



*Systems approach to influencing health*

## Strategic Plan 2019-2022

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## Summary

Health Systems Management Association -was founded through collaborative efforts by individual health Managers and representatives of Kenyatta University, Kenya Methodist University and other stakeholders through support and guidance of MSH leadership development program. The representatives selected a working team that put together a constitution, registered the association and came up with this working document that covered 2014-2018. Several frameworks were considered, highlighting the gaps and opportunities that existed to meet the challenges facing health sector that included inadequate management and leadership competences, and generally lack of capacity to address the gaps in training, deployment and support of the leaders responsible to manage healthcare activities.

Over the years' poor management in the health sector has left it - riddled with high mortality and morbidity rates. There has been inefficiency, poor planning, bad decisions, little execution, inconsistent policies and laws, centralized decision making without mentioning corruption, poor governance and inadequate distribution of resources. Of concern -is the level/amount of responsibilities put on managers with minimal training on management? Unlike other professions, there exists no clear health manager support with doctors, nurses and other health care workers left alone to manage health. This calls for a different resolve by the health sector managers.

The first ever SP that run from 2013 to 2018 sought to establish the organization. The leadership through the able chair, Rachel Waireri-Onyango and her team focused time on establishing the structures and sensitize the sector on the need to professionalize healthcare management. This strategic plan seeks to operationalize and help the managers of Kenya realize the dream. This strategic plan establishes a foundation on which to build upon a formidable network of health managers with "a systems thinking". This strategic plan emphasis on HeSMA's core ideology that has established who we are, our vision, mission, and core values. We have presented an accurate analysis of health system in the region including the current dispensation processes and functions. We have outlined our sources of funds and matched the gaps with actionable plans to meet the needs in the health systems. The SP addresses the priority areas as outlined and has been identified focusing on comprehensive leadership and management sections aimed at improving health management, health information, cost containment and leveraging on multisectoral systems approach that is people centered.

Lastly, our strategic direction has well laid down objectives and activities that are specific to help us build the leadership and management competencies, mold and develop the 21<sup>st</sup> century healthcare managers and institutionalize the profession. The programs and projects are aimed at ensuring sustainability as we seek to open offices the larger East Africa region by 2022. This will be achieved through collaboration and sustained coalition building with like-minded organizations. This will ensure that we can accommodate their development and that each of our members will add value to the health system.

Prepared by

Editorial: Anne Mungai

### Abbreviations and acronyms

AGM	Annual General Meeting
CEO	Chief Executive Officer
CHAK	Christian Health Association Of Kenya
CIC	Committee on the Implementation of the Constitution
GDP	Growth Domestic Product
GOK	Government of Kenya
HeSMA	Health Systems Management Association
HSM	Health Systems Management
HSS	Health Systems Strengthening
ICT	Information Communication and Technology
KEMU	Kenya Methodist University
KHPF	Kenya Health Policy Framework
KIM	Kenya Institute Of Management
KMTC	Kenya Medical Training College
KNH	Kenyatta National Hospital
KPI	Key Performance Indicators
KU	Kenyatta University
MSH	Management of Science for Health
PPP	Public Private Partnership
SO	Strategic Objectives
SP	Strategic Plan
SWOT	Strength Weakness Opportunities and Threat
UNDP	United Nations Development Program

## 1. Introduction

Today HeSMA remains the only professional body for healthcare managers and institutions in the health sector. Augmented by its broad infiltrative growing membership, both individual and corporate, HeSMA continues to evolve as the premier organization for health manager capacity building and development. Aligned to regional health sector development frameworks, HeSMA's approach is anchored on adopting multisectoral and/or multidisciplinary collaborative partnerships. Towards exemplary success, HeSMA continues to transcend organizational and geographical boundaries to respond to the ever-changing dynamic needs of Health Systems Managers since inception in May 2013.

The purpose of this Strategic Plan is to build on the foundations and efforts laid down in the past 5 years. The plan provides a roadmap and strategy of implementation and establishment of structures, investments towards development of HeSMA. This strategic plan brings together information on our core ideology, strategic direction, implementation plan, and monitoring and evaluation plan.

## 2. Core ideology

### 2.1. Vision

To be an effective body of health systems knowledge, skills and practice that seeks to positively impact health care through quality leadership and increased recognition of the profession

### 2.2 Mission

Health Systems Management Association exists to:-

- Influence the utilization of systems approach in health service delivery
- Raise a generation of health system managers who champion for Health Systems Strengthening (HSS)
- Be an authority in the leadership, management and governance of health systems

### 2.3 Core values

HeSMA's core values are embodied in how we conduct business and interact with our members, partners and multi-stakeholders. We affirm and are committed to;

- Integrity- We advocate and emulate high moral conduct in all we do
- Diligence- We are focused, work hard and commit ourselves to tasks and responsibilities handed to us
- Development- We recognize learning is essential to our members' ability to innovate and continually improve ourselves, Health Systems Management profession, health sector and the organizations we work for

## 3. Analysis

### 3.1. Source of funding

The principal source of funding for the period that ended was membership subscriptions. The individual membership offers opportunity for participation and involvement of Health System Managers which in turn creates ownership and pride by the members. Core to this is a progressive value addition intended for individual members to sustain commitment and membership

subscription. There are different categories of membership with different levels of entry. Each member is entitled to certain benefits and privileges that commensurate with their level of training and certain obligations. We noticed that although this is core to fundraising for the organization the funds generated may not be able to run the affairs of the association in future. HeSMA has so far raised a total of 1,809,968 Kshs through the following streams (Members subscription 34%, Capacity Development programs 10%, Network and Partnerships 52% and Conferences and events 4%). The expenses for the same period exceeded the income by 27,080.00 Kshs. HeSMA is grateful to executive members and partners who contributed their personal funds as follows Dan Slipkovich Kshs 261,922.00, Ceci & Robert Tilley Kshs 98,000, Rachel Waireri Kshs. 20,000, Fredrick Kimemia Kshs 558,296.00 that went into financing rent and capacity development programs.

<b>HeSMA Financial Statement (Kshs)</b>	
<b>Period May 2013-Oct 2018</b>	
<b>Beginning balance</b>	0
<b>Income</b>	
<b>Membership Subscription</b>	614,050.00
<b>Capacity Dev Program</b>	175,700.00
<b>Network &amp; Partnership</b>	938,218.00
<b>Conference and Events</b>	82,000
<b>Total</b>	<b>1,809,968.00</b>
<b>Total expenditure</b>	
<b>Office rent</b>	555,721.00
<b>Exchange programs</b>	365,239.00
<b>Board &amp; Committees</b>	77,210.00
<b>Capacity Dev Programs</b>	305,845.00
<b>Secretariat operations</b>	300,533.00
<b>Payroll/Admin</b>	232,500.00
	<b>1,837,048.00</b>
<b>Ending Balance</b>	(27,080.00)

Corporate members were not pursued although they form a basis for expanded opportunities for the association to finance capital development, annual conferences and running of programs that have a bigger budget. So far MSH is the single member under this category. World-reach corporate members and partner organizations provide opportunities for organizational growth and expansion, and for conference and training. Corporate memberships could also further their business agenda and provide practical solutions to health care sector while establishing partners through networking.

HeSMA need to explore raising funds through donors and development agencies to cater for the gap between the strategic plan and the activities in it. In this strategic plan there is a focus to conduct stakeholder mapping and strategy to consolidate efforts towards financial stability. The Board will lead in this plan where the target will be raising 20Million in a year towards institutional advancement and programs delivery.

Other areas that have been suggested beyond fundraising from donors are;

- Registration of a business arm of the association that will provide (near free) consultancy services for institutions, countries and governments.
- Endorsement, a one stop shop for health. We could offer health solutions in form of products and services.
- Offering professional short courses to health care managers.
- Research and scholarship programs
- Certification programs for healthcare managers
- Roll out of events and conferences

### 3.2. Use of finances

Finances will be used for the purposes of enhancing the capacity of health and that of the members based on the laid down finance and human resource policies.

### 3.3. Identity

HeSMA has taken a different approach from other associations. HeSMA exists to add value to the members and the health managers in Kenya. First HeSMA wants to be known as the only association with a pool of managers that any institution should hire/engage to improve health and achieve its purposes. Corporate members will be enlisted based on the value they add to the healthcare professions, partnership are forged based on the shared interests and passion in health system management.

### 3.4. The need of health industry

Membership needs is core and our meeting and responding to their needs is our priority. A model where we match the quantity of our individual members and that of corporate needs of health care industry provides avenues for HeSMA to not only identify opportunities but also mold solutions at all levels of health and systems.

### 3.5. Mandate

Our mandate is to introduce and support a systems thinking to health management. Our membership is our business (both at individual and at corporate level). We exist to help our members respond to health needs, measure capacity to improve, promote, finance, and sustain health ultimately reducing health inequity and securing health for all using local solutions and strategies.

### 3.6. Collaboration/Endorsement/Alliances

- Regional:** We are leading to strengthen diversity in healthcare leadership enhancing health systems management and partnership while sustaining the regional context. In this dispensation HeSMA will focus on recruiting members from the regionals within low and medium income countries. We have so far established links with local and regional organizations, Ministries of Health, Universities colleges.
- Global:** In the period 2013-2018 HeSMA established working relationship with organizations beyond our borders. This included Management of Sciences in Health, Give back Global, Northeastern State University, Health Systems Global, American College of Health Executives and International Hospital Federation. HeSMA has countries to engage and will establish partnerships with organizations that have international mandate in the areas of pharmaceutical, development, research and Health care provision on matters touching health care, Peer-based training and mentorship, institutional management, volunteer management, database management, recruiting, marketing, starting health ventures, health care

management, capacity building, health systems strengthening, African health systems, international volunteerism, social health entrepreneurship and franchising.

#### **4. Governance**

HeSMA highest Authority is the AGM consisting individual and corporate members that are eligible to make decisions for the Association. The AGM provides oversight to the Board members and the broad mandate. They also maintain the identity of the association. The AGM meets every year during the Annual Congress for Health System Managers. The board constitutes seven members with varied background who also provide leadership and guidance to the secretariat. Three of the board members are nominated and democratically elected during the AGMs by members and are appointed by the board based on the competence in as directors. In the period 2018-2022 the focus will be to reconstitute the board to be as effective as possible. The priority of the interim board is to enhance capacity for nomination and appointment of the operating board.

The management of the association continues to rests on the CEO and his/her staff who are responsible for the day to day running of the association. The CEO assumes the responsibility of the secretary once the board is constituted or reconstituted.

#### **5. Work Force**

Health workforce is the largest in the industry and takes about a fifth of the GDP. In Kenya there exist 33 cadres each with a different professional status and subscribing to specific code of practice. Not all health care staff can effectively manage health and that's the reason behind the reforms that seek to ensure that the different cadres are harnessed and coordinated to achieve one goal. There exists competition among the different cadres and especially when each demands to be felt as the most important in the workforce.

Prudent management practices that understand or borrow a lot from different professions are the way to go. Individuals with good leadership and management skills must be identified and developed so that they can specialize in health management. In this line, HeSMA exists to help the health workforce produce their own to manage the rest. HeSMA membership comprises of Doctors, Nurses, Clinical Officers, Laboratory Technologists, Pharmacists, Health records, information officers, Human resources managers, accountants/health economists etc. with added training in management as enshrined in the constitution.

#### **6. Methods of Work/Scope**

We share current information, develop the knowledge, improve skills through mentorship, conduct health systems research, provide networking opportunities, regulate health management and advocate for better standards in health sector both in the public and private environment. There is focus too on other forms of communication. In this strategy we shall focus on internet based communication strategies and short text messaging to enhance our traditional ways of communication. Later in the strategy implementation the board will lead in developing a HeSMA marketing and communication strategy.

The geographical spread of HeSMA work is regional with a target population of low and middle income countries.

## 7. The SWOT analysis

### 7.1. Strengths

HeSMA has attracted committed and professional core steering committee set up by a governing constitution that spells out how the association is run.

Other strengths include

- Strong Public Private Partnerships including linkages with training institutions such as Kenyatta University, Kenya Methodist University, Strathmore University, Moi University, African Nazarene University and Kenya Medical Training Colleges, School of Government, Northeastern State University, etc.
- MOU with international and local organizations ABMA UK, Give Back Global and Northeastern State University and currently in negotiation towards a working partnership with International Hospital Federation
- Profound interest and goodwill from committed partners such as Ministries of Health (MOH) in Eastern and Horn of Africa, Management Sciences of Health (MSH), Kenya Institute of Management (KIM), pharmaceutical firms etc.
- Affordable membership registration fees
- Certification on membership registration
- Credentialing of healthcare managers as part of professional development based on
- Health sector environment promotes membership selection diversity i.e. there is a pool of several potential members from multiple disciplines e.g. nursing, health systems management, medicine, pharmacy etc.
- Established office/headquarter premise
- Easy- to- access updated HeSMA website
- HSM which includes HSS is currently the “in thing/buzz word”
- Increased country level and regional visibility through attendance of various forums
- Membership drawn from larger Eastern Africa

### 7.2. Opportunities

HeSMA has an opportunity to influence Health sector through her membership. As regional professional bodies seek to recruit professionals to manage the health sector, HeSMA is the professional body of choice that will bring together managers who have specialized in Health System Management at all levels. There is need to professional health sector management and leadership among the countries where we draw our membership. South Sudan, Ethiopia, Somalia, Somaliland and Eritrea are in dire need of professional healthcare leaders to assist in designing new country level healthcare systems.

We need to support the regions and counties within countries within low and medium income countries to come up with definite systems that will ensure financing and delivery/access of quality healthcare services is assured through systems and offices like EAC, and commissions and health ministries.. The system has to ensure that health is cost effective, affordable and reasonable first. Health care must be prioritized to ensure that what is to be financed relieves them these monies for other economic improvement investments. World Bank and WHO has put more focus on what type of health care should be delivered by smaller governments. This will be critical as we move towards universal health coverage (UHC).

Primary health care that includes preventing health problems and promoting health and wellness could be Key. Financing the type of health that reduces expenditure on health is probably the best strategy. Passing bills that promotes health and prevents diseases should be the point of focus. Within the frameworks available internationally we have treaties and conventions that tie us to certain deliverables (Rome 2003, Paris 2005, Accra 2008, and Busan 2011).

The region is in dire need for modernization and adoption of ICT based better and efficient equipment/supplies and quality health care. There is a lot of interests in investments in infrastructure development, health insurance and an expansion of workforce for health. Health System approach is both an efficient but also sustainable method of re-looking at the health reforms in the region.

Training and capacity enhancement of healthcare managers then becomes our single most important priority to ensure we put healthcare governance, leadership and management in able hands. A good example is Rwanda whose health managers/administrator has been given a period of 2years to attain special training in health systems management through a policy notice.

Kenya, Uganda and Rwanda are considering implementing a scheme of service that will see to it that from Tier 2 to the Permanent Secretary/, all managers for health must be specifically trained to run health sector and must commit substantial time in management. HeSMA is participating in development of the scheme of service in collaboration of other partners and the ministries of health and the public service in Kenya and have had discussions with Uganda, Tanzania and Somalia/Somaliland regarding the same. Other opportunities include:-

- Exponential growth inevitable due to widely dispersed legible potential members. We have already established an office with interim officials for Somalia/Somaliland.
- Current viable membership is not only in Kenya but spans across Eastern Africa, and is bound to infiltrate even beyond
- established partners/collaborators in Europe, USA, Australia and South America Showcasing/visibility HSM best practices and systems thinking through media, conferences, capacity building and publications

### 7.3. Weaknesses

- Limited financial resources
- Key players currently exhibit limited understanding and/or appreciation of Health Systems Thinking
- Core steering committee members have competing employment priorities

### 7.4. Threats

- Resistance hence lack of support from other existing health disciplines and associations
- Members from diverse healthcare bodies and professions which may be governed by divergent policies
- Lack of human resource; core steering team bear individual employment commitments

## 8. Strategic Direction

### 8.1. Strategic Planning Process

This Strategic Plan has been developed by the Strategic Planning Steering Committee through a collaborative consultative process. As a result of the inclusive process, an authentic roadmap which not only embraces the membership but also holds them responsible and accountable to our core values emerged. Further this is based on a critical evaluation of the 2013-2018 Strategic Plan. In addition to

conducting a membership review and SWOT analysis, the strategic planning methodologies were guided by the following questions;

- What do we envision for HeSMA beyond 2018
- What are our specific strategic directions?
- Where should we focus our energies and resources?
- So far what are the HeSMA strengths, weaknesses, opportunities and threats ( refer 7 above)
- What are the needs of HeSMA members?

Based on the findings, Strategic Objectives (SO) and their Key Performance Indicators (KPI) were established. Ultimately, this final strategic plan will be shaped by broad intricately intertwined input from all segments of the HeSMA membership.

## 8.2. Strategic Objectives

Our objectives are meant to improve and sustain health through a systems approach. They are:-

1. **Strategic Objective 1:** Professionalization of healthcare leadership, management and governance
2. **Strategic Objective 2:** Sector and Personal Capacity Development
3. **Strategic Objective 3:** Advocacy, Inclusion and Policy Development
4. **Strategic Objective 4:** Structures to support institutionalization of leadership, management and governance

### 8.3.1 Strategies priority areas, activities

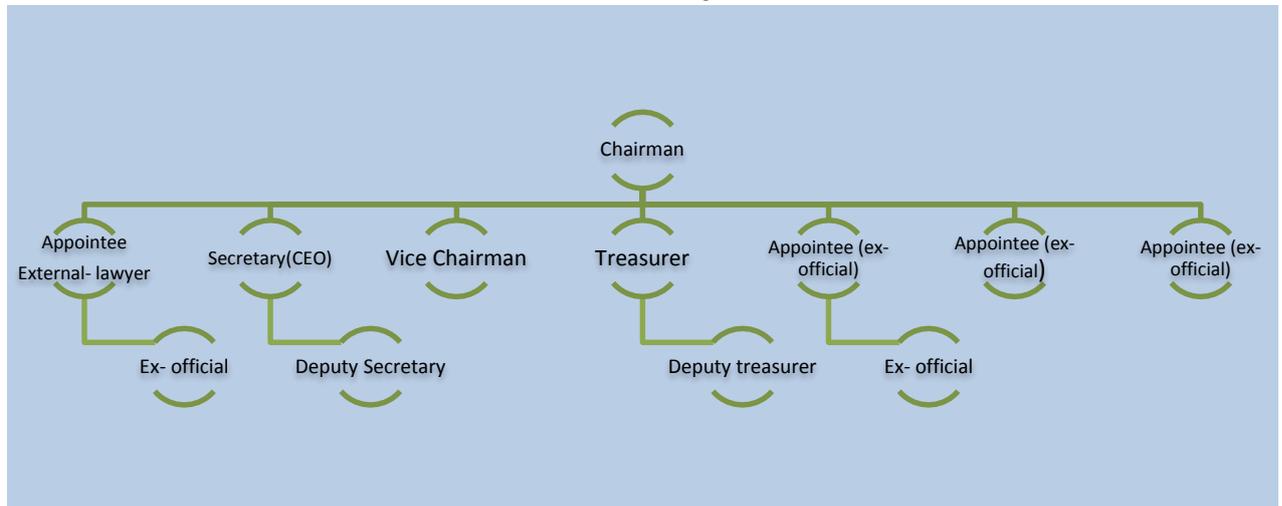
The strategies and activities carried out by HeSMA based on the objectives are:-

	<b>Strategic Objective</b>	<b>Activities</b>
Strategic Objective 1	Professionalization of healthcare leadership, management and governance	a) Conduct sector wide health leadership, management, governance needs assessments b) Development of management and leadership competencies c) Implementation of Guidelines on Credentialing and certification in health sector d) Review and adoption for implementation of MoH Draft Scheme of Health Sector Management e) Implementation of a reward schemes including special awards for healthcare managers. f. Development of the International Journal Of Health Management and Research
Strategic Objective 2	Sector and Personal Capacity Development	a) Develop and provide innovative short courses to healthcare leaders in health sector b) Coaching and mentorship programs for healthcare managers c) Career guidance and personal development d) Provide scholarship programs for Masters/PhD and other programs

		<ul style="list-style-type: none"> <li>e) Support curricula development, review and enhancement of academic programs in healthcare management</li> <li>f) Exchange programs for healthcare managers</li> </ul>
Strategic Objective 3	Advocacy, Inclusion and Policy Development	<ul style="list-style-type: none"> <li>a) Constitute a technical working group (TWG) on health sector policy and development</li> <li>b) Organize events and programs for advocacy</li> <li>c) Research and development programs in health systems</li> <li>d) Membership recruitment from the region</li> <li>e) Establish a cadre pertinent to health and recognizable within the stakeholders(distinguish from administration)</li> <li>f) Implementation of code of practice</li> <li>g) Realization of a scheme of service for Health Systems Managers</li> <li>h) Regulate, discipline, reward, sustain the Profession</li> </ul>
Strategic Objective 4	Structures to support institutionalization of leadership, management and governance	<ul style="list-style-type: none"> <li>a) Stakeholders mapping and development of communication and marketing strategy.</li> <li>b) Establish linkages and collaborators</li> <li>c) Establish technical working groups on each of the pillars of health system</li> <li>d) Constitute an operational board with functional committees</li> <li>e) Establish a secretariat and a budget</li> <li>f) Establishment of Institute of Certified Health systems Managers (ICHSM)</li> </ul>
Strategic Objective 5	Fundraising	<ul style="list-style-type: none"> <li>a) Develop innovative programs to raise targeted funds including events (60%)</li> <li>b) Recruit professional members/organizations (15%)</li> <li>c) Donations and endorsements (25%)</li> <li>d) Consultancies</li> </ul>

## 9. Institutional Framework

By stepping up its current activities and developing new ones, HeSMA will continue to increase its resonating presence, under the governance and leadership of its National Advisory and Supervisory Board and Secretariat, which are constituted as shown in Fig 1&2.



**Figure 1: HeSMA National Advisory and Supervisory Board**



**Figure 2: HeSMA Secretariat**

### Notes

- a) CEO responsibility roles; advocacy, fundraising, collaborations and partnerships.
- b) Director of Membership, directly supported by Vice Chairman
- c) Advocacy Coordinador reports directly to CEO

## 10. Implementation Plan

Oversight for the implementation of this strategic plan will be provided by the National Advisory Board and the Secretariat, under clearly defined terms of reference. Implementation for this strategic plan will be guided by annual HeSMA work plans and budgets (Annex 1).

## 11. Monitoring and Evaluation Plan

Given the exponential growth of the Association and the urgency of implementing activities proposed in this plan, it is imperative that a robust M&E system be put in place to track performance and undertake corrective action where necessary. The National Advisory Board and Secretariat will provide overall stewardship in the monitoring and evaluation of annual work plans, guided by predefined targets and indicators. The 3 directorates i.e. Finance and Administration, Capacity Building and Membership will take the operational responsibility for monitoring and evaluation at all levels. HeSMA's performance will be measured through monitoring performance/output and cross-cutting quality indicators. Indicator performance will be subjected to mid & end-term reviews and subsequently disseminated to HeSMA members, multi-stakeholders and partners. Our Strategic Objectives are aligned to Key Performance Indicators (KPI) as shown in Table 1.

*Table 1: Key performance indicators*

<b>SO No:</b>	<b>Strategic Objective (SO)</b>	<b>Key Performance Indicator (KPI)</b>
1	Professionalization of healthcare leadership, management and governance	formal recognition of Health Management as a profession through a policy
2	Sector and Personal Capacity Development	#4500 healthcare managers recruited. (10% certified as fellow and 30% as Diplomate)
3	Advocacy, Inclusion and Policy Development	#Effective advocacy, policy and inclusion committee, #Lobbied policies # Scheme of service #Institute of Certified Healthcare Managers
4	Structures to support institutionalization of leadership, management and governance	Presence of #operational board, secretariat. Stakeholder engagement plan & Marketing and Communication strategy
5	Generate adequate funding	Raise 20million Kshs per year

*Annex 1: Implementation Plan*

Implementation Plan					
	Strategic Objectives	Expected Outcome	Key Performance Indicators (KPI)	Activities	Start date
Objective 1	Professionalization of healthcare leadership, management and governance	Recognized profession	A recognized profession	a) Conduct sector wide health leadership, management, governance needs assessments	Aug 2019
				b) Development of management and leadership competencies	Oct 2019
				c) Implementation of Guidelines on Credentialing and certification in health sector	Jan 2019
				d) Review and adoption for implementation of MoH Draft Scheme of Health Sector Management	June 2019
				e) Implementation of a reward schemes including special awards for healthcare managers	Oct 2019
				f) Development of the International Journal Of Health Management and Research	Dec 2019
Objective 2	Sector and Personal Capacity Development	Strengthened healthcare managers and functional healthcare system	existence of a career and systems models of development	a) Provide training and professional development courses to healthcare managers	On-going
				b) Provide Coaching and mentorship activities	Jan 2019
				c) Certification and credentialing of healthcare managers	Jan 2019

				d) Provide CPD Programs, symposia, conference etc.	On-going
Objective 3	Advocacy, Inclusion and Policy Development	Effective policies that support professionalization and regulation of healthcare`	Effective advocacy, policy and inclusion committee, #Lobbied policies # Scheme of service #Institute of Certified Healthcare Managers	a) Establish an advocacy/lobbying and inclusion committee with TOR	Mar 2019
				b) Engage the stakeholders as regards the policies	June 2019
				c) Establish priority and develop a strategy/plan as regards to the following policies	June 2019
				d) Implement Scheme of service for healthcare managers	Jan 2020
				e) Health Act 2017 and other laws harmonization with different local and regional frameworks	Jan 2020
Objective 4	Establish Structures to support institutionalization of leadership, management and governance	Structures at board and secretariat	Presence of #operational board, secretariat. Stakeholder engagement plan & Marketing and Communication strategy	a) Conduct a stakeholder analysis	On-going
				b) Appoint 2 more board of Directors	On-going
				c) Nominate and appoint members in the following governance committees; Advocacy and inclusion, Capacity development and fundraising committees	On-going
				d) Hold AGM meetings Oct 2019, 2020, 2021, 2022	ongoing
				e) Develop marketing and communication strategy/plan	Dec 2020
Objective 4	Generate adequate funding	Adequate funds to finance strategic plan 2019-2022	Raise 20million Kshs per year	a) Voluntary contributions/Sponsorship	On-going
				b) Grants proposals development	Mar 2019
				c) Roll out projects and programs.	Jan 2019
				d) Merchandizing	On-going

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