled by the bursar for discussion. The committee noted and agreed that:

  - That laboratory’s chemicals, reagents and other supplies, which are a major expenditure, should be separated from the drugs vote.

  - That a proposal be made to the Finance Officer to have the Laboratory supplies stand on its own in the budget with its own separate vote allocation.

  - That the Bursar consolidates the projections figures for the laboratory, and incorporates them separately in the budget proposal.

  - That the Bursar be guided by the vote’s utilization levels to decide on the allocation for the Laboratory.
Areas Specifically Addressed cont’

Outstanding Debts to SWA

• The committee noted and agreed that:

• That the amount owed to SWA currently stood at about Kshs 1 million.

• That UHS was not keeping the expenditure within the monthly allocation of Kshs 127,000.

• That there was need to find out why the bills accumulate, and why it has not been possible to process them on a monthly basis to avoid the accumulation.
Areas Specifically Addressed cont’

**UHSMIS**

- the committee noted that:
  - The re-engineering process on the UHMIS is not complete, but that the process on was on course.
  - That some few modules are still some which are not ready yet.
Areas Specifically Addressed cont’

**UHSMIS cont’**

- That the system was in the last stage of development.
- That training, which is a must for all members of staff at UHS, was scheduled to start from Monday the 3rd Feb 2011.
- That the training to be taken very seriously by all members of staff at the UHS.
Areas Specifically Addressed cont’

• **UHSMIS cont’**

• That after the training, the UHS management will agree on a date when the system could be officially launched.

• That Dr. Kodhek who has been the UHSMIS Champion and Chairman of the re-engineering committee is leaving the University.

• That Dr. Mwaniki has been appointed to take up his place to ensure continuity.
Areas Specifically Addressed cont’

ICT Infrastructure

• Misappropriation of computer hardware.

• Thus serious decision on how best the computers will be safeguarded in future as effective use of the UHSMIS and the well being of the hardware are interlinked.

• Measures to be put in place to ensure members of staff take responsibility for the computer hardware assigned to them.
Areas Specifically Addressed cont’

• ICT Infrastructure cont’

• The Hospital Administrator and the Internal Auditor should design a form to affect this responsibility by ensuring that each computer is signed for as a matter of record.

• That the physical security measures on the computers, to include locking and the keys safely kept: one by the user and other by the administrator.

• That a schedule for maintenance should also be
Areas Specifically Addressed cont’

• ICT Infrastructure cont’

• That a card indicating what is in the computer be maintained.

• That effectiveness and incapacity of the computer hardware at the UHS should be reviewed and upgraded where necessary.

• That the UHS management to should create awareness on the responsibility and security of the hardware.

• That the UHS Administrator, Dr. Mwaniki and ICT staff
Areas Specifically Addressed cont’

Pharmacy operations

• The Pharmacist was mandated by the committee to visit the peripheral clinics, with a view to identifying operational problems on the ground, and how best to solve them.

• A report on issues identified from the visits together with the recommendations be forwarded to the CMO’s office.

• The report should also to identify areas that need to be addressed, what need to be done and that
The committee also agreed that:

- appropriate monitoring systems on prescription and consumption of drugs on should be put in place as well as measures to guide the process of disposal of expired drugs.

- manual drugs are recording in all the clinics even as we await the finalization of the UHMIS need to be emphasized.

- the Pharmacist should standardize the format of reporting on the clinics through a form/checklist designed for this purpose.
Areas Specifically Addressed cont

Pharmacy operations cont’

• The pharmacist should pay frequent visits to satellite clinics,

• and the members of staff at the clinics should be informed in advance of the intended visits as a way of encouraging them and enlisting their support.
Areas Specifically Addressed cont

• Pharmacy operations cont’

• those in the clinics should be encouraged to have an understanding of ISO, Service Charter, etc

• regular stock taking should be encouraged in all the clinics, and records on bin cards should be up to date as we finalize on the system.

• there should also be a system of identifying drugs before they expire.
Areas Specifically Addressed cont’

Recording of drugs.

• the committee also noted and agreed that:

• the two drugs recording clerks appointed about six month ago are yet to start the postings.

• the Hospital Administrator and Dr. Etemesi were mandated to immediately assign them duties,

• and also draw up their working and reporting schedules, and as well as clear targets for them.
Areas Specifically Addressed cont’

Tender

• The committee noted, discussed and agreed that:

• That the Procurement Officer be incorporated into the CPC committee as her input on procurement issues is of critical importance for uninterrupted supply of drugs.

• That some of the suppliers awarded tender have indicated their inability to supply.
Areas Specifically Addressed cont’

• Tender Cont’

• The Pharmacist was tasked to make appropriate recommendations on how best to handle the issues on such suppliers.

• The pharmacist was also tasked to identify problems experienced in tender evaluation and award of tender and give recommendations to avoid issues arising in future.
Areas Specifically Addressed cont’

- Tender Cont’
  
  - That the considerations should include issues on non responsive drugs as well as drugs for special/chronic ailments that need special considerations.

  - That UHS should also address the issue of flexibility in sourcing for such drugs for the benefit of the patients to avoid dispensing what is not effective to such patients.

  - That the Pharmacist should also work on a process of reducing procurement of drugs on single prescriptions.
Areas Specifically Addressed cont’

• Tender Cont’

• That there should be constant test checking of sampled drugs to ensure that they remain as intended.

• That the future tender processes and documents should exhaustively capture all our needs, and solve most of ours problems.

• That more attention and efforts should be put on technical evaluation.
Areas Specifically Addressed cont’

- Dispensing
  - The committee noted, discussed and agreed that:
    - regular stocktaking exercises and reports should be instituted.
    - measures to reduce single prescription procurement should urgently be put in place.
    - custody, security and recording of drugs should be enhanced.
Areas Specifically Addressed cont’

• Dispensing cont’

• To ensure the safety of patients, changing or substitution of drugs should be controlled.

• this process should facilitate verification as well as instill higher levels of accountability and transparency in the handling of drugs.