



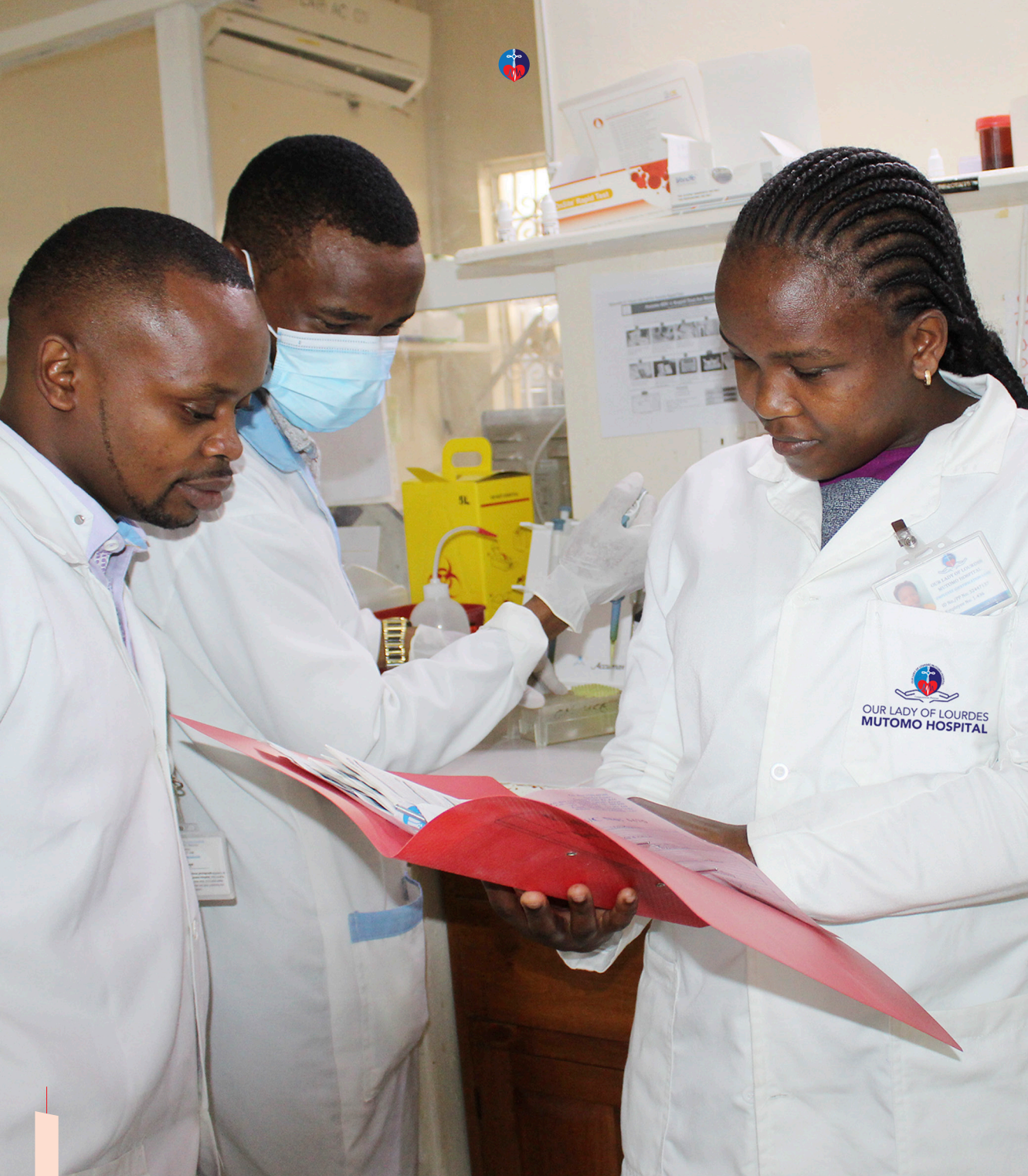
OUR LADY OF LOURDES MUTOMO HOSPITAL

STRATEGIC PLAN



2023-2027

Compassionate Presence



A centre of excellence
in health care provision and training
in Kenya



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**OUR LADY OF LOURDES
MUTOMO HOSPITAL**

A U T H O R I Z A T I O N

We, the undersigned, approve the contents of, and support
the implementation of this Strategic Plan.

Sr. Mary Okumu
CHIEF EXECUTIVE OFFICER

20th April 2023

Mr. William Maema
BOARD CHAIRMAN

20th April 2023

Acronyms & Abbreviations

A&E	Accident & Emergency	IPC	Infection Prevention and Control
CEO	Chief Executive Officer	ISO	International Organization for Standardization
CCTV	Closed Circuit Television	KEPH	Kenya Essential Package for Health
CME	Continuous Medical Education	MCH	Maternal and Child Health
CMMB	Catholic Medical Mission Board	MoH	Ministry of Health
CT	Computed Tomography	MOPC	Medical Outpatient Clinic
ECG	Electrocardiogram	NBU	Newborn Unit
ENT	Eye, Nose and Throat	NOIC	Nursing Officer in Charge
FBO	Faith-Based Organisation	NHIF	National Health Insurance Fund
GHS	Global Health Security	OLLMH	Our Lady of Lourdes Mutomo Hospital
GOPC	Gynaecology Outpatient Clinic	OPD	Outpatient Department
HAIs	Hospital Acquired Infections	PET	Positron Emission Tomography
HDU	High Dependency Unit	POPC	Paediatrics Outpatient Clinic
HIV	Human Immunodeficiency Virus	SOPC	Surgical Outpatient Clinic
HMIS	Health Information Management System	UHC	Universal Health Coverage
HRM	Human Resource Manager		
ICU	Intensive Care Unit		



Preface

I am delighted to present to you the fifth strategic plan of Our Lady of Lourdes Mutomo Hospital.

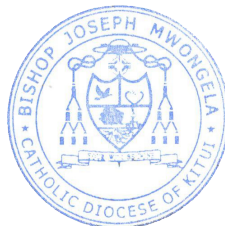
It is now 59 years since the Hospital was started by the Sisters of Mercy. The Hospital has been at the fore-front of providing compassionate health care to the people of Kitui South, improving their livelihoods and giving them hope. We are grateful that with the support of our partners, services have been offered consistently. We thank God for the lives that have been touched through our service over the years, and for the dedication and generosity of our partners and staff.

This plan is our road map for growth and greater service to our people. In the context of the changing health care environment and the increasing demand for quality healthcare, we consider it essential to strengthen our services and reinforce our tag line of "Compassionate presence" by making our clients our priority.

Through the guidance and vision of the Board, the Hospital has made steady progress. Some of the recent achievements include: improved diagnosis through acquisition of a CT-scan machine; elevation of the nursing school to a college of health sciences; introduction of new services and infrastructural improvement. Through our college, we pride ourselves in transforming young hearts and minds, and in moulding well-rounded confident young men and women with skill and passion to provide quality healthcare.

I would like to take this opportunity to offer our sincere gratitude to all who have contributed to the various stages of the development of this strategic plan. We call on Our Lady of Lourdes, our mother and protector, to give all concerned, the strength to implement it.


Rt. Rev. Joseph Mwangela
Bishop of Kitui





Board members with facilitators from MEDS during Board Orientation



Standing Left to Right: Mr. David Maina – Deputy CEO, Mrs. Faith Kithinji – Facilitator, Macdonald Musango – Member, Sr. Virginia Kasai – Member, Ms. Rosemary Maina – Facilitator, Sr. Monica Mukui -Member and Mrs. Agnes Njue - Facilitator.

Sitting Left to Right: Mr. Gabriel Musilu - Member, Fr. John Mwandu - Member, Mr. William Maema – Chairman, Sr. Mary Okumu – CEO and Board Secretary and Mr. Felix Kimoli – Member.



Executive Summary

Our Lady of Lourdes Mutomo Hospital (OLLMH) is owned by the Catholic Diocese of Kitui. Under the care of Sisters of Mercy, and guided by the Catholic ethos, the Hospital has been serving the people of South Kitui and its environs for 59 years. It has truly been God's hand of mercy and healing for so many. At every stage, the Hospital has counted on greatly gifted doctors, nurses and other staff who have generously served the sick and encouraged preventive health practices.

The current times require the Hospital to dream and aim even higher. This strategic plan, summarises the Hospital's dreams and aspirations of delivering high quality healthcare services for the next five years (2023-2027) and serves as the roadmap to strengthening the Hospital by refocusing and devising new goals that will lead to growth in new and meaningful ways.

The plan was developed through a participatory approach that included input from key staff, Management and Board members. It was also informed by the review of the previous strategy, input from our stakeholders and partners, and the scanning of the internal and external environments within which the Hospital operates.

This strategic plan is anchored on healthcare provision, training and research. It also recognises the need for the Hospital to expand its current infrastructure and service offering to meet the community's needs and enhance sustainability. This will see the Hospital provide more specialised services while maintaining quality and superior patient experience. In addition, the plan seeks to explore non-medical sources of revenue.

The strategy was developed around the following six pillars:

1. **Service Delivery** – The objective of this pillar is to deliver quality clinical services and a compassionate patient experience. This will involve: improving both outpatient and inpatient services, including mother and child (MCH) services; strengthening specialised clinics; enforcing infection prevention control (IPC) and increasing patient experience. By so doing, the Hospital aims to achieve a patient satisfaction score of 90% and above.
2. **Human Resource** – The objective of this pillar is to acquire, develop and sustain relevant skills and talents. The Hospital seeks to achieve 97% staff retention, above 90% performance on targets and 90% on staff satisfaction. This will be facilitated by conducting job evaluation, job grading, establishment of



talent management programmes, improving the performance management systems and developing staff capacity.

3. **Healthcare Financing** – The objective of this pillar is to achieve financial sustainability of the Hospital's operations and programmes. This will be done by: increasing the revenue base by 10% annually; maintaining operational costs below 80%; achieving a debt-revenue ratio of 1:5; establishing credit control measures, and growing non-medical revenue.
4. **Technology and Infrastructure** – The objective of this pillar is to expand/improve ICT and infrastructure to support service delivery. This will require the Hospital to: re-organise the Outpatient Department (OPD) and create space for the Accident & Emergency (A&E) Department; establish a High Dependence Unit (HDU), Intensive Care Unit (ICU), renal and oncology units; expand surgical services; increase operational efficiency; expand diagnostic services and initiate the ISO certification process for the laboratory.
5. **Governance and Partnerships** – The objective of this pillar is to strengthen governance structures and partnerships by increasing staff capacity through partnerships; reinforcing resource mobilisation; building governance structures; sustaining faith values and minimising risk exposure.
6. **College of Health Sciences** – The objective of this pillar is to enhance the growth and sustainability of the college by: improving academic performance; introducing new courses; enhancing students' mentorship; strengthening collaborations and partnerships; and improving IT and infrastructure.

A process and evaluation template has been developed to link strategic objectives to corresponding activities. This will enable priority-setting within each strategic objective, and provide a high-level performance measurement framework with timelines, budgetary implications, responsibilities and accountabilities. Annual work plans and processes will be assessed annually in the spirit of continuous quality improvement, with an enhanced focus on the results.

This document is designed to be practical and user-friendly, and to be actively used by Hospital management, staff and stakeholders to guide their operational/work planning processes. With this strategic plan, we look forward to improving the quality of healthcare in the Hospital, as well as enhancing partnerships. We are both confident and optimistic that the successful implementation of this plan will see the realisation of the dream of the Hospital of being a true **“Centre of excellence in health service delivery for the benefit of mankind and the glory of God”**.



CHAPTER 1

Background and Introduction

1.1 Background of the Hospital



OLLMH was founded by the Sisters of Mercy from the Catholic Diocese of Elphin, Ireland. They arrived in Mutomo in 1962 following an invitation by the then Prefect Apostolic of the Catholic Diocese of Kitui, the late Bishop William Dunne, to establish health care services for the people in the area. The Hospital, which was started in 1964 and officially opened in 1965, has gradually grown to a Level Four facility.

Today, the Hospital has a bed capacity of 124 and offers a wide variety of healthcare services comprising of: outpatient services (including special outpatient clinics); inpatient services; MCH services, including maternity; laboratory services; imaging services; pharmacy services; dental services; and HIV treatment and care. Significant projects have recently been undertaken, including revamping the Newborn Unit (NBU) to enhance the care of new born babies and acquiring a CT-scan machine to improve imaging/diagnostic services. The Hospital established Our Lady of Lourdes Mutomo College of Health Sciences in 2017, with a vision of training globally competitive medical professionals. The college is registered and approved by relevant bodies, including Nursing Council of Kenya and Technical and Vocational Education and Training Authority. It held its first graduation in July 2022.

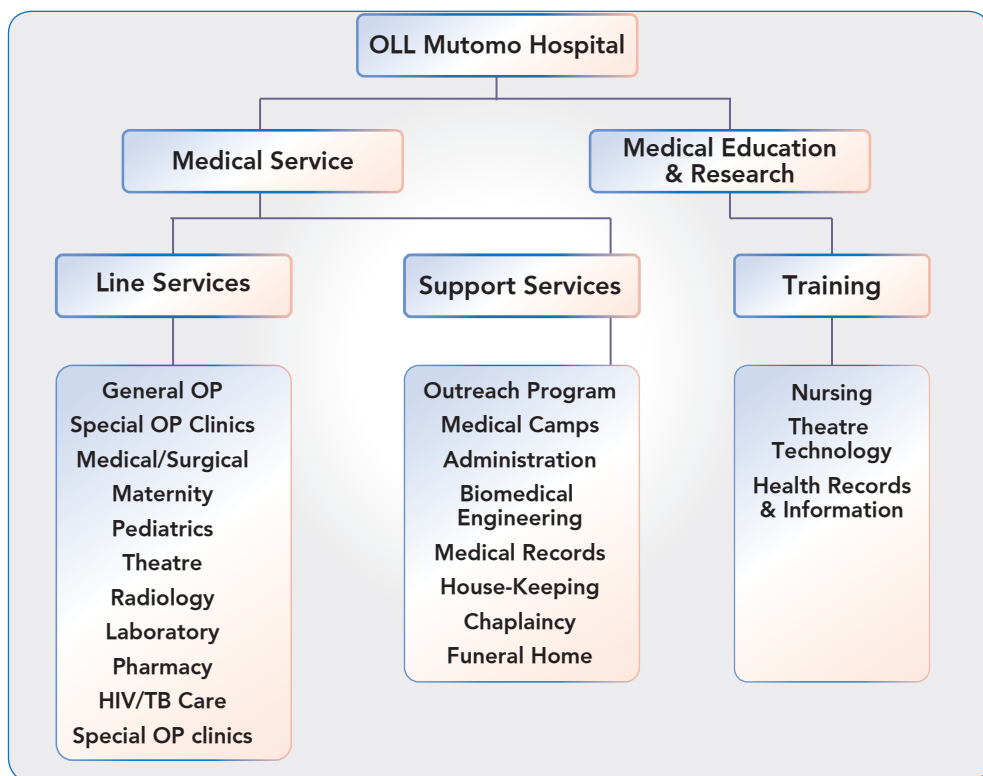


To offer quality and reliable services, the Hospital collaborates with various partners such as the Kenya Conference of Catholic Bishops (KCCB), Scandinavian Doctors, Catholic Medical Mission Board, Christian Health Association of Kenya, Mission for Essential Drugs and Supplies, National Health Insurance Fund (NHIF), Association of the Sisterhoods of Kenya and County Government of Kitui.

The Hospital seeks to be the centre of excellence in healthcare provision and training in Kenya. This will require the introduction of more specialised services and the expansion of the current physical and technological infrastructure. Additionally, the Hospital will need to develop relevant human resources and acquire related medical equipment. This is geared towards accreditation as a Level Five hospital by 2027.

1.2 Core Functions and Services

The Hospital's core functions are provision of quality health care and medical training and research. The services provided are as outlined below.



1.3 Approach and Methodology

The strategy development process included a three-day workshop attended by heads of departments, board members and other stake holder's representatives.



The plan was informed by the review of the previous strategy, identifying key achievement and challenges and areas to build on. This was followed by brainstorming sessions on:

- Hospital SWOT analysis
- Stakeholder analysis
- Competitor analysis
- External environment analysis
- Vision, mission and values
- Strategic pillars, objectives and activities.

A draft strategic plan was developed and presented to Hospital management for further deliberation and input, and subsequently, the final strategic plan was presented for approval by the Board.





CHAPTER 2

Identity and Strategic Direction



Strategic Plan team.

2.1 Hospital Philosophies

The following philosophies will influence the norms that will guide the Hospital's operations and reflect its culture and attitude in its relationships with all stakeholders:

- The sacredness of life from conception to death.
- The dignity and worth of each person regardless of race, sex, creed or social status.
- The unique position of the family in society and its central role in the promotion of holistic health.
- Compassion for the sick, suffering and grieving.
- The provision of quality health care that acknowledges health is wholeness and which requires an openness of new ideas and developments.
- Treating members of staff with dignity and respect by providing an environment for good working relationships through personal approach and presence.



- An approach to care which is faith-centred, committed to the spiritual, physical and psychological wholeness of the person, and which provides a channel through which the merciful healing love of Christ is transmitted.

2.2 Hospital Identity

OLLMH is a faith-based hospital with the brand promise of providing holistic patient-centred health care. The Hospital's brand experience is that the patients are confident that they are receiving the best care at the hands of qualified, accomplished and knowledgeable healthcare professionals.

The Hospital's tagline of "**Compassionate Presence**" is a mission statement and a promise. It speaks of the commitment to improving the lives of patients through quality health care and training.



A patient receives care.

2.3 Vision

A centre of excellence in health care provision and training in Kenya.

2.4 Mission

To provide quality, holistic, accessible, sustainable health care, training and research services as a witness to the healing ministry of Christ.

2.5 Core Values

Compassion	Empathise with those who are suffering and take initiative to help.
Professionalism	Demonstrate good judgment, behaviour, integrity and morals, and team work
Commitment	Be loyal, willing to go the extra mile and put patients first
Stewardship	Be careful and responsible in the management of all resources entrusted to our care



2.5 Strategic Pillars

Six key areas were identified as critical pillars if the Hospital is to achieve its vision:

1. Service Delivery

To deliver quality clinical services and compassionate patient experience.

2. Healthcare Financing

To achieve financial sustainability for the Hospital's operations.

3. Human Resource

To acquire, develop and sustain relevant skills and talent.

4. Technology and Infrastructure

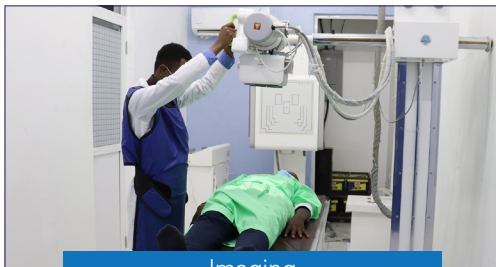
To expand ICT and physical infrastructure to a Level 5 hospital status.

5. Governance and Partnerships

To strengthen governance structures and partnerships.

6. College of Health Sciences

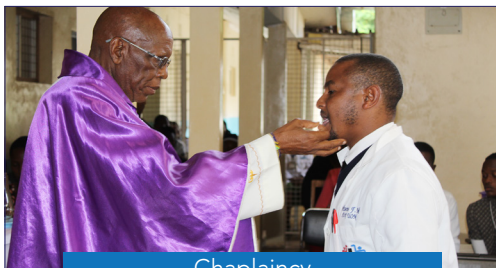
To enhance growth and sustainability of the college



Imaging



Pharmacy



Chaplaincy



Laboratory



CHAPTER 3

Situational Analysis

3.1 Overview

This chapter provides a background of the health sector in Kenya and the linkage to the national health agenda. It shows the linkage between OLLMH's strategic plan and the national health policy.

3.2 Context and Health Sector Trends

The Government of Kenya is keen on the health of its citizens and the improvement of health service delivery. It is cognizant of the fact that good health is a prerequisite to socio-economic development. There were approximately 9,696 health facilities in Kenya as per the Kenya master facilities list in 2021. About 4,616 (47.6%) of these are public, 3,696 (38.1%) fall under the commercial private sector while 1,384 (14.3%) are owned by FBOs and community-based organisations. Currently ranked third in Africa in the Global Health Security Index 2021, Kenya is reported to have the best healthcare system in East Africa.

Approximately 25% of Kenyans have health insurance; covered by public, private or community-based schemes. This means that majority of Kenyans (75%) pay for health services out of pocket. Following decades of policy changes and learning, the Kenya Essential Package for Health (KEPH) concept was adopted in 2005. Primarily, KEPH outlines high impact, cost effective interventions for different age cohorts and defines which service package is to be provided at each level. The MoH has laid out a clear vision for delivery of the essential primary health service.

Kenya's health policy indicates that health and related services will be available to all Kenyans through four tiers:





community, primary care, county services and national services. The healthcare system is structured in a hierarchical manner with six levels: Level 1 – Community services; Level 2 – Dispensaries and clinics; Level 3 – Health centres, maternity and nursing homes; Level 4 – Primary referral facilities (sub-county level); Level 5 – Secondary referral facilities (county level); and Level 6 – Tertiary/national referral facilities.

Kenya's universal health coverage (UHC) programme was introduced in 2018. Its aim is to ensure that all citizens have access to quality and affordable healthcare services that are preventative, promotive, rehabilitative, curative, palliative and effective. The model adopted a two-phase approach. The first phase was expected to abolish all user fees at the primary level (local health centres) and the secondary level (county referral). The second phase is the rollout of a social health insurance scheme through NHIF that allows members to access healthcare from both government and private hospitals.

Despite these efforts, out-of-pocket payments continue to be a problem in the Kenyan health system. However, the government is committed to fast-track progress toward UHC, which the private and non-profit sectors can be part of. The scheme indicates a shift in the government's role; from being a provider of care to a financier. This provides an opportunity for OLLMH to supplement what the public sector offers.

3.3 Competition

The need for health care in the community and the focus on UHC has led to the growth and introduction of new health facilities in Kitui. These include private clinics, imaging centres, pharmacies and hospitals. Most of the facilities offer similar services to those offered by the Hospital. However, some are offering specialised services such as urology and HDU services. The facilities are also targeting corporate clients and cash payers. They are, however, limited by a lack of space for expansion. OLLMH has the advantage of available space for expansion and provision of specialised services. This will enhance growth and sustainability of services.

3.4 PESTEL – Political, Economic, Social, Technological, Ethical and Legal factors

PESTEL analysis is used to assess the external factors that are beyond the control of the Hospital but have an impact, positive or negative, on its operations. The following factors were identified.

**CATEGORY****DESCRIPTION**

CATEGORY	DESCRIPTION
Political/Policy	• County and National UHC initiatives
	• Donor alignment to climate change
	• New clinical guidelines on emerging diseases
	• Change in tax guidelines
Economical	• Increase in inflation/interest rates and cost of living
	• Declining donor support; donor fatigue
	• Increased demand in salaries/wage review
	• Weakening of Kenya shilling against foreign currency
Social	• High levels of poverty in surrounding communities
	• Increase in lifestyle diseases
	• Large proportion of the population (77%) living in rural areas
	• Consumer habits and beliefs in the surrounding community
Technological	• Focus on automation of processes to increase efficiency
	• High access to mobile phones (67%) and mobile money (95%)
	• Use of social media in marketing and customer service
	• Increased cost of acquiring new technology and equipment
	• Data insecurity affecting patient confidentiality
Ecological/Ethical	• Global focus on climate change and waste disposal
	• Declining morality exemplified by corruption in the country
	• Prolonged drought and famine affecting the patient's ability to pay for services and access to clean water
Legal	• Legislation changes on health care roles
	• Requirements to comply with the health regulations
	• Increase in medico-legal cases



3.5 Strengths, Weaknesses, Opportunities and Threats (SWOT) Analysis

SWOT analysis is used to identify internal and external factors that can positively or negatively impact strategy implementation. Internal factors that the Hospital can control are its strengths and weaknesses, while external factors that it has no control over are the opportunities and threats. The achievement of the objectives will largely depend on how the Hospital enhances its strengths, exploits the existing opportunities and manages its weaknesses while controlling the threats. The Hospital's strengths, weaknesses, opportunities and strengths are outlined below.

3.5.1 Strengths

Strength	Relevance
Reputable maternity services	<ul style="list-style-type: none">• Retain key staff• Introduce mother packs• Follow up mothers from the outpatient unit
Competent staff with relevant qualifications	<ul style="list-style-type: none">• Improve service quality and turnaround time• Ongoing capacity building
Good partnerships	<ul style="list-style-type: none">• Maintain current partnerships• Enlist new partners
Availability of quality and essential services	<ul style="list-style-type: none">• Utilise branding and marketing to foster business growth• Enhance services based on need
Unutilised land	<ul style="list-style-type: none">• Reorganise current infrastructure• Professional structural planning
Good reputation in the community	<ul style="list-style-type: none">• Increase community partnership for growth; health education, camps• Customer service training for all staff• Maintain data protection
Active website, social media and marketing committee	<ul style="list-style-type: none">• Focus on consistency, clarity and reputation management



3.5.2 Weaknesses

Weakness	Action
Poor nursing staff retention	<ul style="list-style-type: none">• Review staff welfare initiatives• Develop salary policy• Annual salary review• Staff mentorship and capacity building
Inadequate branding and marketing	<ul style="list-style-type: none">• Research on more marketable courses• Initiate exchange programmes• Expand to online marketing• Obtain dedicated marketing human resource
Long turnaround times	<ul style="list-style-type: none">• SOP on turnaround time and customer care• Improve HMIS• Develop an insurance/corporate desk• Improve Hospital brand• Establish an automated queue management system
Inadequate communication	<ul style="list-style-type: none">• Training on leadership and communication• Adherence to Hospital organogram• Staff orientation• Establish feedback system
Staff shortage	<ul style="list-style-type: none">• Review staff requirements: patient-staff ratio• Staff retention measures
Accumulated patient debt	<ul style="list-style-type: none">• Reinforce debt recovery; credit control function• Service payment policy• Scale up NHIF enrolment• Intensify medical fee collection
Accumulated students' debt	<ul style="list-style-type: none">• Fee payment policy and payment schedule• Benchmark on a fee structure• Intensify college fee collection• Pre-admission interview• College management system• Student kitty policy



3.5.3 Opportunities

Opportunity	Activity
UHC and NHIF focus on the national government	<ul style="list-style-type: none">• Expand beyond primary health care
Underserved communities	<ul style="list-style-type: none">• Expand to other regions past Kitui; Tana River, Makueni• Expand the Athi clinic• Open other functional facilities, chemists• Expand to non-communicable diseases
Private insurance and cash payers	<ul style="list-style-type: none">• Establish partnerships with other organisations and insurers• Improve customer service to meet expectations
Media and digital advertisement	<ul style="list-style-type: none">• Recruit a dedicated online marketing resource
Collaboration with other stakeholders	<ul style="list-style-type: none">• Engage other stakeholders; local universities (fellow programmes) for staff mentorship
Affordable land in the surrounding community	<ul style="list-style-type: none">• Consider separate land for the college
Increased A&E cases	<ul style="list-style-type: none">• Establish critical care services
Non-medical revenue	<ul style="list-style-type: none">• Water desalination and bottling
Non-functional PET scan	<ul style="list-style-type: none">• Operationalise the scan
Tele-radiology	<ul style="list-style-type: none">• Partner with relevant organisations



3.5.4 Threats

Threat	Action
Customer perception of prices in FBOs	<ul style="list-style-type: none"> • Create awareness; community activity involvement • Establish and enhance special amenities • Focus on excellent customer experience
Competition from private clinics and other facilities under the NHIF scheme	<ul style="list-style-type: none"> • Excellent customer experience • Special package on admission • Communication on NHIF benefits • Introduction of signature services like ICU • Recruit specialised personnel
Inflation and economic downtimes	<ul style="list-style-type: none"> • Benchmark on pricing • Offer quality services to attract corporate clients • Barter trade • Regular internal audit; to quantify the ability to pay • Increase NHIF uptake • Collaboration and partnerships for resource mobilisation

3.6 Strategic Plan 2018–2022 Review

OLLMH 2018–2022 strategic plan was developed to guide the Hospital towards achieving its vision of becoming a leader in the provision of quality and responsive healthcare. The strategic plan was designed around the scorecard management tool, which is meant to simplify the measurement of objectives. Key achievements and challenges are summarised below.

3.6.1 Key achievements

The Hospital made significant achievements, particularly on infrastructure and provision of services. It also experienced growth in patient numbers and managed to maintain a good relationship with stakeholders. Other achievements included:

- First graduation at the College of Health Sciences
- Improved diagnostics: introduction of CT-scan, advanced X-ray, U/S
- Introduction of additional services/departments: orthopaedic and NBU
- Improved Hospital ambience
- Expansion of non-medical sources of revenue



3.6.3 Challenges

The Hospital faced various challenges, including:

- Aging Hospital and college debts
- Low resource setting
- Lack of critical care services
- Retrogressive cultural practices and beliefs
- Nursing staff retention

3.7 Stakeholder Analysis

OLLMH recognises the importance of all its stakeholders and commits to anticipating, identifying and meeting their expectations as well as resolving issues in a timely manner. The Hospital is open to consultations and feedback from stakeholders on matters affecting its' operations and service delivery.

3.7.1 Internal stakeholders

- Board members are expected to drive the corporate governance process, ensure effective organisational controls, monitor and evaluate the strategic plan implementation and offer support in resource mobilisation. To deliver these, the Hospital should ensure that the board members have clear terms of reference and receive accurate and timely reports with maximum cooperation from auditors and staff.
- Staff members are expected to implement the strategic plan, meet patient expectations, comply with laws, policies and procedures, and meet performance targets. To achieve this, the staff require relevant training and development, a conducive work environment, competitive remuneration, job security and sufficient resources.

3.7.2 External stakeholders

- Patients are expected to pay promptly for services, give feedback on services, facilitate peer education and comply with treatment modalities. To achieve, this, the Hospital is expected to offer quality, holistic, and sustainable healthcare, have courteous staff and maintain patient confidentiality.
- Students are expected to comply with college policies and regulations, demonstrate good performance and pay college fees promptly. In return, the college needs to provide quality education and conducive learning environment, have adequately equipped facilities, and provide affordable courses and relevant certification.
- National and county governments and MoH are expected to provide regulatory approvals and licensing and partnership in project delivery, staffing and capacity building. To achieve this the Hospital must comply with laws and



regulations, pay tax and levies and account for the social impact of projects, human and other resources.

- The community and the church are expected to consume Hospital services, market them, give feedback, and have a conducive working relationship. In return, the Hospital is expected to provide affordable services, uphold faith, culture and ethos/norms, give back to the community, provide employment to qualified community members and uphold environmental protection measures.
- Partners are expected to provide support in resource provision while complying with set guidelines. To enhance this, the Hospital is expected to provide quality care, demonstrate stewardship and accountability and provide relevant reports.
- Financiers are expected to provide innovative financing products, have competitive interest rates and fees, and offer flexible payment/repayment terms. To facilitate this, the Hospital is expected to ensure continuity of business relationships and have a good credit rating through timely repayment of facilities.
- Suppliers are expected to supply quality goods and services in a timely manner with competitive pricing and ethical standards. To enable this, the Hospital needs to settle invoices promptly, provide equal opportunities to all suppliers and give clarity in orders/requisitions for materials and services.



Board orientation



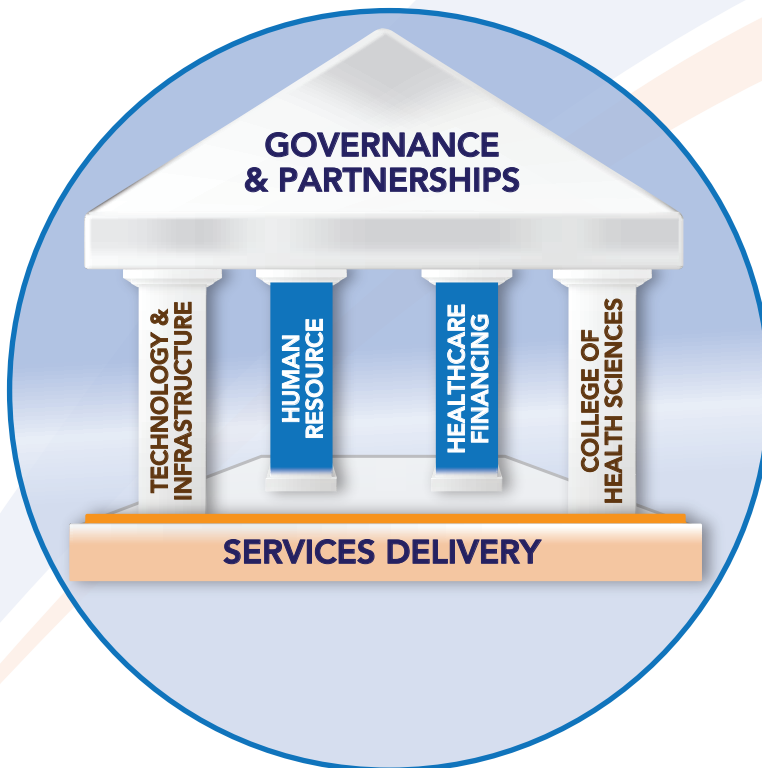




CHAPTER 4

Strategic Framework

This chapter provides the goals of each strategic pillar. The related activities and initiatives, measures and targets are included in the implementation matrix.



4.1 Strategic Pillars

Six key areas were identified as critical pillars if the Hospital is to achieve its vision and mission.

1. Service delivery

Strategic objective: To deliver quality clinical services and compassionate patient experience.



Operational objectives

- Maximise MCH services
- Achieve specialised services
- Enhance IPC to achieve zero HAIs
- Increase patient experience; achieve a patient satisfaction index of above 90%
- Expand Mother of Mercy Services

2. Human Resource

Strategic Objective: To acquire, develop and sustain relevant skills and talents.

Operational objectives:

- Acquire quality workforce to achieve staff retention index of 97%
- Improve performance management system and achieve an average staff performance index of 90%
- Build staff capacity
- Strengthen staff welfare and achieve an average staff satisfaction score of 90%

3. Healthcare Financing

Strategic Objective: To achieve financial sustainability for Hospital operations.

Operational objectives

- Increase annual gross revenue by 10%
- Maintain operational costs below 80% of gross income
- Grow the Hospital surplus by 20% per year
- Achieve a debt-revenue ratio of 1-5
- Increase non-medical revenue by 5% per year

4. Technology and Infrastructure

Strategic Objective: To expand ICT and physical infrastructure to a level 5 hospital

Operational objectives

- Reorganise OPD
- Introduce critical care services
- Expand surgical services
- Increase operational efficiency
- Maximise Hospital and college branding and marketing
- Expand diagnostic services



5. Governance and partnerships

Strategic Objective: To strengthen governance structures and partnerships

Operational objectives

- Increase staff capacity through partnerships
- Reinforce partnership for resource mobilisation
- Drive implementation of the strategy
- Build governance structures
- Grow and sustain faith values
- Minimise risk exposure

6. College of Health Sciences

Strategic objective: To enhance the growth and sustainability of the college

Operational objectives

- Improve academic performance – achieve a mean score of above 80%
- Expand college programmes
- Enforce student mentorship
- Maximise collaboration and partnerships
- Enlarge college IT and infrastructure
- Intensify college fees collection



College of Health Sciences-September 2022 intake.





4.2. Implementation Matrix

Pillar	Strategic Objective	Operational Objective	Activities	Measure	Responsible	Time															
						2023	2024	2025	2026	2027											
						01	02	03	04	01	02	03	04	01	02	03	04				
Service Delivery	To deliver quality clinical services and compassionate patient experience	Maximize MCH services	Introduce maternity mother packs	Fully functional standalone maternity unit with adequate staffing	NOIC																
			Introduce maternal support group																		
			Separate maternity from NBU																		
			Recruit 1 obstetrician/ gynaecologist																		
				Procure three gynaecology examination couch		HRM															
				Recruit 2 clinical officers		Deputy CEO															
				Introduce MOPC, SOPC, POPC, high-risk maternal clinic, eye clinic, ENT clinic, Ortho/ physio clinic, palliative care, oncology clinic	Fully functional clinics	HRM															
				Separate paediatrics from medical/surgical department		Lead Clinician															
				Recruit 1 surgeon																	
				Conduct mentorship on use of ECG		HRM															
				Review and standardise the IPC and sterilisation policy	Audit report	Lead Clinician															
				Perform IPC departmental audit	HAIs report	Lead Clinician															
	Enhance IPC – Achieve zero HAIs	Increase patient experience; achieve a patient satisfaction index of above 90%	Procure an incinerator	Functional incinerator and macerator	Deputy CEO																
Procure a macerator																					
Designate a nurse for amenity services			Recruitment report	HRM																	
Establish a queue management system			Compliance to service charter	Deputy CEO																	
			Introduce admission packs		Nursing Officer /C																
			Review service charter	Patient satisfaction index	Deputy CEO																
			Conduct biannual patient satisfaction survey		Customer Care Officer																



Pillar	Strategic Objective	Operational Objective	Activities	Measure	Responsible	Time														
						2023		2024		2025		2026		2027						
						Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4			
Service Delivery		Expand Mother of Mercy services	Recruit a mortuary attendant	Revenue growth	HRM															
			Review the price list in line with competition and quality of service	Funeral service full package developed	Head Accountant															
			Purchase a hearse		Deputy CEO															
			Purchase tents, chairs and public address system for hire																	
Human Resource	Acquire, develop and sustain required skills and talents	Acquire and retain quality workforce	Conduct annual hospital staffing needs	Report recommendations implemented	HRM															
			Review staff salaries	Feedback questionnaires and reports																
			Develop suitable grading structure	Annual reports																
			Conduct job evaluation	Skills audit report																
			Establish a talent management programme	Approved programme																
				Approved appraisal tool																
				Training log and report																
				Performance review reports																
				Approved organogram																
				Establish a suitable performance-driven corporate culture																



Pillar	Strategic Objective	Operational Objective	Activities	Measure	Responsible	Time																					
						2023			2024			2025			2026			2027									
						Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4						
Human Resource	Acquire, develop and sustain required skills and talents	Build staff capacity	Conduct a training needs assessment	Training gap analysis report	HRM																						
			Develop staffing plan based on gaps	Training plan, logs and reports																							
		Strengthen staff welfare	Develop and implement staff training calendar																								
				Introduce and implement formal post staff induction feedback	90% staff satisfaction score	HRM																					
				Introduce a care for the careers program																							
				Conduct staff satisfaction survey																							
Healthcare Financing	To achieve financial sustainability of the hospital operations	Increase annual hospital gross revenue by 10%	Conduct direct marketing to targeted clients eg private insurance	Gross medical revenue	Head Accountant																						
			Increase NHIF subscriptions by 1,000	Number of NHIF and private insurance subscriptions																							
			Conduct feasibility study for new satellite services	Fully functional satellite clinic and pharmacy																							
		Maintain operational costs below 80%	Establish 1 satellite pharmacy																								
			Establish 1 satellite clinic																								
			Review finance controls	Review reports																							
	Grow hospital surplus to 20% annually	Review and map suppliers	Review and map suppliers	Stock reports	Head Accountant																						
			Achieve near-zero stock variances	Training logs and reports																							
			Train staff on budgets and stock management	Cost of operations																							
		Maximize the use of ambulance for patient referral	Feasibility study on solar power																								
			Develop price list for special clinics	Surplus trends																							
			Review commodity price list	Price List																							
Achieve and maintain zero stock outs			Maximize the use of ambulance for patient referral	Referral data	Head Accountant																						



Pillar	Strategic Objective	Operational Objective	Activities	Measure	Responsible	Time															
						2023			2024			2025			2026			2027			
						Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Technology & Infrastructure	Expand ICT and infrastructure to meet Level 5 requirements	Maximize hospital and college branding and marketing	Recruit a marketing officer	Brand awareness	HRM																
			Develop and implement a marketing plan	In dex	Marketing Officer																
			Conduct brand awareness survey																		
			Conduct reviews of marketing initiatives																		
	Expand diagnostic services		Create adequate space for culture and sensitivity	Upgraded diagnostics to meet Level 5 requirements	Lead Clinician																
			Acquire an automated chemistry analyser	Functional hub	CEO																
			Operationalise the PET scan		Deputy CEO																
			Acquire a dental X-ray machine (OPG)																		
			Upgrade to 4D U/S with Echo																		
			Acquire a mammogram machine																		
Governance & Partnerships	To strengthen governance structures and partnerships to drive strategy	Increase staff capacity through partnerships	Lobby for 20 seconded staff	Adequate staffing levels	CEO																
			Initiate mentorship and partnership on tele-medicine																		
		Reinforce partnerships for resource mobilisation	Establish a resource mobilisation function	Number of active partners	CEO																
			Establish a database of friends of the hospital																		
	Drive implementation of the strategy		Communicate hospital activities to friends of the hospital																		
			Conduct donor mapping	Submitted proposals																	
			Carry out annual funds drive																		
			Submit one proposal to 5 donors monthly																		
			Recruit a strategy officer	Strategy implemented	HRM																
			Form a strategy committee		CEO																
		Develop terms of reference for the committee																			
		Prepare and implement the board calendar			CEO																



CHAPTER 5

Monitoring and Evaluation

This Strategic Plan should not be thought of as a final statement, but rather as today's best ideas in view of today's realities. The future will be different; there will be new technologies, new laws, new threats, new opportunities and new crises, among other issues. It is essential that change is anticipated and allowed for as the plan is a "live" document.

This plan will be reviewed at least annually by the Board and Management teams, working with the consultants. The major input to the review should be briefings by staff and the consultants on various aspects of the situation analysis, especially changes in market demands, competition, stakeholder expectations, laws, economy, technology and patient care.

The planning team will then do a self-assessment of the situation (SWOT), planning assumptions and progress on key performance indicators. This work, combined with the staff briefings, will ensure that the team effectively updates the goals, objectives and strategies.

The following will be vital for the successful implementation of this Strategic Plan:

1. Board of Directors

The Board of Directors will oversee the Strategic Plan implementation process, including doing reviews during its quarterly meetings. To give it more focus and impact, the five-year Strategic Plan will be an agenda item in the full Board meetings to assess progress. If no progress is recorded, the Board should agree to review the plan and reach an agreement on the way forward.

2. Chief Executive Officer

The CEO is a key driver in the monitoring and evaluation of the implementation process. The CEO shall be concerned with the overall performance, noting and correcting deviations from the plan. Further, the CEO shall ensure that all the set objectives in the key areas mentioned are achieved within the stipulated time frames and be at the forefront to encourage and support all staff in the monitoring and evaluation processes. It is critical that the CEO always be on the lookout for external and internal factors that can hinder the organisation from achieving its



objectives, such as government actions and changes in the economic environment, and take appropriate action.

The CEO shall report the progress to the Board every quarter and seek their input in regard to any remedial measures necessary.

3. Consultants

An external consultant will conduct periodic evaluations of the plan implementation process on an annual basis. This evaluation will provide an independent, objective overview and advice on appropriate action.

5.1 Corrective Action

The Hospital operates in an ever-changing environment. Where targets are not achieved, corrective action may be taken to modify existing strategies. Corrective actions may include but are not limited to:

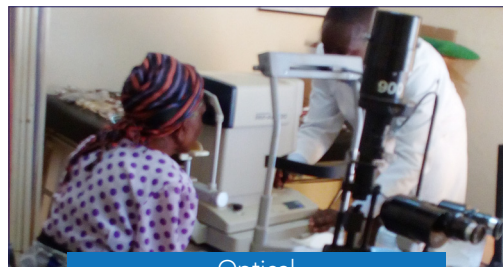
- Revision of strategic objectives and targets in light of changing circumstances.
- Mobilisation of additional resources.
- Review of implementation time frames.

The following issues are vital to the successful implementation of the Strategic Plan:

- Strategic Plan implementation should be an agenda item for staff and Board meetings.
- There should be an official handover of the Strategic Plan to a new Board. This will ensure continuity in implementation.
- Familiarisation with the Strategic Plan is key for all staff. They need to understand what is expected of them in the achievement of the set strategies and objectives.



New Born Unit



Optical





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