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ELEVENTH PARLIAMENT – FOURTH SESSION – 2016

THE DEPARTMENTAL COMMITTEE ON HEALTH

REPORT ON THE CONSIDERATION OF THE PETITION REGARDING  
ALLEGED IRREGULARITIES AT MEDANTA AFRI-CARE GROUP OF  
HOSPITALS, A PRIVATE HEALTH FACILITY

CLERK'S CHAMBERS  
DIRECTORATE OF COMMITTEE SERVICES  
PARLIAMENT BUILDINGS  
NAIROBI

AUGUST, 2016

*Paper laid  
By Hon R. Nyamoi,  
Chair of Health  
Committee on  
Thurs 11/8/16*

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## LIST OF ACRONYMS

ASD	Autism Spectrum Disorder
BMA	Bone Marrow Aspiration
BDS	Bachelor of Dental Surgery
CA	Carcinoma
CCTV	Closed Circuit Television
CEO	Chief Executive Officer
CT	Computerized Tomography
DDA	Dangerous Drug Act
DVT	Deep Vein Thrombosis
ENT	Ear Nose and Throat
FRCR	Fellow of the Royal College of Radiology
GI	Gastrointestinal
HR	Human Resource
IMRT	Intensity Modulated Radiation Therapy
KMPDB	Kenya Medical Practitioners and Dentists Board
KNH	Kenyatta National Hospital
MBBS	Bachelor of Medicine Bachelor of Surgery
MBChB	Bachelor of Medicine Bachelor of Surgery
MD	Doctor of Medicine
MRI	Magnetic Resonance Imaging
NHIF	National Hospital Insurance Fund
OGD	Oesophagogastroduodenoscopy
PET	Positron Emission Tomography
TLIF	Transforaminal Lumbar Interbody Fusion
TRM	Thika Road Mall
USD	United States Dollar
VSD	Ventricular Septal Defect

## **CHAIRPERSON'S FOREWORD**

The Petition by Mr. Brian Onyango regarding alleged irregularities at Medanta Afri-Care Group of Hospitals, a private health facility was tabled before the House pursuant to Standing Order No. 225 (2) (b) by the Hon. Justin B. N. Muturi EGH, MP, Speaker of the National Assembly on behalf of the petitioner on 8<sup>th</sup> March, 2016.

In considering the Petition, the Committee undertook an inspection visit to the Medanta Afri-Care Group of Hospitals on 28<sup>th</sup> April, 2016 in order to familiarize itself with the situation on the ground. The Committee further held Sittings on 19<sup>th</sup> April, 5<sup>th</sup> May, 12<sup>th</sup> May and 14<sup>th</sup> June 2016 where it received evidence from the petitioners, the Principal Secretary Ministry of Health, the Ag. Chief Executive Officer, National Hospital Insurance Fund (NHIF) and the Chief Executive Officer, Kenya Medical Practitioners and Dentists Board.

The Committee is thankful to the Office of the Speaker and the Clerk of the National Assembly for the logistical and technical support accorded to it during its Sittings.

On behalf of the Committee, and pursuant to Standing Order, 227 it is my pleasant duty to table in the House the Report of the Departmental Committee on Health on its consideration of a on the consideration of the petition regarding alleged irregularities at Medanta Afri-Care Group of Hospitals, a private health facility

**THE HON. RACHAEL NYAMAI, MP**  
**CHAIRPERSON DEPARTMENTAL COMMITTEE ON HEALTH**

## EXECUTIVE SUMMARY

The purpose of this report is to consider and respond to the prayers by Mr. Brian Onyango regarding alleged irregularities at Medanta Afri-Care Group of Hospitals, a private health facility'. The Committee met with the Petitioner, Africare Ltd, Ministry of Health and Kenya Medical Practitioners and Dentists Board.

The Committee found that:

- i. The facility was registered in different names under several agencies as follows: At the Registrar of Companies, it is registered as (Afri-Care Limited); At the Kenya Medical Practitioners and Dentists Board, it is registered as (Afri-Care Ltd Hospital); At the NHIF, it is registered as (Medanta Afri-care Ltd). This was noted to be causing confusion on the actual identity of the facilities. It was therefore not clear which entity takes legal responsibility in case of medical negligence or such other claims in the satellite facilities.
- ii. The facility was found to be motivated by profits and not health care provision. This was evidenced by the list of staff provided by Medanta Afri-Care, sales department constituted the largest department. Further, it was found that a high number of police officers underwent MRI scans which were unnecessary and a high number of referrals to India. Sales target were also set for the department implying that profit, not healthcare, was the major motivation at the facility, raising a serious ethical concern.
- iii. The investigation and the submission by the Kenya Medical Practitioners and Dentists Board were found not to have been objective as they contained contradictions and under-reporting from what the facility had submitted to the Committee. The Committee observed that failure of the Board to carry out its mandate as a regulatory body was exposing Kenyans to health risks. There was therefore need for the Board to take its mandate seriously as it is the regulatory body mandated to ensure that Kenyans receive the highest standards of health care.

## **1.0 PREFACE**

On 8<sup>th</sup> March, 2016, a Petition was tabled before the House pursuant to Article 119 (1) of the Constitution and Standing Order No. 225 (2) (b) by the Hon. Justin B. N. Muturi EGH, MP, Speaker of the National Assembly on behalf of Mr. Brian Onyango regarding alleged irregularities at Medanta Afri-Care Group of Hospitals, a private health facility;

The House pursuant to Standing Order 227 referred the Petition to the Departmental Committee on Health for preparation of the Report and reporting to the House within 60 days as set out in Standing order no 227(2).

### 1.5 ADOPTION OF THE REPORT

We, the Members of the Departmental Committee on Health have, pursuant to Standing Order 199, adopted this Report on the Petition by Mr. Brian Onyango regarding alleged irregularities at Medanta Afri-Care Group of Hospitals, a private health facility and affix our signatures (**Annex 1**) to affirm our approval and confirm its accuracy, validity and authenticity today 5<sup>th</sup> July, 2016.



## 1.6 LIST OF RECOMMENDATIONS

As to the Prayer that the Committee inquires into, investigates and reports its findings to the National Assembly the Committee recommends:

- i. Africare Ltd should with immediate effect ensure that proper registration with the relevant authorities is done to ensure Kenyan citizens to be aware of its real identity. This should also be reflected on the signage displayed in all its facilities to reflect the registered names by the Registrar of Companies and the Kenya Medical Practitioners and Dentists Board.
- ii. The Ministry of Health as a matter of urgency should come up with a policy on international referrals to protect Kenya's national interest since medical tourism was a key pillar of the Indian economy. The Ministry should report back to the Committee within 90 days upon tabling of the report.
- iii. Medanta Africare Limited should put its expansion plans on hold until all issues of concern raised are addressed. These concerns include; staffing issues, refocusing on health provision as opposed to sales targets and profit motivation. The Medical Board should cease with immediate effect to issue licences to the facility until these conditions are met;
- iv. The Kenya Medical Practitioners and Dentists Board reports back to the Committee on the implementation status of its Preliminary Inquiry Committee report findings and resolutions concerning Medanta Africare Limited within 30 days from the tabling of the Report.
- v. The Kenya Medical Practitioners and Dentists Board should develop amendments to the KMPDB Act and provide for indemnity covers for the health workers and the hospitals.
- vi. The Ministry of Health should ensure that it builds capacity of the Kenya Medical Practitioners and Dentists Board as a regulatory body. This is to ensure that it carries out investigations objectively and effectively to protect the lives of Kenyans.
- vii. On issues regarding termination of service for the petitioners, the Committee could not pronounce itself on this matter as there was case going on in the Law Court between the employees and Medanta Africare Ltd.

## 2.0 BACKGROUND

The Petition by Mr. Brian Onyango regarding alleged irregularities at Medanta Afri-Care Group of Hospitals, a private health facility was committed to the Departmental Committee on Health on 8<sup>th</sup> March, 2016 to consider and report back to the House pursuant to Standing Order 227.

The Petitioner alleged that Medanta Africare group of Hospitals, a private Health Facility had been establishing hospital units across the Country using local medical experts. He alleged that the hospital instituted criminal charges against the local staff and subsequently terminated their services. The petitioner further alleged that the hospital had been referring patients to its parent Hospital, Medanta India, for ailments that could be treated locally, with the referring Doctors being paid USD 2000 for the referrals. The petitioner, in addition alleged that the objective of such referrals was to defraud the National Hospital Insurance Fund (NHIF) and unsuspecting patients in medical expenses.

The petitioner prayed that the National Assembly investigates the matter and recommends appropriate action against the Health facility and its accomplices.

### 3.0 EVIDENCE

#### 3.1 Evidence from the Petitioners

Ms. Margaret Mburu and Mr. Brian Onyango, the petitioners, appeared before the Committee on Tuesday, 19<sup>th</sup> April, 2016 and informed the Committee as follows, that:

##### Background

1. Ms. Margaret Mburu was a registered nurse by training with specialization in Endoscopy. She was a former employee of the hospital where she was hired in 2014 as an Endoscopy Unit Manager having previously worked at Nairobi Hospital for 7 years.
2. Mr. Brian Onyango was a Housekeeping staff hired in 2013 and initially deployed under the supervision of Ms. Mburu in the dialysis unit. He was later transferred to the theatre as a cleaner. There were only two members of staff manning the dialysis unit at that time.
3. Medanta Africare used police to arrest staff after stage-managing crimes against them and eventually dismissing staff. They used the police to institute criminal charges and despite the real criminals being arrested they collude with the same police officers to uphold charges.
4. In November 2015, the Colonoscopy machine was stolen after which Mr. Onyango was arrested as the main suspect and detained at Muthangari Police Station. Ms. Mburu was later arrested and detained in police custody on the same allegations.
5. The alleged stolen machine was a refurbished one and was valued at Kshs 700,000, however hospital management inflated its value while providing information on the machine's worth at Kshs. 3.5 million. The inflation was meant to ensure that the highest bond possible given. The bond was set at Kshs.500, 000 and Kshs. 1,000, 000 for Ms. Mburu and Mr. Onyango respectively after which they were released on paying. Mr. Onyango was however held at the Industrial Area Remand prison for a month until he was able to raise the bail. They were also dismissed from work pending investigations.
6. Mr. John Owire, a former member of staff fired for theft confessed to having stolen the colonoscopy machine. On 13<sup>th</sup> November of 2015, the suspects were arraigned in court and charged with stealing of the colonoscopy machine. Despite the hospital having evidence after identifying the real suspect through the Closed Circuit Television (CCTV) footage, the hospital was yet to drop the charges against Mr. Onyango and Ms. Mburu.

##### Medical Malpractices at the Hospital

7. There was a desk specifically for medical evacuations of patients to their mother hospital Medanta India. Patients were normally made to believe that the procedures they were referred for were not available locally or were poorly done. Examples of these were; hip replacement and kidney transplant. The Doctors are allegedly paid about USD 2000 once they facilitate evacuations to India. The Hospital also paid commissions to people who referred patients to the facility. There was specific a desk manned by a member of Staff a Mr. Aggrey who was allegedly paying commissions on Saturdays via the provided Mpesa number - 0721 332 048.

8. Patients were forced to have unnecessary laboratory tests and procedures such as Computerized Tomography (CT) scans and Chest scans for simple ailments such as Flu. Doctors were allegedly paid commissions for ordering tests to be done on patients.
9. Some drugs were commonly abused due to their high cost and to ensure sales target were met. Such drugs included; multi-vitamins, Pabrinex and Venofer injections. The Director of Clinical Services, Dr. Khushal Singh was allegedly administering Venofer and Vitamin D injections unnecessarily. He was also allegedly subjecting women patients over 40 years of age to have unnecessary hormone profiles. The hospital was allegedly conducting HIV screening without proper procedures and counseling followed as there was no certified counsellor in the hospital.
10. The Hospital at the time did not have a qualified staff to manage the Endoscopy unit which was being managed by nurse aids/technicians. The procedures in this unit are done under sedation with drugs categorized as dangerous under the Dangerous Drug Act (DDA).
11. Some of the hospital's Satellite clinics were run by Clinical Officers who posed as Doctors, the hospital lacked critical staff such as the head of nursing services. Further, it did not have fluid charts for sensitive areas like dialysis unit. In addition, it did not conduct routine checks for electrolytes in the dialysis unit, had no emergency trolleys and had no functional crash cart. Important drugs were also not available like insulin and potassium chloride despite having an active dialysis unit. Furthermore, the hospital had no working bio-hazard ventilator for mixing oncology drugs thus exposing the workers and patients to the dangerous fumes.
12. The NHIF has signed a pact for patients' evacuations for treatment abroad thereby fleecing the public.
13. During a police camp held in September, 2015 all the police officers were ordered for MRI tests and the hospital was paid about Kshs. 11 million by NHIF as claims for services offered during the camp. Senior police officers had also benefited fraudulently from the scheme as they were referred to Medanta India for treatment of conditions that could be treated locally, with the NHIF covering the bills. The hospital also inflated patient's bills for NHIF patients especially for theatre cases where there were no fixed charges.
14. The Hospital allegedly acquired vaccines for free from government facilities and sold them to patients. A cited example was the Yellow fever vaccine that was sold at Kshs. 3000 and polio vaccine that is sold at Kshs. 1000.
15. The hospital had installed CCTV cameras that view patients while undergoing treatment. An example was the dialysis unit where the cameras were used to view the number of patients for logistics purposes thereby breaching the patients' privacy.
16. Some members of staff were operating with expired work permits or serving in positions not provided for in their work permits.
17. There was no disciplinary procedure in place as part of human resource policy. The Disciplinary committee usually made unilateral disciplinary decision. For instance, on 24<sup>th</sup> October 2015, a memo was issued by the Chief Executive Officer (C.E.O) Mr. Anil Maini through the Human Resource Manager that all staff were to extend working hours. Being a Saturday they were supposed to work until 1 p.m, however the memo stated that they should leave at 5pm to compensate for business lost on 20<sup>th</sup> October, 2015 which was a public holiday. Those who defied the order were issued with a show cause letter

from the Human Resource (HR) Department. The Hospital also reduced staff salaries against the human resource practices.

18. There was intimidation of staff by the HR Manager for example in December 2015 all the cleaners were sacked to pave way for a contracted company and started re-employing them after the petition was read in Parliament.

### **3.2 Evidence from the Medanta Afri care Group of Hospitals Management**

The Committee conducted an inspection visit to the Medanta Afri-Care Hospital on Thursday, 28<sup>th</sup> April, 2016 where it inspected the facility and thereafter held a meeting with the hospital management.

The Committee further invited the President and CEO of the facility, Mr. Anil. K. Maini for a follow up meeting which was held on 12<sup>th</sup> May 2016 in Parliament. Mr. Anil Maini informed the Committee that:

1. Medanta Africare Group of Hospitals was established 4 years ago in Kenya and was part of a hospital group from India, Medanta Africare India.
2. The Hospital was established as a diagnostic centre with the high end imaging, latest technology in Magnetic Resonance Imaging (MRI), Ultrasound, mammograms and laboratory among others. It had expanded its services to include: pharmacy, dialysis Centre, and a day care diagnostic Centre.
3. The Hospital was affordable, ethical and clinically sound and offered services to patients from all sections of society. The facility also served the Civil servants under the NHIF capitation programme with a rate of Ksh. 1,200 per annum received for a family of four (4).
4. The Hospital conducted free health camps for instance; in Nyeri Town Constituency in collaboration with the area Member of Parliament and with the Kenya Police and their families. The Hospital had further worked with the Kenya Police Service Commission to diagnose 250 police officers from all over the country living with gunshot wounds-free of charge (consultation and medicine was free however MRIs were charged).
5. The Hospital had 14 clinics spread in Nakuru, Kisumu, Mombasa, Thika, and seven (7) in Nairobi. It was undertaking an expansion programme to create its presence in all major towns and in all the counties. The aim was to have 20 more clinics by December 2016. The anticipated clinics would be full clinics, with a doctor, clinical officer, pharmacy, laboratory, and optometrists and with visiting and senior specialists attending to patients.
6. At the time of the meeting, the satellite clinics were offering various services and with staff from various cadres running them. For instance, the clinic in Thika was only operating a laboratory, Mayfair Building in Upper Hill was operating a pharmacy and laboratory. The Embakasi clinic was operated by a clinical officer with a pharmacy and laboratory, while the Clinic next to Kenyatta National Hospital (KNH) had a Pharmacy, laboratory and a dental unit. At Thika Road Mall (TRM), the clinic was run by a clinical officer and a laboratory technologist. At the National Hospital Insurance Fund (NHIF) HQ Clinic, a doctor (Dr. Mrs. Rhima Deen) was in charge.
7. For the clinics run by clinical officers, the officers had their certificates, visiting card that read clinical officers and the doors were marked appropriately.

8. The hospital was in the process of signing up with MP Shah Hospital Cardiac Centre to bring doctors from India with an aim of making heart procedures to be undertaken locally. The proposal for the same was in the process of getting approvals from Kenya Medical Practitioners and Dentists Board (KMPDB);
9. The hospital was an outpatient facility attending to 200-300 patients per day and had a Level 4 Status as indicated on the KMPDB certificate. **(Annex 3)**
10. The Operating theatre had been operational for the last 6 months conducting day care surgery.
11. The hospital did not have an evacuation desk as alleged by the petitioner. However, majority of the patients who were travelling to India for treatment did so on their own choice. They only approached the Hospital to provide them with medical reports which were evaluated by Dr. Khushal Singh. These reports were then forwarded to Medanta India. Medanta India then would send back responses either accepting or denying the patients while at the same time indicating the costs of treatment for those who were accepted. Most patients referred to India were going for high end cancer treatment.
12. The Hospital had one resident radiologist and conducted 25 MRIs a day. It also had 3 radiographers for MRIs and CT scans.
13. The Renal Unit had a Resident Medical officer, a clinical officer, and seven (7) nurses in the renal unit (trained in renal dialysis).
14. The management had terminated the services of the petitioners; Mr. Agaitano Atango (also known as Brian Onyango) and Margaret Mburu as suspects of theft at the facility. Both had their cases pending in court. A list of eight (8) others who had allegedly left the facility was tabled indicating various reasons for leaving. **(Annex 4)**
15. There was no single doctor whether full time or visiting, who worked at the facility without valid qualifications/certificates.
16. The allegations of unqualified endoscopy nurse doing endoscopies were not true as all the nurse were trained and qualified in endoscopy.
17. The procedures were done by qualified endoscopists, fully certified by the Kenya Medical Practitioners and Dentists Board.
18. All the expatriates working in the facility had valid work permits.
19. On the issue of retrenchment and replacement of higher salaried Kenyan employees with low salaried employees, this was not the case and there was not substantiation by the petitioner on the allegation. Equally, no local employees had been replaced by expatriates; instead local staffs were being promoted progressively to take on more significant roles at the facility.
20. All cases referred to Medanta, India were through consent given in writing and no fee was paid to local doctors for the referrals whatsoever. A list of 74 cases of patients referred to India was provided. **(Annex 5)**
21. On the allegation of sending patients to Medanta India for cases that could be treated locally, only those patients whose conditions could not be handled locally had been referred to India. Some patients demanded referrals to India because of their personal preferences since they could afford. He however stated that the facility had no control over such personal requests. The renal cases that were being referred to India were mostly the second transplants which could not be easily carried out locally.
22. The facility was incorporated as *Africare Limited*; however it had *Medanta Africare* as its registered trademark, which it used as a brand name.

23. Medanta Africare had 14 clinics and 1 head quarter facility along Waiyaki Way, Nairobi. The facility had a total of 344 staff of which only 13 were foreigners.
24. The high turnover of staff at the facility was a challenge to all human resource practitioners facing a generation that was restless and wants to shift jobs often. Equally, the facility was rapidly expanding hence the high number of staff joining it in 2016.
25. On the concern raised that the facility was engaged in an unethical practice of having CCTV camera in patient rooms, it was clarified that the CCTV cameras were installed in waiting areas and public places only.
26. On the allegation of over treating and over prescription or prescription of unnecessary drugs for the sake of sales, it was clarified that the facility was not engaged in such malpractices.

### 3.3 Evidence from the Ministry of Health

Dr. Izaq Odongo, representing the Principal Secretary, Ministry of Health appeared before the Committee on Thursday, 5<sup>th</sup> May, 2016 and submitted as follows:-

1. On the allegation that Medanta Afri-Care Group of Hospitals has been establishing hospital units across the country using local medical experts after which the hospital institutes criminal charges against the experts and subsequently terminating their services the Ministry had directed the following health regulatory boards to carry out a special joint verification exercise on 3<sup>rd</sup> May, 2016 at the facility:
  - a) Kenya Medical Practitioners and Dentists Board;
  - b) Clinical Officer's Council;
  - c) Nursing Council of Kenya;
  - d) Radiation Protection Board;
  - e) Pharmacy and Poisons Board; and
  - f) Kenya Medical Laboratory Technicians and Technologists Board.
2. The special joint inspectorate team carried out a systematic verification inspection in the following departments/units: laboratories, endoscopy, ultrasound, radiology, pharmacy, NHIF capitation unit, dental unit and the family care unit. The findings were as follows:
  - a) On accreditation status of the hospital, it was established that the hospital had a valid registration certificate from the Medical Practitioners and Dentists Board dated 17<sup>th</sup> November, 2011 S/No. 002518 and a valid License No. 17012. The facility further had the following satellite clinics which were duly registered by the Medical Practitioners and Dentists Board: Golden Plaza, Mayfair Suites, Krishna Park, Nakuru, Thika, Kisumu, Oasis (Kisumu), Mombasa, Embakasi, Fortis Suites (Kenyatta), NHIF Building (Nairobi), TRM (Thika Road), 5<sup>th</sup> Avenue, (Ngong Road).
  - b) On the registration status of medical practitioners at the hospital. The management submitted a list of medical and dental practitioners who were duly licenced by the Medical Practitioners and Dentists Board. The management further submitted a list of other health workers who were duly registered and licenced by their respective regulatory boards. The team established that:-
    - ~~All doctors working at the facility were fully compliant with the regulatory requirements and their licences were up to date.~~

- The records of procedures carried out at the facility were available and confirmed that all procedures including endoscopy were carried out by competent and licensed professionals.
- The various clinical areas were found to have complied with the necessary regulatory requirements.

The team concluded that in the absence of any official complaint of medical malpractice lodged at any of the regulatory agencies; it could not establish the alleged medical malpractice.

3. On the allegation that the said facility had been referring patients to its partner hospital, Medanta India, for ailments that can be treated locally for purposes of defrauding the NHIF scheme and unsuspecting patients while paying the referring doctors USD 2,000 per patient to cover medical expenses he stated that:
  - a) Under the comprehensive medical insurance scheme for Civil Servants and Disciplined Services, one of the provisions is to cater for treatment outside Kenya for medical conditions whose treatment was not available in the country. Such treatment abroad is covered after authorization by the NHIF.
  - b) Since the start of overseas treatment for Civil Servants and Disciplined Services, NHIF had over 400 patients treated abroad under the scheme of which Medanta, the Medicity only accounted for 3% of the total number of hospitals visited by NHIF members.
  - c) Out of the 32 members who visited Medanta, the Medicity, 44% were referred by doctors from Kisii Teaching and Referral Hospital, Rift Valley General, Moi Teaching and Referral Hospital and Kenyatta National Hospital.
  - d) NHIF was not aware of any patient charged USD 2,000 for treatment abroad in any facility as alleged.

#### **3.4 Evidence from the National Hospital Insurance Fund**

The Acting Chief Executive Officer, NHIF, Mr. Geoffrey Mwangi appeared before the Committee on 5<sup>th</sup> May, 2016 and submitted that:

1. In line with government policy, NHIF introduced a Comprehensive Medical Insurance Scheme for Civil Servants and Disciplined Services with effect from 1st January, 2012. The scheme catered for treatment outside the country for medical conditions whose treatment was not available in Kenya.
2. Medical expenses and travel costs for the patient (member or dependant) was covered subject to the following guidelines:
  - i) Referral from the treating doctor/consultant indicating reason for recommending treatment abroad.
  - ii) The referral letter signed by the Kenya Medical Practitioners and Dentists Board for verification that the doctor is a licensed practitioner registered with the board.
  - iii) Duly signed NHIF referral form by the treating doctor and the principal member.
  - iv) Preauthorization by the NHIF.
  - v) Approval from the Director of Medical Services after the patient has settled on a facility.



- vi) Introduction/approval letter from the employer/ministry/county.
  - vii) Copy of ID and NHIF card.
  - viii) Copy of birth certificate for dependants and proof of tertiary institution of higher learning.
  - ix) Quotes from different facilities abroad indicating treatment plan, pro-forma invoice and bank details where payment is made directly to the facility.
4. Since inception, the Scheme for Civil Servants and Disciplined Services had seen over 400 patients treated abroad at various hospitals in: India, Turkey, Germany, South Africa and UK.
  5. Medanta the Medicity only accounted for 3% of the total number of hospitals visited by NHIF members.
  6. Out of the 32 members who visited Medanta the Medicity for treatment, only 25% were referred from Medanta Africare.
  7. Out of the 32 members who visited Medanta the Medicity, 8 members were referred from other private facilities other than Medanta Africare.
  8. Out of the 32 members who visited Medanta the Medicity, 44% were referred by doctors from Kisii Teaching and Referral Hospital, Rift Valley General, Moi Teaching and Referral Hospital and Kenyatta National Hospital.
  9. Cancer patients accounted for most cases seeking treatment abroad.
  10. Kidney/renal failure patients also visited Medanta and Medicity for treatment and transplant.

### **3.5 Evidence from the Kenya Medical Practitioners and Dentists Board**

The CEO, Kenya Medical Practitioners and Dentists' Board, Mr. Daniel Yumbya appeared before the Committee on 5<sup>th</sup> May, 2016 and on 14<sup>th</sup> June, 2016 and informed the Committee that:

- i. On 17<sup>th</sup> May, 2016 and on 26<sup>th</sup> May, 2016 Special sittings of the Preliminary Inquiry Committee ("PIC") were convened by the Board to undertake an inquiry on the complaint on the alleged medical malpractice as contained in the said Petition and in line with the requests from the Departmental Committee on Health of the National Assembly that a thorough inquiry be conducted into the matter.
- ii. The Preliminary Inquiry Committee (hereinafter referred to as the Committee) carefully considered the complaint before it, reviewed all the evidence presented and copies of the documents submitted including, inspection report of the respondent's facilities and its satellite Clinics, submissions made on the matter and all other documents and made the following findings:

1. **On the Registration and Licensing status of Africare Ltd Hospital**, the Committee found that:

- i) Africare Limited is duly incorporated under the Companies Act and has a valid registration certificate from the Medical Practitioners and Dentists Board (**Annexe 6**) dated 17<sup>th</sup> November, 2011 vide Serial Number: 002518. It also holds a valid operating license for the year 2016 vide Licence Number: 17012.

ii) The facilities operated by the respondent were owned by Africare Limited, a limited liability company which was incorporated on 10<sup>th</sup> September, 2010.

The directors of the said company are as follows;-

- a) Kishan Singhy Gehlot- Kenyan
- b) Samit Kishan Gehlot-Kenyan
- c) Ravi Kant Jaipuria-Indian
- d) Chaitanya Nerikar-Indian

iii) "Medanta-Africare" is a registered mark of Africare Limited under the Trade Marks Act, Chapter 506 of the Laws of Kenya that was registered on 4<sup>th</sup> September, 2012 vide Trade Mark No.74013 in class 44 with respect to provision of medical services. The registration of the mark "Medanta-Africare", legally permits the Respondent to use it as its brand or trade name thereby distinguishing itself from other service providers.

2. **On the Qualification and Nationality of the eleven (11) medical practitioners working at the Hospital**, the Committee noted the list of the medical practitioners employed by the Hospital with their specific qualifications and nationality as set out hereunder; -

No	Name	Registration No.	Qualification	Nationality
1.	Dr. Paresh Dave	A 2989	MBChB (NBI) 1988, M.Med (NBI),1993	Kenyan
2.	Dr. Aroon Kumar Handa	A.0973	MBBS (Bombay) 1971, FRCR (London),1977	Kenyan
3.	Dr. Kishorkumar Daveluk Kishor	A.2470	MBBS(Saurashtra), 1976	Kenyan
4.	Dr. Kachhwaha Khushal Singh	A.2959	MBBS (Rajasthan),1978 MD (Rajasthan),1985	Kenyan
5.	Dr. Saran Kaur Khalsa	A.8037	MBChB (Nairobi),2010	Kenyan
6.	Dr. Elijah Ayieko Kwasa	A.6402	MBChB(Nairobi),2007 M.Med (Radiology)(AKU),2014	Kenyan
7.	Dr. Hetand Kumar G. Shah	A.9594	MD (Volgograd),2012	Indian
8.	Dr. Vipul Purshottam Nagnesia	A.8553	MBChB (Nairobi),2013	Kenyan
9.	Dr. Reema M.F. Din	A.3517	MBBS (Ismalia),1986	Kenyan
10.	Dr. Puneet Jalan	L.I No. 006640	MBBS (Assa),2005, MD ,2009	Indian
11.	Dr. Jugalall Rekha	L.I No.00644	BDS (Manipal),2008	South African

In view of the above details, the Committee found that the eleven (11) medical practitioners then working for the Respondent as listed above were qualified and duly licensed by the Board to offer medical services.

3. **On alleged malpractice at Africare Limited**, the Committee found that there was no evidence to support allegations that non-qualified personnel run endoscopy within the Respondent's facilities. The Committee noted from the documents presented that the personnel then employed by the Hospital were qualified and licensed by their respective professional bodies hence the Committee finds that there was no evidence to support the allegations of medical malpractice against the Respondent.
4. **On classification of the Hospital as a level 4 facility and the general criteria used to classify medical facilities into various levels**, the Committee reviewed the Board's classification of health institutions that is guided by Section B of the Medical Practitioners and Dentists Board (Requirements for Opening Health Institutions), which provides for the categorization of Health Institutions and requirements. The Committee noted that Section B thereto at part (m) provides that Hospital Level 4 is an institution which has the following:
  - a) **Infrastructure:** 50-100 inpatient beds **OR** has an outpatient or turnover of more than 250 patients per day; An operating theatre; Radiology unit with X-Ray; Specialist clinics; MRI Machine; CT Scan Machine; Dialysis Machine; Endoscopy and Colonoscopy Unit; Mammography Machine; Ultrasound Machine.
  - b) **Personnel:** The facility has a resident doctor
5. The Committee noted that the Respondent's facility located along Waiyaki Way in Westlands within Nairobi was registered in 2011 as a medical centre and it also has a laboratory. The facility was thereafter inspected on 24<sup>th</sup> June, 2015 by the Board and the following was noted during the said inspection:
  - a) The facility had a high patient load;
  - b) The facility offered multiple specialized services in diverse fields, including, dialysis centre, cardiology, orthopaedics, Ear Nose and Throat (ENT), Ophthalmology (Eye), paediatrics, gynaecology, internal medicine, physiotherapy, radiology, sonography services, oncocare, gastrocare, Vaccination, homecare and laboratory services; and,
  - c) The facility had modern equipment which included the 3 Tesla MRI, 256 slice CT scan, Ultrasound, Digital X-ray, Mammogram and Bone Marrow Aspiration.

Following the said inspection, the Board approved and subsequently upgraded the said Respondent's facility to a Level 4 Institution as it had met the Board's minimum requirements at the said time.

6. **On whether medical procedures undertaken at the Hospital were done by qualified personnel and whether they would require a patients' admission**, the Committee found that the Respondent's facility along Waiyaki Way, Nairobi offers the following specialized medical services, among others;-
  - i) Bone Marrow Aspiration (BMA) – performed by Dr. Paresh Dave
  - ii) Colonoscopy and Oesophagogastroduodenoscopy (OGD) - performed by Dr. Stephen Onyango Ayoo.
  - iii) Ultrasound guided biopsy or drainage-performed by Dr. Elijah Kwasa

The Committee further found that the Respondent had a theatre where day care surgeries or minor day care surgeries or procedures were undertaken. The Committee also noted that the Respondent had a referral agreement with M.P. Shah Hospital where patients who required hospitalization beyond a day were admitted. The Committee further found that establishment of the Hospital's day care surgery centre, was in line with accepted international standards.

7. **On allegations of over testing and over prescription and breach of patient confidentiality by having Closed Circuit Television (CCTV) cameras in the consultation rooms,** the Committee found that there were no cameras in the consultation rooms as alleged in the petition and that installation of CCTV cameras in common areas within the Respondent's facilities does not infringe on patient's privacy. Further, there was no evidence to prove allegations that patients were subjected to over testing and over prescription.
8. **On the number of patients referred to India and their diagnoses,** the Committee perused the documents presented before it and noted that in the year 2015/2016, the Respondent referred seventy four (74) patients for treatment in India. The Committee reviewed the Respondent's records and noted the cases relating to the referrals as specified hereunder; -

PATIENTS TREATED IN INDIA 2015/2016				
NO	SPECIALTY	SEX	REFERRING ENTITY	DIAGNOSIS
1	Aesthetics	F	Dr Consolata Mwangi	Prosthesis for the finger
2	Cardiology	M	AON insurance	Cardio pulmonary hypertension- Open Heart Surgery
3	Cardiology	F	SELF	ASD Device implantation
4	Cardiology	M	Dr Naomi Gachara	Large VSD-Surgery/ VSD closure with PA debanding
5	Cardiology	M	Dr Kinyanjui	Pacemaker Implantation
6	Dental	F	Dr Nadia Noordin	Fractured Bridge
7	ENT	M	Self	Cochlear Implant
8	G I Oncology	M	SELF	Carcinoma stomach- Stenting
9	G.I Surgery	M	self	Anal Fistula-Fistulectomy Surgery
10	G.I Surgery	F	Self	Morbid Obesity- Sleeve Gastrectomy
11	G.I Surgery	F	Dr Martin Muriithi	Irritable Bowel Syndrome
12	G.I Surgery	M	Dr Macharia Kiruhi	Upper GI Candidiasis
13	G.I Surgery	M	Dr C.N Change	recurrent abdominal issues
14	Gynae	F	SELF	Ascitic Fluid & DVT

15	Hepatology(Liver)	M	Self	Acute Nephritis & Herpes Simplex
16	Hepatology(Liver)	F	Dr Consolata Mwangi	Lesion of the liver- Liver transplant
17	Hepatology/Liver	F	Dr John Paul Waswa	Liver failure- Liver Transplant
18	Kidney	F	D.M.N Kinuthia	Chronic kidney failure-Kidney Transplant
19	Kidney	M	Dr Owiti	Kidney Failure-Kidney Transplant
20	Kidney	M	SELF	Kidney Failure-Kidney Transplant
21	Kidney	F	SELF	Recurrent Kidney stones Surgery
22	Neurology	F	Self	Meningioma- Cybeknife Radiotherapy
23	Neurology	F	AON insurance	lumbar spondylosis & osteoarthritis of L. Hip- Hip Replacement
24	Neurology	F	SELF	Dumbbell tumor-Surgery with implant
25	Neurology	F	SELF	Adrenal mass removal surgery
26	Neurology	M	SELF	Lumbar compression- Foramen Magnum Decompression
27	Neurology	M	Dr Saran Khalsa	Spinal canal stenosis- Surgery - TLIF 2 Level procedure
28	Neurology	F	Dr L. N Gachare	Thoracolumbar scoliosis- minimally invasive deformity correction
29	Neurology	F	Self	Glossopharyngeal Neuralgia
30	Neurology	F	Self	Degenerated Disc & Nerve Compression- TLIF 2 Level Procedure
31	Neurology	F	SELF	Chronic Migranes
32	Neurology	F	Self	Neomuscular complications
33	Neurology	F	Self	Transverse Myelitis
34	Neurology	M	SELF	lumbar osteoporosis-Lumbar Decompression surgery
35	Neurology	F	Self	Proximal muscle weakness-
36	Neurology	M	self	Intraventricular Heamorrhage-Digital Subtraction Angiography (DSA)
37	Neurology	F	Dr Lubanga	post traumatic CSF Fistula - Anterior Cranial Fossa Surgery
38	Neurology	F	Dr Lubanga	left cavernous sinus Meningioma-Radiosurgery

39	Neurology	M	SELF	Staged Reconstruction- Gracilis and Temporalis muscle transfer of the eye
40	Neurology	F	Dr Barbara Karau	Disc /Lumbar
41	Neurology	F	Dr Barbara Karau	Scoliosis diagnosis and Management
42	Neurology	F	Self	mass lesion lumbar -microsurgery for tumor removal
43	Neurology	M	Self	Degenerative Disc Dessication - repeat surgery – Intradural Extramedullary
44	Neurology	F	Dr Lubanga	Narrowing of spinal canal- Microsurgical Decompression surgery
45	Neurology	M	Dr M M Qureshi	Maxillofacial condition- Embolization
46	Neurology	M	SELF	Chronic lower Back Pain - Corpectomy & Lumbar Spine Surgery
47	Oncology	F	Dr Vijay Kumar	Breast cancer-PET Scan
48	Oncology	F	self	Breast invasive carcinoma-PET Scan/Palliative Chemotherapy
49	Oncology	M	Dr Wambugu	Colorectal Cancer Management- PET Scan/Chemotherapy
50	Oncology	M	Dr Gladwell Kiarie	Multiple Myeloma-PET Scan/Chemotherapy
51	Oncology	F	SELF	Colon CA-PET Scan/Chemotherapy
52	Oncology	F	SELF	Serous Cystadenocarcinoma-PET Scan/surgery as lymph node dissection
53	Oncology	F	Dr Paresh Dave	PET Scan
54	Oncology	M	Dr Khushal Singh	Right vocal cord swelling- Biopsy/PET Scan/ Surgery
55	Oncology	M	SELF	Histiocytoma-skeletal metastasis- PET Scan/Chemotherapy
56	Oncology	M	Joan Cain	Gastric Adenocarcinoma-PET Scan
57	Oncology	F	SELF	Colon CA - PET Scan/Chemotherapy/Surgery
58	Oncology	M	Dr Kinyanjui	Lung Cancer- PET Scan/Chemotherapy

59	Oncology	F	SELF	Breast cancer- Post Mastectomy Radiotherapy with IMRT technique
60	Oncology	M	Dr H. Saha	Adenocarcima colorectal- PET Scan
61	Oncology	F	SELF	PET Scan
62	Oncology	M	Dr Kimani Gicheru	gastric, colon polyp & anal mass- PET Scan/Surgery
63	Oncology	F	Self	Breast Cancer-PET Scan/post-mastectomy chest wall irradiation
64	Oncology	F	Self	Carcinoma gall bladder-PET Scan/Chemotherapy/Radiotherapy
65	Ophthalmology	M	Self	phthisis bulbi-ocular prosthesis
66	Ophthalmology	F	Dr Joseph M Nyamori	Diabetic Retinopathy- Corrective surgery
67	Ophthalmology	M	Dr P. T Nyaga	Diabetic Retinopathy- Retinal surgery
68	Orthopaedics	F	SELF	Hip replacement complications- Revision Total Hip Replacement
69	Orthopaedics	F	Self	Osteoarthritis- Knee Replacement
70	Orthopaedics	M	Dr Assad Mughal	Hip Replacement Revision
71	Orthopaedics	M	Self	Malaligned knee joint- Knee Replacement
72	Rheumatology	F	Dr. Philip Samani	Systemic Lupus
73	Urology	M	Self	Urology complications- PET Scan/ Surgery
74	Urology	M	Dr Peter Wambugu	Urological Complication-Surgery

9. **On allegations of Polio and Yellow fever vaccines being taken from public facilities and used at the Hospital**, the Committee found that the Respondent's facility obtains vaccines from the Ministry of Health, Unit of Vaccines and Immunization, and also purchases vaccines from Laborex Kenya Limited. It is noteworthy that vaccines are provided to private facilities by the Ministry of Health without any fees but thereafter the requisite facilities incur administration costs and other related costs that may be passed to the patients who opt to use such facilities hence the allegation lacked merit.
10. **On allegations of policemen having been subjected to full body MRI scan**, the Committee found that a medical screening was initiated and organised by Medanta Africare Limited Hospital and the National Police Service Commission for police officers with injuries as part of police welfare. The Committee reviewed the correspondence exchanged between the Respondent and the National Police Service Commission and found that the screening of the police officers was offered at terms

which had been mutually agreed by both parties. The Committee noted that a total of 135 police officers had been targeted for MRI screening as detailed below;-

NO.	AREA SCREENED	TOTAL
1.	Lumbar spine	30
2.	Brain	19
3.	Whole spine	12
4.	Right knee	12
5.	Regional;	9
6.	Left knee	7
7.	Whole abdomen	6
8.	Hips	4
9.	Pelvis	3
10.	Both knees	2
11.	Right hand wrist	2
12.	Cervical spine	2
13.	Right ankle	2
14.	Left ankle	2
15.	Left foot	2
16.	Chest	1
17.	Right shoulder	1
18.	Left shoulder	1
19.	Brain & Chest	2
20.	Lumbar spine & Hips	2
21.	Brain & Lumbar spine	2
22.	Right Knee & regional	2
23.	Cervical spine & regional	1
24.	Cervical spine & Brain	1
25.	Cervical spine & Lumbar spine	1
26.	Abdomen & chest	1
27.	Brain & Right Knee	1
28.	Cervical spine & right shoulder	1
29.	Regional & Hips	1
30.	Regional & right ankle	1
31.	Foot & ankle	1
32.	Hips & Right ankle	1
<b>TOTAL</b>		<b>135</b>

The Committee found that **296 police officers** were examined out of which **135 police officers** were subjected to directed MRI scans. The Committee further found that there was no evidence of the Police Officers being subjected to a full body MRI scan as alleged and the documents showed that the MRI were justified.

11. The investigations carried out on the Respondent's satellite facilities by the Joint Health Regulatory Inspections team found out that:
- i) There was no nursing officer at Africare Limited, NHIF Building though a registered clinical officer performed nursing work.
  - ii) There was no nurse at Africare Limited, Fortis Suites.
  - iii) At Africare Limited, 5<sup>th</sup> Ngong Avenue, there was neither a Medical officer, clinical officer nor a nursing officer at the clinic. Only one staff member had



been in employment for over one year, with the rest being in service for less than a year.

- iv) The Africare Limited, Embakasi did not have a nursing officer.
- v) At Africare Limited, TRM Branch, there was no infection control or emergency tray at the facility. Equally, there was no nursing officer.
- vi) At Africare Limited, Krishna Park, the facility was found offering dental services without registration from the Medical Practitioners and Dentists Board.

12. The Preliminary Investigations Committee (PIC) then made the orders hereunder which were approved and adopted by the Full Board in its sitting of 13<sup>th</sup> June, 2016, that:

- i. Africare Limited should be admonished by the Chairman of the Medical Practitioners and Dentists Board for operating some medical facilities without the necessary staff complement.
- ii. Africare Limited to employ and station nursing officers in the following facilities:
  - a. NHIF Building,
  - b. Mayfair,
  - c. Fortis suites,
  - d. 5<sup>th</sup> Ngong Avenue,
  - e. Embakasi Clinic, and
  - f. The TRM, Branch.
- i. Africare Limited, to comply with (II) above within a period of Thirty (30) days from the date hereof and thereafter confirm compliance to the Chairman of the Medical Practitioners and Dentists Board.
- ii. Africare Limited to close the dental unit within its facility located at Krishna Park with immediate effect pending registration and licensing by the Medical Practitioner and Dentists Board.
- iii. Africare Limited to ensure that all its medical facilities and clinics maintain and update a register of all referrals for patients requesting for diagnostic services within the Hospitals and outside.
- iv. Africare Limited to ensure that all its Medical Centres were managed by qualified Medical Doctors or Registered Clinical Officers or Nurses or other duly licenced medical staff at all times.
- v. As a consequence of the inspection undertaken by the Board the Committee further directed that;
  - a. The Respondent puts in place proper signage on all consultation rooms at its facility at the TRM along Thika Road. The same shall indicate the qualification of the cadre seeing patients.
  - b. The Respondent institutes infection prevention control protocol at the TRM Branch and also ensure it puts in place an emergency tray within the same facility.
  - c. The Respondent to ensure that its Facility at the 5<sup>th</sup> Ngong Avenue within Nairobi is covered by a medical officer at all times.

- d. The Respondent was directed to establish a client triage system at its NHIF facility.
  - vi. The Respondent was directed to pay the Medical Practitioners and Dentists costs the sum of Kshs. 250,000/= as part costs for the sittings of the Preliminary Inquiry Committee of the Board.
  - vii. The Medical Practitioners and Dentists Board upon receipt of the report in (III) above was at liberty to make such further orders and directions as it deems fit.
13. The Preliminary Investigations Committee (PIC) made the following further recommendations, that:
- i) The Medical Practitioners and Dentists' Board constitutes a technical working group (TWG) to urgently spearhead the process of developing guidelines for referring patients for treatment overseas within (90) days from the date of adoption of the report.
  - ii) The Inspection and Licensing Committee of the Medical Practitioners and Dentists' Board should review categorization of health facilities and ensure they are in line with the Constitution of Kenya (2010) and the Ministry of Health's categorization taking cognizance of the devolution process. The Committee should further categorize all the registered and licensed health facilities afresh using the new categorization within a period of ninety (90) days from the date of adoption of the report.
  - iii) Matters related to human resource emanating from Africare Limited to be forwarded to the Department of Labour in the Ministry of Labour, Social Security and Services for further investigation and appropriate action.

#### 4.0 COMMITTEE OBSERVATIONS

The Committee having considered the petitioners' prayers and their submissions and those of various stakeholders, observed the following, that:-

- i. The facility was registered in different names under several agencies as follows: At the Registrar of Companies, it is registered as (Afri-Care Limited); At the Kenya Medical Practitioners and Dentists Board, it is registered as (Afri-Care Ltd Hospital); At the NHIF, it is registered as (Medanta Afri-care Ltd). This was noted to be causing confusion on the actual identity of the facilities. It was therefore not clear which entity takes legal responsibility in case of medical negligence or such other claims in the satellite facilities.
- ii. The NHIF had signed and entered into a contract with Medanta Africare Ltd, it implied that it entered in contractual agreement with an entity that was neither registered by the registrar of companies nor the Kenya Medical Practitioners and Dentists Board (KMPDB).
- iii. Some referrals of patients for treatment at Medanta India indicated in the presentations were not warranted as the cases in question could be handled locally.
- iv. There was no clear relationship between Medanta Kenya and Medanta India. Medanta Kenya was using the name as a marketing strategy. The Memorandum of Understanding provided by the Board between *Africare Limited, Kenya* and *Global Health Private Limited, India* under the brand name "*Medanta – The Medicity*" was not authenticated.
- v. From the list of staff provided by Medanta Afri-Care, sales department constituted the largest department. Sales target were also set for the department implying that profit, not healthcare, was the major motivation at the facility, raising a serious ethical concern.
- vi. The high number of police officers that underwent MRI scans raised concerns since MRI scans ought to be on case by case basis and not en masse. The evidence provided on the policemen who were subjected to MRI scans showed that the scans were not necessary and were driven by profit as the NHIF was to foot the bills. Further, it was noted that alternative tests and a less riskier procedure such as X-ray for the same would have sufficed.
- vii. There were indications that majority of the patients being referred to India were doing so on their own request, however, it was not clear whether the hospital was guiding the patients properly on the need to travel overseas for medical care. Since NHIF could be paying for the referred cases, this could lead to unnecessary costs especially for cases that can be managed locally.
- viii. Although the petitioners had indicated that the matter on the petition was not in court, it was established that the petitioners had a continuing criminal case before court on allegations of theft.
- ix. The submission by the KMPDB had under-reported on some facts about the matter in question. For instance, the Board had reported that 75 cases had been referred to India whereas the list tabled by the Africare Management consisted of 83 persons. In

addition, the Board had indicated that only 135 police officers undertook the MRI scan whereas the hospital management had submitted that about 250 policemen living with gunshot wounds undertook the test.

- x. The Medical Board submitted that the Respondent (Medanta Africare) was directed to pay a cost of Kshs. 250,000 to it as cost of sittings of the Preliminary Inquiry Committee of the Board. This however could amount to conflict of interest as the Board should not charge its client for carrying out its own responsibility.
- xi. The investigations by the Medical Board and its subsequent submission appeared to have been compromised and was therefore not objective based on the contradiction on facts and failure to verify the information provided by the facility. This would result to exposing Kenyans to risks as a result of failure of the Board to carry out its mandate as a regulatory body.
- xii. Medanta Africare Ltd expansion strategy was questionable as it appeared that they were expanding purely for profit making purposes as opposed to offering quality health care as shown by evidence provided indicating that the sales department was the largest in the facility and the sales officers had huge targets to meet.
- xiii. The satellite facilities of Medanta Africare needed to be individually registered with the Board and the Main facility to provide indemnity cover for the health workers working for these clinics.

5.0 COMMITTEE RECOMMENDATIONS

As to the Prayer that the Committee inquires into, investigates and reports its findings to the National Assembly the Committee recommends that:-

- i. The Africare Ltd should ensure that proper registration with the relevant authorities is done for Kenyans to be aware of its real identity. This should also be reflected on the signage displayed in all its facilities reflecting the registered names by the Registrar of Companies and the Kenya Medical Practitioners and Dentists Board.
- ii. The Ministry of Health as a matter of urgency should develop a policy on international referrals of patients to protect Kenya's national interest since medical tourism was a key pillar of the Indian economy. The Ministry should report back to the Committee within 90 days upon tabling of the report.
- iii. Medanta Africare Limited Should put its expansion plans on Hold until all issues of concern raised are addressed. These issues include: staffing issues, refocusing on health provision as opposed to sales targets and profit motivation. The Medical Board should cease with immediate effect to issue licences to the facility until these conditions are met;
- iv. The Kenya Medical Practitioners and Dentists Board to report back to the Committee on the implementation status of its Preliminary Inquiry Committee report findings and resolutions concerning Medanta Africare Limited within 30 days from the tabling of the Report.
- v. The Kenya Medical Practitioners and Dentists Board should develop amendments to the KMPDB Act and provide for indemnity covers for the health workers and the hospitals.
- vi. The Ministry of Health should ensure that it builds capacity of the Kenya Medical Practitioners and Dentists Board as a regulatory body. This is to ensure that it carries out investigations objectively and effectively to protect the lives of Kenyans.
- vii. On issues regarding termination of service for the petitioners, the Committee could not pronounce itself on this matter as there was case going on in law court between the dismissed employees and Medanta Africare Ltd.

Signed..........Date.....

(HON. DR. RACHAEL NYAMAI, MP)

CHAIRPERSON,  
DEPARTMENTAL COMMITTEE ON HEALTH

**PETITION**

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REPUBLIC OF KENYA



ELEVENTH PARLIAMENT (FOURTH SESSION)

THE NATIONAL ASSEMBLY

PETITION

(No. 06 of 2016)

CONVEYANCE OF A PETITION ON ALLEGED MEDICAL  
MALPRACTICES BY MEDANTA AFRICARE GROUP OF HOSPITALS

Honourable Members,

Standing Order 225(2)(b) requires that the Speaker reports to the House any Petition other than those presented through a Member. I therefore wish to convey to the House that my office is in receipt of a petition from one Brian Onyango regarding alleged irregularities at a private health facility.

Honourable Members,

The Petitioner alleges that Medanta Africare Group of Hospitals has been establishing hospital units across the country using local medical experts, after which the said hospital institutes criminal charges against the local experts and subsequently terminates their services. The Petitioner further alleges the said private hospital has been referring patients to its partner hospital, Medanta India, for ailments that can be treated locally. He alleges that the objective of such referrals is to defraud the National Hospital Insurance Fund (NHIF) Scheme and unsuspecting patients of approximately two thousand United States Dollar (2,000 USD) per patient to cover medical expenses.



The Petitioner therefore prays that the National Assembly investigates the matter and recommends appropriate action against the said health facility and its accomplices.

Honourable Members,

Pursuant to the provisions of Standing Order 227, the Petition stands committed to the Departmental Committee on Health for consideration.

Thank you!



THE HON. JUSTIN B. MUTURI FGH MP  
SPEAKER OF THE NATIONAL ASSEMBLY

TUESDAY 8<sup>TH</sup> MARCH 2016

REPUBLIC OF KENYA



THE NATIONAL ASSEMBLY

ELEVENTH PARLIAMENT (FOURTH SESSION)

PUBLIC PETITION

BY THE CONCERNED CITIZENS REGARDING MEDICAL MAL-  
PRACTICE BY MEDANTA AFRI-CARE GROUP OF HOSPITALS

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I, the UNDERSIGNED, on behalf of concerned citizens,

DRAW the attention of the House to the following;

- (i) THAT, health being a key requirement in every person's life, should be administered by qualified practitioners;
- (ii) THAT, that cases of mal-practices at the Medanta Afri-Care Group of Hospitals is on the rise;
- (iii) THAT, the said hospital has been using local medical experts to set up hospital units and once set, they allegedly frame them on charges such as theft and subsequently terminate their services;
- (iv) THAT, the hospital has been using local Doctors to procure patients for treatment in India for cases that could be treated locally and paying the Doctors US Dollars 2000 per patient and defrauding NHIF and taxpayers;
- (v) THAT, the Medical practitioners in the said hospitals, collude with NHIF officials to fleece the taxpayers contributions to the NHIF scheme;

- (vi) THAT, the management of the said hospital has unfairly dismissed several medical personnel/staff;
- (vii) THAT, the medical mal-practice has continued to reign in the said hospitals for instance, theatre technicians are used to run endoscopy, a procedure that is done under sedation and use of DDA drugs;
- (viii) THAT, certain medical procedures like endoscopy can only be done by qualified and certified Medical Practitioners, however, the hospitals continue to use non-qualified practitioners posing a big risk to patients;
- (ix) THAT, the matter presented in this Petition is not pending before any tribunal or court of law;

THEREFORE, your humble Petitioners PRAY that the National Assembly through the Departmental Committee on Health:

- (i) The Committee inquires into, investigates and reports its findings to the National Assembly.

And your PETITIONER will ever pray.

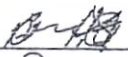


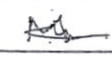

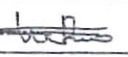


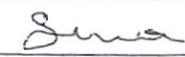
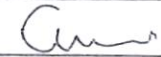







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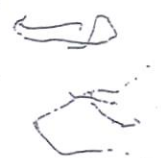


MR. BRIAN ONYANGO  
FORMER EMPLOYEE OF MEDANTA AFRI-CARE HOSPITAL

DATE ..22/03/2016.....

PETITIONERS

NO	NAME	ID. NO.	SIGNATURE
1.	Agaitano Onyanga	25544193	
2.	Margaret Njumu	22444232	
3.	Oscar Mutwasi	12998809	
4.	NICK WAINAINA	22101108	
5.	Rebecca AWOUR	23141122	
6.	Ruth Wasirama	24381120	<del></del>
7.	Joan Chirchir	21112206	<del></del>
8.	Dennis Ogoti	26221122	<del></del>
9.	Fredrick Ondieni	25222210	
10.	George Ombati	28821108	
11.	Steve Rotemo	30282620	
12.	Betty Namaswa	32271120	
13.	Rachael Wamboi	26262842	<del></del>
14.	ALICE WANZA	28428281	<del></del>
15.	Margaret Nduku	23282649	<del></del>
16.	Paul Okach	26889412	<del></del>
17.	Esther Kibera	24994888	
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**ANNEXE I**

**ADOPTION LIST**

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# DC-H: DEPARTMENTAL COMMITTEE ON HEALTH

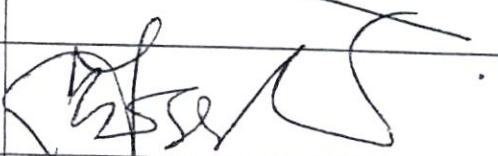
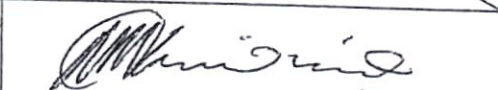
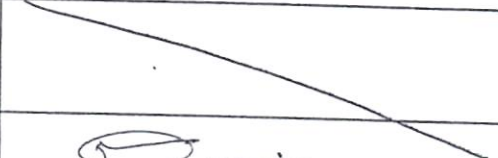
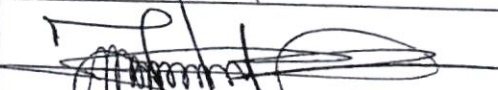



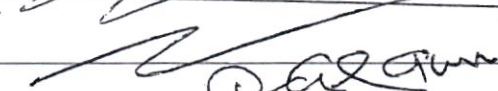
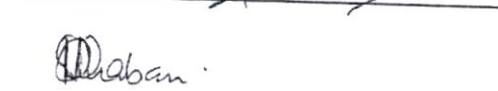

## ATTENDANCE REGISTER

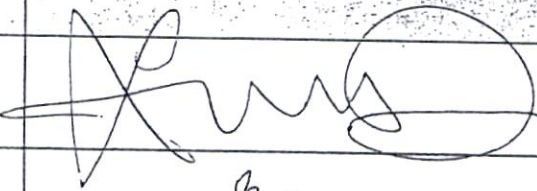


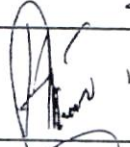
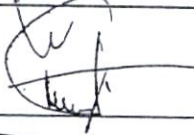



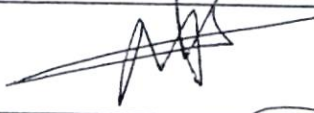
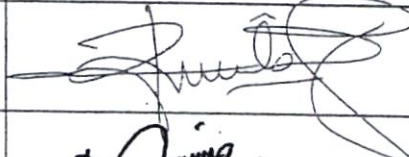
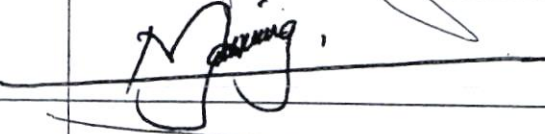




**AGENDA:**

CONSIDERATION AND ADOPTION OF THE REPORT ON THE CONSIDERATION OF THE PETITION REGARDING ALLEGED IRREGULARITIES AT MEDANTA AFRI-CARE GROUP OF HOSPITALS, A PRIVATE HEALTH FACILITY

DATE: 5/7/2016

VENUE: small board room

	HON. MEMBER	SIGNATURE
1.	The Hon. Dr. Rachel Nyamai, M.P. Chairperson	
2.	The Hon. Dr. Robert Pukose, M.P. Vice Chairperson	
3.	The Hon. Alfred Agoi, M.P.	
4.	The Hon. Alfred Sambu, M.P.	
5.	The Hon. David Karithi, M.P.	
6.	The Hon. Dr. Dahir D. Mohamed, M.P.	
7.	The Hon. Dr. Eseli Simiyu, M.P, CBS <i>CBS</i>	
8.	The Hon. Jared Opiyo, M.P.	
9.	The Hon. Dr. Enoch Kibunguchy, M.P.	
10.	The Hon. Dr. James Murgor, M.P.	
11.	The Hon. Dr. James Nyikal, M.P.	
12.	The Hon. Dr. James O. Gesami, M.P.	
13.	The Hon. Dr. Naomi Shaban, M.P.	
14.	The Hon. Dr. Patrick Musimba, MP	

	HON. MEMBER	SIGNATURE
15.	The Hon. Dr. Stephen Wachira, M.P.	
16.	The Hon. Dr. Susan Musyoka, M.P.	
17.	The Hon. Fred Outa, M.P.	
18.	The Hon. Hassan Aden Osman, M.P.	
19.	The Hon. James Gakuya, M.P.	
20.	The Hon. John Nyaga Muchiri, M.P., HSC	
21.	The Hon. Kamande Mwangi, M.P.	
22.	The Hon. Leonard Sang, M.P.	
23.	The Hon. Michael Onyura, M.P.	
24.	The Hon. Robert Mbui, M.P.	
25.	The Hon. Mwinga Gunga, M.P.	
26.	The Hon. Paul Koinange, M.P	
27.	The Hon. Raphael Milkau Otaalo, M.P.	
28.	The Hon. Stephen M. Mule, MP	
29.	The Hon. Zipporah Jesang, M.P.	



**ANNEXE II**

**MINUTES**

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MINUTES OF THE 52<sup>ND</sup> SITTING OF THE DEPARTMENTAL COMMITTEE ON HEALTH HELD ON TUESDAY 5<sup>TH</sup> JULY, 2016, IN THE SMALL BOARD, 9<sup>TH</sup> FLOOR HARAMBEE COOPERATIVE HOUSE, PARLIAMENT BUILDINGS, AT 10.00 AM.

**PRESENT**

1. The Hon. Dr. Robert Pukose, M.P. (Chairing)
2. The Hon. David Karithi, M.P.
3. The Hon. Dr. Eseli Simiyu, CBS, M.P.
4. The Hon. Jared Opiyo, M.P.
5. The Hon. Dr. Enoch Kibunguchy, M.P.
6. The Hon. Dr. James Murgor, M.P.
7. The Hon. Dr. James Nyikal, M.P.
8. The Hon. Dr. James O. Gesami, M.P.
9. The Hon. Dr. Naomi Shaban, M.P.
10. The Hon. Dr. Stephen Wachira, M.P.
11. The Hon. Dr. Susan Musyoka, M.P.
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17. The Hon. Robert Mbui, M.P.
18. The Hon. Mwinga Gunga, M.P.
19. The Hon. John Nyaga Muchiri, M.P.
20. The Hon. Raphael Milkau Otaalo, M.P.
21. The Hon. Stephen M. Mule, M.P.
22. The Hon. Zipporah Jesang, M.P.

**ABSENT WITH APOLOGY**

1. The Hon. Dr. Racheal Nyamai, M.P. (Chairperson)
2. The Hon. Christopher Nakuleu, M.P.
3. The Hon. Dr. Dahir D. Mohamed, M.P.
4. The Hon. Alfred Agoi, M.P.
5. The Hon. Kamande Mwangi, M.P.
6. The Hon. Dr. Patrick Musimba, M.P.
7. The Hon. Paul Koinange, M.P.

**NATIONAL ASSEMBLY SECRETARIAT**

- |                      |   |                        |
|----------------------|---|------------------------|
| 1. Ms. Esther Nginyo | - | Third Clerk Assistant. |
| 2. Ms. Ruth Mwhaki   | - | Third Clerk Assistant. |
| 3. Mr. Dennis Mogare | - | Third Clerk Assistant. |
-

MIN.NO. DCH 213/2016: PRELIMINARIES.

The Chairperson called the meeting to order at 10.26 a.m. and thereafter said a word of prayer.

MIN.NO.DCH 214/2016: CONSIDERATION AND ADOPTION OF REPORT ON THE PETITION REGARDING ALLEGED IRREGULARITIES AT MEDANTA AFRI-CARE GROUP OF HOSPITALS, A PRIVATE HEALTH FACILITY

The report on the Petition regarding the alleged Irregularities at Medanta Afri-Care Group of Hospitals was adopted after being proposed by the Hon. Dr. Stephen Wachira, M.P and Seconded by the Hon. Robert Mbui, M.P.

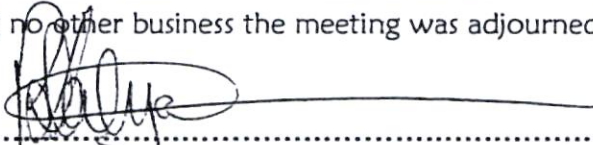
MIN.NO. DCH 215/2016 ANY OTHER BUSINESS

The Committee noted that the house was breaking for a short recess from 7th July to 18<sup>th</sup> July 2016.

The Committee resolved not to hold any meetings during the recess period to allow members to address their constituency matters.

MIN.NO. DCH 216/2016 ADJOURNMENT

There being no other business the meeting was adjourned at 12.16 pm.

SIGNED.....

HON (DR.) RACHAEL NYAMAI, M.P  
CHAIRPERSON

DATE:.....

MINUTES OF THE 42<sup>ND</sup> SITTING OF THE DEPARTMENTAL COMMITTEE ON HEALTH HELD ON TUESDAY 14<sup>TH</sup> JUNE, 2016, IN THE COMMITTEE ROOM ON 5<sup>TH</sup> FLOOR, CONTINENTAL HOUSE, PARLIAMENT BUILDINGS, AT 10.00 AM.

PRESENT

1. The Hon. Dr. Robert Pukose, M.P. (Vice Chairperson) – Acting Chairperson
2. The Hon. Alfred Agoi, M.P.
3. The Hon. Stephen M. Mule, M.P.
4. The Hon. David Karithi, M.P.
5. The Hon. Hassan Aden Osman, M.P.
6. The Hon. Leonard Sang, M.P.
7. The Hon. Michael Onyura, M.P.
8. The Hon. Raphael Milkau Otaalo, M.P.
9. The Hon. Dr. Enoch Kibunguchy, M.P.
10. The Hon. Zipporah Jesang, M.P.
11. The Hon. Dr. Naomi Shaban, M.P.
12. The Hon. James Gakuya, M.P.
13. The Hon. Dr. James Nyikal, M.P.
14. The Hon. Dr. James Murgor, M.P.
15. The Hon. Robert Mbui, M.P.
16. The Hon. Mwinga Gunga, M.P.
17. The Hon. Dr. James O. Gesami, M.P.

ABSENT WITH APOLOGY

1. The Hon. Dr. Racheal Nyamai, M.P. (Chairperson)
2. The Hon. Kamande Mwangi, M.P.
3. The Hon. Fred Outa, M.P.
4. The Hon. John Nyaga Muchiri, M.P.
5. The Hon. Jared Opiyo, M.P.
6. The Hon. Dr. Dahir D. Mohamed, M.P.
7. The Hon. Dr. Susan Musyoka, M.P.
8. The Hon. Dr. Stephen Wachira, M.P.
9. The Hon. Dr. Patrick Musimba, M.P.
10. The Hon. Alfred Sambu, M.P.
11. The Hon. Paul Koinange, M.P.
12. The Hon. Joseph O. Magwanga, M.P.

IN ATTENDANCE

National Assembly Secretariat

- |                        |   |                         |
|------------------------|---|-------------------------|
| 1. Mr. Dennis Mogare   | - | Third Clerk Assistant.  |
| 2. Ms. Ruth Mwhaki     | - | Third Clerk Assistant.  |
| 3. Ms. Marlene Ayiro   | - | Legal Counsel           |
| 4. Mr. Collins Mahamba | - | Audio Recording Officer |

### **Kenya Medical Practitioners and Dentists Board and Other Regulatory Bodies**

1. Dr. David Kiima -Member, Kenya Medical Practitioners & Dentists Board
2. Dr. Elly Nyaim Opot - Member, Kenya Medical Practitioners & Dentists Board
3. Dr. Were Andrew - Member, Kenya Medical Practitioners & Dentists Board
4. Mr. Daniel Yumbya - CEO, Medical Practitioners and Dentists' Board
5. Ms. Edna T. Kimaiyo -Registrar, NCK
6. Ms. John Kariuki
7. Mr. Abdulatiff Ali
8. Mr. Onyango Abel
9. Mr. Daniel Kinyanjui
10. Mr. Solomon Kamau
11. Mr. Philip Mwololo
12. Mr. Duncan Mwai
13. Mr. Michael Onyango

### **MIN.NO. DCH 170/2016: PRELIMINARIES.**

The Acting Chairperson Hon. Dr. Robert Pukose, MP called the meeting to order at 10.24 am and a prayer was said by Hon. Dr. James Nyikal, M.P. He then stated that the agenda of the meeting was a follow up with the Kenya Medical Practitioners and Dentists' Board on the petition by Brian Onyango regarding alleged malpractices by Medanta Afri-Care Group of Hospitals, a private health facility. He then asked all those present to introduce themselves.

### **MIN.NO. DCH 171/2016: MEETING WITH THE CEO, MEDICAL PRACTITIONERS AND DENTISTS' BOARD ON THE PETITION BY BRIAN ONYANGO REGARDING ALLEGED MALPRACTICES BY MEDANTA AFRI-CARE GROUP OF HOSPITALS, A PRIVATE HEALTH FACILITY.**

The Acting Chairperson stated that the meeting was a follow up to an earlier one where the Kenya Medical Practitioners and Dentists' Board had been asked to undertake further investigations on the matter regarding alleged malpractices by Medanta Afri-Care Group of Hospitals, a private health facility and submit a comprehensive report to the Committee. He then welcomed the CEO, Kenya Medical Practitioners and Dentists' Board to make his presentation.

### **Presentation by the CEO, Medical Practitioners and Dentists' Board**

The CEO, Kenya Medical Practitioners and Dentists' Board, Mr. Daniel Yumbya, appeared before the Committee and informed it that on 17th May, 2016 and on 26th May, 2016 special sittings of the Preliminary Inquiry Committee ("PIC") were convened by the Board to undertake an inquiry on the complaint on the alleged medical malpractice as contained in the said Petition and the two letters from the

Departmental Committee of Health of the National Assembly dated 20th April, 2016 and that of 16th May, 2016.

The Preliminary Inquiry Committee carefully considered the complaint before it, reviewed all the evidence presented and copies of the documents submitted including, inspection report of the respondent's facilities and its satellite Clinics, submissions made on the matter and all other documents and made the following findings:

1. On the Registration and Licensing status of Africare Ltd Hospital, the Committee found that:
  - i) Africare Limited is duly incorporated under the Companies Act and has a valid registration certificate from the Medical Practitioners and Dentists Board dated 17<sup>th</sup> November, 2011 vide Serial Number: 002518. It also holds a valid operating license for the year 2016 vide Licence Number: 17012.
  - ii) The facilities operated by the respondent were owned by Africare Limited, a limited liability company which was incorporated on 10<sup>th</sup> September, 2010. The directors of the said company are as follows;-
    - a) Kishan Singhy Gehlot- Kenyan
    - b) Samit Kishan Gehlot-Kenyan
    - c) Ravi Kant Jaipuria-Indian
    - d) Chaitanya Nerikar-Indian
  - iii) "Medanta-Africare" is a registered mark of Africare Limited under the Trade Marks Act, Chapter 506 of the Laws of Kenya that was registered on 4<sup>th</sup> September, 2012 vide Trade Mark No.74013 in class 44 with respect of provision of medical services. The registration of the mark "Medanta-Africare", legally permits the Respondent to use it as its brand or trade name thereby distinguishing itself from other service providers.
2. On the Qualification and Nationality of the eleven (11) medical practitioners working at the Hospital, the Committee noted the list of the medical practitioners employed by the Hospital which their specific qualifications and nationality as set out hereunder; -

No	Name	Registration No.	Qualification	Nationality
1.	Dr. Paresh Dave	A 2989	MChB (NBI) 1988, M.Med (NBI),1993	Kenyan
2.	Dr. Aroon Kumar Handa	A.0973	MBBS (Bombay) 1971, FRCR (London),1977	Kenyan
3.	Dr. Kishorkumar DavelukKishor	A.2470	MBBS(Saurashtra), 1976	Kenyan
4.	Dr.	A.2959	MBBS	Kenyan

	KachhwahaKhushal Singh		(Rajasthan),1978 MD (Rajasthan),1985	
5.	Dr. Saran Kaur Khalsa	A.8037	MBChB (Nairobi),2010	Kenyan
6.	Dr. Elijah AyiekoKwasa	A.6402	MBChB(Nairobi),2007 M.Med (Radiology)(AKU),2014	Kenyan
7.	Dr.Hetand Kumar G. Shah	A.9594	MD (Volgograd),2012	Indian
8.	Dr. Vipul PurshottamNagnesia	A.8553	MBChB (Nairobi),2013	Kenyan
9.	Dr. Reema M.F. Din	A.3517	MBBS (Ismalia),1986	Kenyan
10.	Dr. PuneetJalan	L.I No. 006640	MBBS (Assa),2005, MD ,2009	Indian
11.	Dr. JugalallRekha	L.I No.00644	BDS (Manipal),2008	South African

In view of the above details, the Committee finds that the eleven (11) medical practitioners then working for the Respondent as listed above were qualified and duly licensed by the Board to offer medical services.

3. On alleged malpractice at Africare Limited, the Committee found that there was no evidence to support allegations that non-qualified personnel run endoscopy within the Respondent's facilities. The Committee noted from the documents presented that the personnel then employed by the Hospital were qualified and licensed by their respective professional bodies hence the Committee finds that there was no evidence to support the allegations of medical malpractice against the Respondent.
4. On classification of the Hospital as a level 4 facility and the general criteria used to classify medical facilities into various levels, the Committee reviewed the Board's classification of health institutions that is guided by Section B of the Medical Practitioners and Dentists Board (Requirements for Opening Health Institutions), which provides for the categorization of Health Institutions and requirements. The Committee noted that Section B thereto at part (m) provides that Hospital Level 4 is an institution which has the following;
  - a) Infrastructure: 50-100 inpatient beds **OR** has an outpatient or turnover of more than 250patients per day; An operating theatre; Radiology unit with X-Ray; Specialist clinics; MRI Machine; CT Scan Machine; Dialysis Machine; Endoscopy and Colonoscopy Unit; Mammography Machine; Ultrasound Machine.
  - b) Personnel: Has a resident doctor

The Committee noted that the Respondent's facility located along Waiyaki Way in Westlands within Nairobi was registered in 2011 as a medical centre and it also has a laboratory. The facility was thereafter inspected on 24<sup>th</sup> June, 2015 by the Board and the following was noted during the said inspection:

- a) The facility had a high patient load;
- b) The facility offered multiple specialized services in diverse fields, including, dialysis centre, cardiology, orthopaedics, ENT, Ophthalmology (Eye), paediatrics, gynaecology, internal medicine, physiotherapy, radiology, sonography services, oncocare, gastrocare, Vaccination, homecare and laboratory services; and,
- c) The facility had modern equipment which included the 3 Tesla MRI, 256 slice CT scan, Ultrasound, Digital X-ray, Mammogram and Bone Marrow Aspiration.

Following the said inspection, the Board approved and subsequently upgraded the said Respondent's facility to a Level 4 Institution as it had met the Board's minimum requirements at the said time.

5. On whether medical procedures undertaken at the Hospital were done by qualified personnel and whether they would require a patients' admission, the Committee found that the Respondent's facility along Waiyaki Way, Nairobi offers the following specialized medical services, among others;-
  - i) Bone Marrow Aspiration (BMA) – performed by Dr. Pares Dave
  - ii) Colonoscopy and Oesophagogastroduodenoscopy (OGD) - performed by Dr. Stephen Onyango Ayoo.
  - iii) Ultrasound guided biopsy or drainage-performed by Dr. Elijah Kwasa

The Committee further found that the Respondent had a theatre where day care surgeries or minor day care surgeries or procedures were undertaken. The Committee also noted that the Respondent had a referral agreement with M.P. Shah Hospital where patients who require hospitalization beyond a day were admitted. The Committee further found that establishment of the Hospital's day care surgery centre, was in line with accepted international standards.

6. On allegations of over testing and over prescription and breach of patient confidentiality by having CCTV cameras in the consultation rooms, the Committee found that there were no cameras in the consultation rooms as alleged in the petition and that installation of CCTV cameras in common areas within the Respondent's facilities does not infringe on patient's privacy. Further, there was no evidence to prove allegations that patients were subjected to over testing and over prescription.
7. On the number of patients referred to India and their diagnoses, the Committee perused the documents presented before it and noted that in the year 2015/2016, the Respondent referred seventy four (74) patients for



treatment in India. The Committee reviewed the Respondent's records and noted the cases relating to the referrals as specified hereunder; -

PATIENTS TREATED IN INDIA 2015/2016				
NO	SPECIALTY	SEX	REFERRING ENTITY	DIAGNOSIS
1	Aesthetics	F	Dr Consolata Mwangi	Prosthesis for the finger
2	Cardiology	M	AON insurance	Cardio pulmonary hypertension- Open Heart Surgery
3	Cardiology	F	SELF	ASD Device implantation
4	Cardiology	M	Dr Naomi Gachara	Large VSD-Surgery/ VSD closure with PA debanding
5	Cardiology	M	Dr Kinyanjui	Pacemaker Implantation
6	Dental	F	Dr Nadia Noordin	Fractured Bridge
7	ENT	M	Self	Cochlear Implant
8	G I Oncology	M	SELF	Carcinoma stomach- Stenting
9	G.I Surgery	M	self	Anal Fistula-Fistulectomy Surgery
10	G.I Surgery	F	Self	Morbid Obesity- Sleeve Gastrectomy
11	G.I Surgery	F	Dr Martin Muriithi	Irritable Bowel Syndrome
12	G.I Surgery	M	Dr Macharia Kiruhi	Upper GI Candidiasis
13	G.I Surgery	M	Dr C.N Change	recurrent abdominal issues
14	Gynae	F	SELF	Ascitic Fluid & DVT
15	Hepatology(Liver)	M	Self	Acute Nephritis & Herpes Simplex
16	Hepatology(Liver)	F	Dr Consolata Mwangi	Lesion of the liver- Liver transplant
17	Hepatology/Liver	F	Dr John Paul Waswa	Liver failure- Liver Transplant
18	Kidney	F	D.M.N Kinuthia	Chronic kidney failure-Kidney Transplant
19	Kidney	M	Dr Owiti	Kidney Failure-Kidney Transplant
20	Kidney	M	SELF	Kidney Failure-Kidney Transplant
21	Kidney	F	SELF	Recurrent Kidney stones Surgery
22	Neurology	F	Self	Meningioma- Cybeknife Radiotherapy
23	Neurology	F	AON insurance	lumbar spondylosis & osteoarthritis of L. Hip- Hip Replacement

24	Neurology	F	SELF	Dumbbell tumor-Surgery with implant
25	Neurology	F	SELF	Adrenal mass removal surgery
26	Neurology	M	SELF	Lumbar compression- Foramen Magnum Decompression
27	Neurology	M	Dr Saran Khalsa	Spinal canal stenosis- Surgery - TLIF 2 Level procedure
28	Neurology	F	Dr L. N Gachare	Thoracolumbar scoliosis-minimally invasive deformity correction
29	Neurology	F	Self	Glossopharyngeal Neuralgia
30	Neurology	F	Self	Degenerated Disc & Nerve Compression- TLIF 2 Level Procedure
31	Neurology	F	SELF	Chronic Migranes
32	Neurology	F	Self	Neomuscular complications
33	Neurology	F	Self	Transverse Myelitis
34	Neurology	M	SELF	lumbar osteoporosis-Lumbar Decompression surgery
35	Neurology	F	Self	Proximal muscle weakness-
36	Neurology	M	self	Intraventricular Heamorrhage-Digital Subtraction Angiography (DSA)
37	Neurology	F	Dr Lubanga	post traumatic CSF Fistula - Anterior Cranial Fossa Surgery
38	Neurology	F	Dr Lubanga	left cavernous sinus Meningioma-Radiosurgery
39	Neurology	M	SELF	Staged Reconstruction- Gracilis and Temporalis muscle transfer of the eye
40	Neurology	F	Dr Barbara Karau	Disc /Lumbar
41	Neurology	F	Dr Barbara Karau	Scoliosis diagnosis and Management
42	Neurology	F	Self	mass lesion lumbar -microsurgery for tumor removal
43	Neurology	M	Self	Degenerative Disc Dessication - repeat surgery - Intradural Extramedullary
44	Neurology	F	Dr Lubanga	Narrowing of spinal canal-Microsurgical Decompression surgery
45	Neurology	M	Dr M M Qureshi	Maxillofacial condition- Embolization

46	Neurology	M	SELF	Chronic lower Back Pain - Corpectomy & Lumbar Spine Surgery
47	Oncology	F	Dr Vijay Kumar	Breast cancer-PET Scan
48	Oncology	F	self	Breast invasive carcinoma-PET Scan/Palliative Chemotherapy
49	Oncology	M	Dr Wambugu	Colorectal Cancer Management-PET Scan/Chemotherapy
50	Oncology	M	Dr Gladwell Kiarie	Multiple Myeloma-PET Scan/Chemotherapy
51	Oncology	F	SELF	Colon CA-PET Scan/Chemotherapy
52	Oncology	F	SELF	Serous Cystadenocarcinoma-PET Scan/surgery as lymph node dissection
53	Oncology	F	Dr Paresh Dave	PET Scan
54	Oncology	M	Dr Khushal Singh	Right vocal cord swelling-Biopsy/PET Scan/ Surgery
55	Oncology	M	SELF	Histiocytoma-skeletal metastasis-PET Scan/Chemotherapy
56	Oncology	M	Joan Cain	Gastric Adenocarcinoma-PET Scan
57	Oncology	F	SELF	Colon CA - PET Scan/Chemotherapy/Surgery
58	Oncology	M	Dr Kinyanjui	Lung Cancer- PET Scan/Chemotherapy
59	Oncology	F	SELF	Breast cancer- Post Mastectomy Radiotherapy with IMRT technique
60	Oncology	M	Dr H. Saha	Adenocarcinoma colorectal- PET Scan
61	Oncology	F	SELF	PET Scan
62	Oncology	M	Dr Kimani Gicheru	gastric, colon polyp & anal mass-PET Scan/Surgery
63	Oncology	F	Self	Breast Cancer-PET Scan/post-mastectomy chest wall irradiation
64	Oncology	F	Self	Carcinoma gall bladder-PET Scan/Chemotherapy/Radiotherapy
65	Ophthalmology	M	Self	phthisis bulbi-ocular prosthesis
66	Ophthalmology	F	Dr Joseph M Nyamori	Diabetic Retinopathy- Corrective surgery
67	Ophthalmology	M	Dr P. T	Diabetic Retinopathy- Retinal

			Nyaga	surgery
68	Orthopaedics	F	SELF	Hip replacement complications- Revision Total Hip Replacement
69	Orthopaedics	F	Self	Osteoarthritis- Knee Replacement
70	Orthopaedics	M	Dr Assad Mughal	Hip Replacement Revision
71	Orthopaedics	M	Self	Malaligned knee joint- Knee Replacement
72	Rheumatology	F	Dr. Philip Samani	Systemic Lupus
73	Urology	M	Self	Urology complications- PET Scan/ Surgery
74	Urology	M	Dr Peter Wambugu	Urological Complication-Surgery

8. On allegations of Polio and Yellow fever vaccines being taken from public facilities and used at the Hospital, the Committee found that the Respondent's facility obtains vaccines from the Ministry of Health, Unit of Vaccines and Immunization, and also purchases vaccines from Laborex Kenya Limited. It is noteworthy that vaccines are provided to private facilities by the Ministry of Health without any fees but thereafter the requisite facilities incur administration costs and other related costs that may be passed to the patients who opt to use such facilities hence the allegation lacks merit.
9. On allegations of policemen having been subjected to full body MRI scan, the Committee found that a medical screening was initiated and organised by Medanta Africare Limited Hospital and the National Police Service Commission for police officers with injuries as part of police welfare. The Committee reviewed the correspondence exchanged between the Respondent and the National Police Service Commission and found that the screening of the police officers was offered at terms which had been mutually agreed by both parties. The Committee noted that a total of 135 police officers had been targeted for MRI screening as detailed below:-

NO.	AREA SCREENED	TOTAL
1.	Lumbar spine	30
2.	Brain	19
3.	Whole spine	12
4.	Right knee	12
5.	Regional;	9
6.	Left knee	7
7.	Whole abdomen	6
8.	Hips	4

9.	Pelvis	3
10.	Both knees	2
11.	Right hand wrist	2
12.	Cervical spine	2
13.	Right ankle	2
14.	Left ankle	2
15.	Left foot	2
16.	Chest	1
17.	Right shoulder	1
18.	Left shoulder	1
19.	Brain & Chest	2
20.	Lumbar spine & Hips	2
21.	Brain & Lumbar spine	2
22.	Right Knee & regional	2
23.	Cervical spine & regional	1
24.	Cervical spine & Brain	1
25.	Cervical spine & Lumbar spine	1
26.	Abdomen & chest	1
27.	Brain & Right Knee	1
28.	Cervical spine & right shoulder	1
29.	Regional & Hips	1
30.	Regional & right ankle	1
31.	Foot & ankle	1
32.	Hips & Right ankle	1
<b>TOTAL</b>		<b>135</b>

The Committee found that 296 police officers were examined out of which 135 police officers were subjected to directed MRI scans. The Committee further found that there was no evidence of the Police Officers being subjected to a full body MRI scan as alleged and the documents show that the MRI were justified.

10. The investigations carried out on the Respondent's satellite facilities by the Joint Health Regulatory Inspections team found out that:
- i) There was no nursing officer at Africare Limited, NHIF Building though a registered clinical officer performed nursing work.
  - ii) There was no nurse at Africare Limited, Fortis Suites.
  - iii) At Africare Limited, 5<sup>th</sup> Ngong Avenue, there was neither a Medical officer, clinical officer nor a nursing officer at the clinic. Only one staff member had been in employment for over one year, with the rest being in service for less than a year.
  - iv) The Africare Limited, Embakasi did not have a nursing officer.
  - v) At Africare Limited, TRM Branch, there was no infection control or emergency tray at the facility. Equally, there was no nursing officer.

vi) At Africare Limited, Krishna Park, the facility was found offering dental services without registration from the Medical Practitioners and Dentists Board.

11. The Preliminary Investigations Committee (PIC) then made the orders hereunder which were approved and adopted by the Full Board in its sitting of 13<sup>th</sup> June, 2016, that:

I). Africare Limited should be admonished by the Chairman of the Medical Practitioners and Dentists Board for operating some medical facilities without the necessary staff complement.

II). Africare Limited to employ and station nursing officers in the following facilities:

- a. NHIF Building,
- b. Mayfair,
- c. Fortis suites,
- d. 5<sup>th</sup> Ngong Avenue,
- e. Embakasi Clinic, and
- f. The TRM, Branch.

III). Africare Limited, to comply with (II) above within a period of Thirty (30) days from the date hereof and thereafter confirm compliance to the Chairman of the Medical Practitioners and Dentists Board.

IV). Africare Limited to close the dental unit within its facility located at Krishna Park with immediate effect pending registration and licensing by the Medical Practitioner and Dentists Board.

V). Africare Limited to ensure that all its medical facilities and clinics maintain and update a register of all referrals and that for patients requesting for diagnostic services within the Hospitals and outside.

VI). Africare Limited to ensure that all its Medical Centres are manned by qualified Medical Doctors or Registered Clinical Officers or Nurses or other duly licenced medical staff at all times.

VII). As a consequence of the inspection undertaken by the Board the Committee further directs that;

- a. The Respondent puts in place proper signage on all consultation rooms at its facility at the TRM along Thika Road. The same shall indicate the qualification of the cadre seeing patients.
- b. The Respondent institutes an infection prevention control protocol at the TRM Branch and also ensure it puts in place an emergency tray within the same facility.
- c. The Respondent to ensure that its Facility at the 5<sup>th</sup> Ngong Avenue within Nairobi is covered by a medical officer at all times.

d. The Respondent was directed to establish a client triage system at its NHIF facility.

VIII). The Respondent is directed to pay the Medical Practitioners and Dentists costs the sum of Kshs. 250,000/= as part costs for the sittings of the Preliminary Inquiry Committee of the Board.

IX). The Medical Practitioners and Dentists Board upon receipt of the report in (III) above be at liberty to make such further orders and directions as it deems fit.

12. The Preliminary Investigations Committee (PIC) made the following further recommendations, that:

- i) The Medical Practitioners and Dentists' Board constitutes a technical working group (TWG) to urgently spearhead the process of developing guidelines for referring patients for treatment overseas within (90) days from the date of adoption of the report.
- ii) The Inspection and Licensing Committee of the Medical Practitioners and Dentists' Board should review categorization of health facilities and ensure they are in line with the Constitution of Kenya (2010) and the Ministry of Health's categorization taking cognizance of the devolution process. The Committee should further categorize all the registered and licensed health facilities afresh using the new categorization within a period of ninety (90) days from the date of adoption of the report.
- iii) Matters related to human resource emanating from Africare Limited be forwarded to the Department of Labour in the Ministry of Labour, Social Security and Services for further investigation and appropriate action.

## MEMBERS' OBSERVATIONS

Members made the following observations with respect to the presentation, that:

1. The Medical Practitioners and Dentists Board appeared to be in defence of the facility in question as it relied on information largely provided by the facility in preparation of its report without a critical interrogation of the same.
2. The infrastructure said to be available in the facility was not ordinarily the kind of infrastructure found in level 4 facilities in the country.
3. The order on payment of a sum of Kshs. 250,000/= as part costs for the sittings of the Preliminary Inquiry Committee of the Board may had a bearing on the recommendations against the facility and their implementation.
4. Some referrals indicated in the presentation were not warranted as the cases in question could be handled locally.
5. The Memorandum of Understanding between *Africare Limited, Kenya* and *Global Health Private Limited, India* under the brand name "*Medanta – The Medicity*" was not authenticated.

6. It was illogical to indicate that patients were self-referring yet their referral records were with the facility.
7. The high number of police officers that underwent MRI scans raises concerns since MRI scans ought to be on case by case basis and not en masse.
8. It wasn't clear which entity takes legal responsibility in case of medical negligence or such other claims in the satellite facilities.
9. It wasn't clear how admission at MP Shah Hospital could be effected and there wasn't a rationale for using a theatre at the facility then transferring a patient to MP Shah Hospital.
10. The investigating team did not seek the help of experts to ascertain the presence of CCTV cameras in patient/consultation rooms.

## RESOLUTIONS

The Committee resolved as follows:

1. The Medical Practitioners and Dentists Board should submit a report to the Health Committee on implementation of its orders within one month from the date of the meeting.
2. The Medical Practitioners and Dentists Board should authenticate the veracity of the Memorandum of Understanding between *Africare Limited, Kenya* and *Global Health Private Limited, India* under the brand name "*Medanta – The Medicity*".
3. The Medical Practitioners and Dentists Board should verify information received from Africare Limited with respect to MRI scans on police officers with a sample of the police officers in question and relay the same to the Committee.
4. The Medical Practitioners and Dentists Board through the Ministry of Health should prepare amendments to the Kenya Medical Practitioners and Dentists Act to conform with the current Constitution.
5. The Medical Practitioners and Dentists Board should liaise with the Ministry of Health on regulations for levels of hospitals.
6. The Ministry of Health should come up with a referral policy.

MIN.NO. DCH 172/2016:                      ADJOURNMENT

There being no other business, the meeting was adjourned at 12.23 pm.

SIGNED: .....

HON (DR.) RACHAEL NYAMAI, M.P.  
CHAIRPERSON

DATE: .....



MINUTES OF THE 34<sup>TH</sup> SITTING OF THE DEPARTMENTAL COMMITTEE ON HEALTH HELD ON THURSDAY 12<sup>TH</sup> MAY, 2016, IN THE 4<sup>TH</sup> FLOOR COMMITTEE ROOM, CONTINENTAL HOUSE, PARLIAMENT BUILDINGS, AT 10.00 AM.

**PRESENT**

1. The Hon. Dr. Racheal Nyamai, M.P. (Chairperson)
2. The Hon. Dr. Robert Pukose, M.P. (Vice Chairperson)
3. The Hon. Michael Onyura, M.P.
4. The Hon. Dr. James Murgor, M.P.
5. The Hon. Raphael Milkau Otaalo, M.P.
6. The Hon. Leonard Sang, M.P.
7. The Hon. Kamande Mwangi, M.P.
8. The Hon. Dr. Dahir D. Mohamed, M.P.
9. The Hon. Stephen M. Mule, M.P.
10. The Hon. Zipporah Jesang, M.P.
11. The Hon. Alfred Agoi, M.P.
12. The Hon. David Karithi, M.P.
13. The Hon. Dr. James O. Gesami, M.P.
14. The Hon. Dr. Stephen Wachira, M.P.
15. The Hon. Paul Koinange, M.P.
16. The Hon. Dr. Naomi Shaban, M.P.

**ABSENT WITH APOLOGY**

1. The Hon. Dr. Susan Musyoka, M.P.
2. The Hon. Dr. Patrick Musimba, M.P.
3. The Hon. Alfred Sambu, M.P.
4. The Hon. Jared Opiyo, M.P.
5. The Hon. Robert Mbui, M.P.
6. The Hon. James Gakuya, M.P.
7. The Hon. Fred Outa, M.P.
8. The Hon. Mwinga Gunga, M.P.
9. The Hon. Joseph O. Magwanga, M.P.
10. The Hon. Dr. Enoch Kibunguchy, M.P.
11. The Hon. Dr. James Nyikal, M.P.
12. The Hon. John Nyaga Muchiri, M.P.
13. The Hon. Hassan Aden Osman, M.P.

**IN ATTENDANCE**

**Medanta Afri-Care Group of Hospitals Management**

- |                       |   |                               |
|-----------------------|---|-------------------------------|
| 1. Mr. Anil Maini     | - | Chief Executive Officer       |
| 2. Dr. Khushal Singh  | - | Director of Clinical Services |
| 3. Dr. A.J.O Were     | - | Nephrologist                  |
| 4. Mr. Alfred Gakumbi | - | Human Resource Manager        |
| 5. Mr. David Menyo    | - | Hospital Administrator        |

### **National Assembly Secretariat**

- |                        |   |                         |
|------------------------|---|-------------------------|
| 1. Ms. Esther Nginyo   | - | Third Clerk Assistant.  |
| 2. Ms. Ruth Mwhaki     | - | Third Clerk Assistant.  |
| 3. Mr. Dennis Mogare   | - | Third Clerk Assistant.  |
| 4. Ms. Marlene Ayiro   | - | Legal Counsel           |
| 5. Ms. Christine Maeri | - | Audio Recording Officer |

### **MIN.NO. DCH 139/2016: PRELIMINARIES.**

The Chairperson called the meeting to order at 10.28 am and a prayer was said by Hon. Dr. Robert Pukose, M.P. She then stated that the agenda of the meeting was meeting with The Management of Medanta Afri-Care Group of Hospitals on a Petition regarding alleged Irregularities at the Facility. She thereafter welcomed all those present to introduce themselves.

### **MIN.NO. DCH 140/2016: MEETING WITH THE MANAGEMENT OF MEDANTA AFRI-CARE GROUP OF HOSPITALS ON A PETITION REGARDING ALLEGED IRREGULARITIES AT THE FACILITY.**

The Chairperson took the meeting through the chronology of events since the petition in question was presented in the National Assembly. She then invited the Management of Medanta Afri-Care Group of Hospitals to make their presentation.

#### **Presentation by the Chief Executive Officer, Medanta Afri-Care**

The Chief Executive Officer, Medanta Afri-Care appeared before the Committee and informed it that:

1. On termination of employees without any reason, the management had terminated the services of Agaitano Atango (Brian) and Margaret Mburu due to being suspects of theft at the facility. Both had their cases pending in court. He also tabled a list of eight (8) others who had allegedly left the facility indicating that one resigned, one's contract ended, one was still working at the facility, one laid off due to alcoholism and insubordination, two declared redundant due to outsourcing and two others dismissed due to suspicion of theft.
2. On doctors' qualification at the facility, there was no single doctor whether full time or visiting worked at the facility without valid qualifications/certificates.
3. On unqualified endoscopy nurse doing endoscopies, the nurse doing endoscopies was trained and qualified both in endoscopy and OT with certificates.
4. On unqualified doctors performing endoscopies, endoscopy was being done by qualified endoscopists, fully certified by the Kenya Medical Practitioners and Dentists Board.
5. On expats working without valid work permits, not a single expat on Medanta Africare employment was working without a valid work permit.

6. On retrenchment and replacement of higher salaried Kenyan employees with low salaried employees, this was not the case and even the petitioner had not given data to substantiate the allegation. Equally, no local employees had been replaced by expats; instead local staffs were being promoted progressively to take on more significant roles at the facility.
7. On the facility sending patients to Medanta India and giving an incentive of USD 2000 to local doctors as fee for the same, all cases referred to Medanta, India were through consent given in writing and no fee was paid to local doctors for the referrals whatsoever. He submitted a list of 75 cases of patients referred to India.
8. On sending patients to Medanta, India for cases that could be treated locally, only those patients whose conditions could not be handled locally had been referred to India. He however clarified that some patients demand referrals to India because of personal preferences and because they could afford. He stated that the facility had no control over such. The renal cases that were being referred to India were second transplants which could not be easily carried out locally.
9. On the registered name of the facility, the facility was incorporated as *Africare Limited*; however it had *Medanta Africare* as its registered trademark.
10. On the number of facilities the Medanta Africare was running in the country, Medanta Africare had 14 clinics and 1 head quarter facility along Waiyaki Way, Nairobi. The facility had a total of 344 staff and only 13 were foreigners, the rest were Kenyans.
11. On the high turnover of staff at the facility, it was a challenge to all human resource practitioners facing a generation that was restless and wants to shift jobs often. Equally, the facility was rapidly expanding hence the high number of staff joining it in 2016.
12. On the unethical practice of having CCTV camera in patient rooms, the CCTV cameras were installed in waiting areas and public paces only.
13. On over treating and over prescription or prescription of unnecessary drugs for the sake of sales, the facility was not engaged in such malpractices.

## MEMBERS' OBSERVATIONS

Members observed that:

1. There was need to generate laws on organ transplants to ensure quality services were offered and available locally.
2. There was evidence that the Medanta Africare prioritized profit at the expense of healthcare through a series of emails exchanged among staff with regard to financial targets and the fact that the sales department had the highest number of staff at the facility.
3. There was a high staff turnover at the facility and majority of those in employment were recent recruits.

MIN.NO. DCH 141/2016: RESOLUTIONS

It was resolved as follows, that:

- i) The management of Medanta Africare should provide, within one day from the date of the meeting:
  - a) A letter it had written to the NHIF complaining about the use of the name Medanta Africare, which is its trademark, in the official contract with the fund.
  - b) The facility's human resource manual and policy.
- ii) The management of Medanta Africare should take steps to correct its registered name at the Kenya Medical Practitioner's and Dentists Board and the name it is referred to in the contract with the NHIF since both were irregular as they didn't tally with the name in its certificate of incorporation.

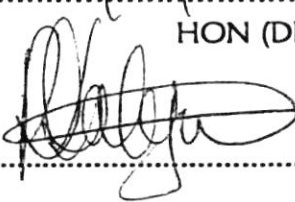
MIN.NO. DCH 142/2016: ADJOURNMENT

There being no other business the meeting was adjourned at 12.36 pm.

SIGNED: .....

16/6/2016

HON (DR.) RACHAEL NYAMAI, M.P.  
CHAIRPERSON



DATE: .....

MINUTES OF THE 29<sup>TH</sup> SITTING OF THE DEPARTMENTAL COMMITTEE ON HEALTH  
HELD ON THURSDAY 28<sup>TH</sup> APRIL, 2016 AT THE MEDANTA AFRICARE LIMITED,  
WESTLANDS, AT 10.00 AM.

**PRESENT**

1. The Hon. Dr. Racheal Nyamai, M.P. (Chairperson)
2. The Hon. Dr. Robert Pukose, M.P. (Vice Chairperson)
3. The Hon. David Karithi, M.P.
4. The Hon. Dr. Stephen Wachira, M.P.
5. The Hon. Dr. James Murgor, M.P.
6. The Hon. Fred Outa, M.P.
7. The Hon. Hassan Aden Osman, M.P.
8. The Hon. James Gakuya, M.P.
9. The Hon. John Nyaga Muchiri, M.P.
10. The Hon. Leonard Sang, M.P.
11. The Hon. Kamande Mwangi, M.P.
12. The Hon. Michael Onyura, M.P.
13. The Hon. Zipporah Jesang, M.P.

**ABSENT WITH APOLOGY**

1. The Hon. Alfred Agoi, M.P.
2. The Hon. Dr. Dahir D. Mohamed, M.P.
3. The Hon. Dr. James Nyikal, M.P.
4. The Hon. Christopher Nakuleu, M.P.
5. The Hon. Dr. Eseli Simiyu, M.P.
6. The Hon. Dr. Enoch Kibunguchy, M.P.
7. The Hon. Dr. James O. Gesami, M.P.
8. The Hon. Dr. Naomi Shaban, M.P.
9. The Hon. Raphael Milkau Otaalo, M.P.
10. The Hon. Joseph O. Magwanga, M.P.
11. The Hon. Mwinga Gunga, M.P.
12. The Hon. Stephen M. Mule, M.P.
13. The Hon. Paul Koinange, M.P.
14. The Hon. Dr. Susan Musyoka, M.P.
15. The Hon. Mwahima Masoud, M.P.
16. The Hon. Dr. Patrick Musimba, M.P.

**IN ATTENDANCE**

**NATIONAL ASSEMBLY SECRETARIAT**

- |                      |   |                        |
|----------------------|---|------------------------|
| 1. Ms. Esther Nginyo | - | Third Clerk Assistant. |
| 2. Ms. Ruth Mwhaki   | - | Third Clerk Assistant. |
| 3. Ms. Winnie Otieno | - | Audio Recorder         |
| 4. Mr. Nyambei       | - | Serjeant At Arms       |

## **MEDANTA AFRICARE HOSPITAL**

1. Mr. Anil K Maini - President /CEO.
2. Alfred Gakumbi - Head- Human Resource.
3. Dr. Kushal Sing - Director- Clinics
4. Deepak Sharma - Chief Operations Officer
5. Arjali Bajal - Senior Physician
- 6.
7. Alfred Nyamweya - Lab Technician
8. Jacob Ndegwa - Theatre Nurse
9. Judith Kibeti - Nurse
10. Bismark Kakai Samuel - Nurse

### **MIN.NO. DCH 120/2016: PRELIMINARIES.**

The Chairperson called the meeting to order at 10.30 am and invited the Members present, representatives and the Medanta Hospital representatives for a round of introductions.

The Chairperson thereafter informed the meeting that the visit was in response to a petition by one Mr. Brian Onyango regarding alleged medical malpractices at the facility. The purpose of the visit was for the Committee to assess the status and the health Service delivery at the Hospital.

### **MIN.NO.DCH 121/2016: INSPECTION TOUR AND METING WITH THE HOSPITAL ADMINISTRATION**

The Hospital administration gave the Committee guided tour of the facility's various departments which included; CT scan unit, MRI room, Renal Care (Dialysis) unit, endoscopy unit, laboratory, surgery Centre, Ultra Sound, Heart station, and Physiotherapy unit. The Committee also undertook an inspection of the Hospitals Satellite Clinic at the Thika Road Mall.

The Committee met with the Hospital administration and a Chairperson informed those present that the purpose of the meeting was to get clarifications from the management on various issued raised by the petitioners.

Mr. Anil. K. Maini, President and CEO of the hospital informed the Committee as follows that:

1. Hospital was 4 years old in Kenya and was part of a hospital group from India, Medanta Africare India.
2. The Hospital was started as a diagnostic Centre with the high end imaging, latest technology in MRI, Ultrasound, mammograms and laboratory among others. The hospital had expanded its services to include pharmacy, dialysis Centre, and a day care diagnostic Centre.

3. The Hospital was affordable, ethical and clinically sound and offered services to patients from all sections of society. Among the people served were Civil servants under the NHIF capitation programme with a capitation of Ksh. 1,200 per annum received for a family of 4.
4. The Hospital conducts free health camps for instance in Nyeri Town Constituency in collaboration with the area Member of Parliament and with the Kenya Police and their families. The Hospital had further worked with the Kenya Police Service Commission to diagnose 250 police officers from all over the country living with bullet wounds-free of charge(consultation and medicine was free but MRIs were charged).
5. The Hospital had 14 clinics spread in Nakuru, Kisumu, Mombasa, Thika, and seven (7) in Nairobi. It was undertaking an expansion programme to create a presence in all major towns and in all counties. The aim was to have 10 more clinics in the next four (4) months and 10 more by December 2016. The anticipated clinics would be full clinics, with a doctor, clinical officer, pharmacy, laboratory, and optometrists where space would allow and in some, visiting and senior specialists would be called to do outpatient.
6. At the time of the visit, Some clinics had clinical officers running them, others like Thika was only a laboratory, Mayfair Building in Upper Hill was operating a pharmacy and laboratory, Embakasi clinic had a clinical officer, pharmacy and laboratory, the Clinic next to KNH had a Pharmacy, laboratory and dental unit, TRM had a clinical officer and a laboratory. Services in various clinics varied depending on available space .The Hospital had employed 4 clinical officers to run some of its clinics. At the NHIF HQ clinic, a doctor (Dr. Mrs. Rhima Deen) was in charge.
7. For the clinics run by clinical officers, the officers have their certificates, visiting card that read clinical officers and the doors were marked appropriately.
8. The hospital was in the process of signing up with MP Shah Hospital Cardiac Centre to bring doctors from India. This was with an aim of making heart procedures to be done locally. The proposal for the same was in the process of getting approvals from KMPDB
9. The hospital was a day care facility attending to 200-300 patients per day and had a level 4 status and indicated on the KMPDB certificate that was tabled.
10. The Operating theatre had been operational for the last 6 months.
11. The hospital did not have an evacuation desk as alleged and Patients going to India made their own decisions. They approached the Hospital to give them medical reports which were evaluated by Dr. Khushal, after which these reports were then forwarded to Medanta India. Medanta India then sends back reports, accepting or denying the patients while at the same time indicating the costs of treatment for those who are accepted. Most patients referred to India are for high end cancer treatment.
12. The Hospital has one resident radiologist. it conducted 25 MRIs a day and had 3 radiographers for MRIs and CT scans.
13. The Renal Unit had a Resident Medical officer, clinical officer, and 7 nurses in the renal unit (trained in renal dialysis).

**Visit to the Hospitals Thika Road Mall Clinic**

- 14. The Committee was informed that the Consultation fee for clinical officer was Kshs. 850, while medical officer consultation fee was Kshs. 1000.
- 15. The Laboratory gets referrals from hospitals around with approximately 10 patients in a day in the chemist from referrals and five from clinics walk in patients for laboratory tests.
- 16. The employees are hired and put on a three months' probation period before confirmation. The Terms of employment were stated in the contract.

**Committee Observations:**

The Committee observed that:

- 1. There were CCTV cameras in the dialysis room allowing the hospital to view patients in the room. The hospital confirmed the cameras were there but reported that they were not working.
- 2. There were discrepancies with the names the facility was using as its signage and the letter heads indicated it as Medanta Afri-care Hospital while the Certificate of Incorporation was for Afri-Care Ltd.
- 3. The Hospitals contract letter with NHIF was signed with Medanta Africare Limited while the registration certificate was for Africare limited. The hospital reported that it had written back to the NHIF on the letter of engagement in order to have it corrected.
- 4. The Hospital was using Medanta Africare as a marketing name but their other transactions were for Africare limited since the hospital was incorporated ad Africare Limited.
- 5. The facility at the Thika Road Mall was being manned by a clinical officer whereas the tag at the door was indicating 'clinician' contrary to the submission by the CEO.
- 6. The facility was well equipped with the state of the art equipment in all its departments.

**Committee Resolution**

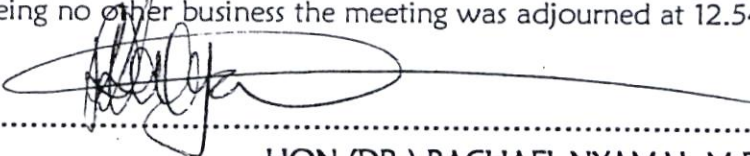
The Committee resolved that the Management of Medanta be invited to appear before the Committee at a later date to provide clarifications on various issues raised while the NHIF and the KMPDB would also be invited to appear before the committee to clarify on various issues of concern raised.

**MIN. NO. DCH 122/2016**

**ADJOURNMENT**

There being no other business the meeting was adjourned at 12.54 pm.

SIGNED.....



**HON (DR.) RACHAEL NYAMAI, M.P  
CHAIRPERSON**

DATE:.....

**11/09/2016**



MINUTES OF THE 28<sup>TH</sup> SITTING OF THE DEPARTMENTAL COMMITTEE ON HEALTH HELD ON TUESDAY 26<sup>TH</sup> APRIL, 2016, IN THE 5<sup>TH</sup> FLOOR COMMITTEE ROOM, CONTINENTAL HOUSE, PARLIAMENT BUILDINGS, AT 10.00 AM.

**PRESENT**

1. The Hon. Dr. Robert Pukose, M.P. (Vice Chairperson) - Chairing
2. The Hon. Michael Onyura, M.P.
3. The Hon. Dr. James Nyikal, M.P.
4. The Hon. Dr. Stephen Wachira, M.P.
5. The Hon. John Nyaga Muchiri, M.P.
6. The Hon. Hassan Aden Osman, M.P.
7. The Hon. Dr. James O. Gesami, M.P.
8. The Hon. Dr. James Murgor, M.P.
9. The Hon. Raphael Milkau Otaalo, M.P.
10. The Hon. Dr. Enoch Kibunguchy, M.P.
11. The Hon. Dr. Eseli Simiyu, M.P.
12. The Hon. Alfred Agoi, M.P.
13. The Hon. Mwinga Gunga, M.P.
14. The Hon. Leonard Sang, M.P.
15. The Hon. James Gakuya, M.P.
16. The Hon. Fred Outa, M.P.
17. The Hon. Stephen M. Mule, M.P.
18. The Hon. Zipporah Jesang, M.P.

**ABSENT WITH APOLOGY**

1. The Hon. Dr. Racheal Nyamai, M.P. (Chairperson)
2. The Hon. David Karithi, M.P.
3. The Hon. Paul Koinange, M.P.
4. The Hon. Dr. Susan Musyoka, M.P.
5. The Hon. Dr. Naomi Shaban, M.P.
6. The Hon. Mwahima Masoud, M.P.
7. The Hon. Joseph O. Magwanga, M.P.
8. The Hon. Kamande Mwangi, M.P.
9. The Hon. Dr. Dahir D. Mohamed, M.P.
10. The Hon. Christopher Nakuleu, M.P.
11. The Hon. Dr. Patrick Musimba, M.P.

**NATIONAL ASSEMBLY SECRETARIAT**

- |                      |   |                        |
|----------------------|---|------------------------|
| 1. Ms. Esther Nginyo | - | Third Clerk Assistant. |
| 2. Ms. Ruth Mwihaki  | - | Third Clerk Assistant. |
| 3. Ms. Marlene Ayiro | - | Legal Counsel II       |
| 4. Mr. Samuel Nyambe | - | SAA                    |
-

**MIN.NO. DCH 113 /2016: PRELIMINARIES.**

The Chairperson called the meeting to order at 10.27 am with a word of prayer by Hon. Mwinga Gunga, M.P.

**MIN.NO.DCH 114/2016: CONFIRMATION OF MINUTES**

Minutes of the 25<sup>th</sup> Sitting held on Thursday 14<sup>th</sup> April, 2016 at 10.00 a.m. were confirmed as the true record of the Committee's deliberations after being proposed and seconded by Hon. Michael Onyura, M.P. and Hon. Hassan Aden Osman, M.P. respectively.

Minutes of the 26<sup>th</sup> Sitting held on Tuesday 19<sup>th</sup> April, 2016 at 10.00 a.m. were confirmed as the true record of the Committee's deliberations after being proposed and seconded by Hon. Hon. Dr. Stephen Wachira, M.P., M.P. and Hon. Zipporah Jesang, M.P. respectively.

Minutes of the 27<sup>th</sup> Sitting held on Thursday 21<sup>st</sup> April, 2016 at 10.00 a.m. were confirmed as the true record of the Committee's deliberations after being proposed and seconded by Hon. Hassan Aden Osman, M.P. and Hon. Raphael Milkau Otaalo, M.P. respectively.

**MIN.NO.DCH 115/2016: MATTERS ARISING**

The following matters arose from the previous Minutes:

**1. Under MIN.NO.DCH 106/2016:**

- a. Members were informed the Committee visit to Medanta Africare group of Hospitals in Westlands was scheduled for Thursday 28<sup>th</sup> April at 10.00 am. and not as earlier proposed. Members would depart from Parliament Buildings at 9.00 am. The Committee was scheduled to meet with the Hospital management during the visit.

The Committee was also informed that the KMPDB would not accompany the Committee during the inspection visit as they had requested that they conduct an independent enquiry and report back to the Committee.

The Committee resolved to conduct the inspection visit as scheduled and further resolved not to meet with the Hospital management during the inspection visit but that the hospital CEO, Mr. Maini accompanied by the Director of Clinical services and the HR Manager is invited to appear before the Committee at a later date.

Members were informed that the petitioners had provided a written submission of the presentation and had requested for more time to compile the other documents requested by the committee.

MIN.NO.DCH 116/2016:

MEETING WITH THE PRINCIPAL SECRETARY, MINISTRY OF HEALTH AND THE CHIEF EXECUTIVE OFFICER NHIF ON THE PETITION REGARDING ALLEGED IRREGULARITIES AT MEDANTA AFRI-CARE GROUP OF HOSPITALS, A PRIVATE HEALTH FACILITY

The Committee was informed that the Principal Secretary would not attend the meeting and had requested for a rescheduling of the meeting to allow the Kenya Medical Practitioners and Dentists Board conduct independent investigations on the allegations made in the Petition and report back to the Principal Secretary.

The Committee resolved that the Principal Secretary should appear before the Committee on 5<sup>th</sup> May 2016.

The Committee was further informed that the CEO, NHIF would be appearing before the Committee on 5<sup>th</sup> May 2016 and to brief the Committee on the Petition as well as address other issues raised by the Committee concerning the increase in rebates by the NHIF.

MIN.NO.DCH 117/2016:

CONSIDERATION OF PROPOSED AMMENDMENTS TO THE STATUTE LAW (MISCELLANEOUS AMENDMENTS) BILL, 2014.

The Committee was informed that it had not been possible to separate the policy and implementation roles in the proposed amendment as requested by the Committee since all the functions were being carried by the Institute on behalf of the Ministry.

The following amendment had however been proposed to the Bill;

**SCHEDULE**

**THAT**, the Bill be amended in the Schedule—in the proposed amendments to the Cancer Prevention and Control Act (No. 15 of 2012) by deleting the words “national and” appearing immediately after the words “with the” in the proposed new section 5 and substituting therefor the words “Cabinet Secretary and the relevant”;

**Justification:**

The institute reports to the Cabinet Secretary.

**The Committee resolved** that the proposed amendment should be drafted in a manner that it is specific on the person the institute is to liaise with at the County level since the same clarification had been provided at the National level and therefore tasked the legal counsel to research and report back to the Committee on the same.

**MIN.NO.DCH 118/2016: ANY OTHER BUSINESS**

The Committee noted the following under this agenda item that:-

1. The Committee had received an invitation by the National Aids Control Council for a breakfast meeting in mid-May on a date to be communicated. The aim of the meeting was to brief the Committee and build consensus on Kenya's report to the UN General Assembly High Level Meeting on HIV and AIDS scheduled for June 8 – 10, 2016 in New York.

The Committee resolved to attend the Breakfast meeting and proposed that the meeting be scheduled on Wednesday, 4<sup>th</sup> May, 2016.

2. The Committee had received a letter from the Kenya Medical Practitioners and Dentists Board in regard to the irregular registration of a private Clinic, Eye and U. The Committee noted the Board's position that the issues raised were pure professional /business rivalry which the Board did not wish to be drawn to. The Committee however noted that during the enquiry into the petition, the CEO KMPDB had confirmed to the Committee that indeed the doctor in question had not undergone the requisite supervised attachment in order to qualify as an ophthalmologist. The Committee therefore resolved that the Board should satisfy the Committee that the said doctor has since met all the requirements to practice and has undergone the Supervision.
3. The Committee was informed that two senior Doctors, Prof Richard Muga and Prof George Magoha had raised issues of concern as highlighted in their article in the Daily Nation in regard to the Management of County referral Hospitals indicating that the county governments were overwhelmed by the management of the health sector. The Article further stated that the county referral hospitals should be run by the national government as State corporations.

The Committee deliberated on the matter and acknowledged that there was indeed a problem with the management of County Referral Hospitals. It was noted that during consideration of the Health Bill 2015, the Council of Governors negotiated that the County Referral Hospitals be managed by the County Governments while the National Government was free to establish National Referral Facilities within any county. The County governments were however not prioritizing allocation of funds to these facilities and the facilities were being run down.

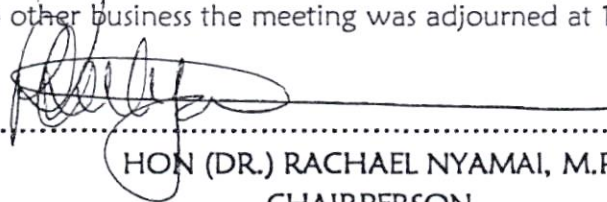
The Committee resolved to either lobby through the Senate once the Health Bill was committed to the Senate or to move amendments touching on the management of the County referral Hospitals once the Bill becomes law.

MIN.NO. DCH 119/2016

ADJOURNMENT

There being no other business the meeting was adjourned at 11.17 am.

SIGNED.....



HON (DR.) RACHAEL NYAMAI, M.P  
CHAIRPERSON

DATE:.....

16/6/2016



MINUTES OF THE 26<sup>TH</sup> SITTING OF THE DEPARTMENTAL COMMITTEE ON HEALTH HELD ON TUESDAY 19<sup>TH</sup> APRIL, 2016, IN THE 4<sup>TH</sup> FLOOR COMMITTEE ROOM, CONTINENTAL HOUSE, PARLIAMENT BUILDINGS, AT 10.00 AM.

PRESENT

1. The Hon. Dr. Racheal Nyamai, M.P. (Chairperson)
2. The Hon. Dr. Robert Pukose, M.P. (Vice Chairperson)
3. The Hon. Dr. James O. Gesami, M.P.
4. The Hon. Dr. Naomi Shaban, M.P.
5. The Hon. Michael Onyura, M.P.
6. The Hon. Dr. James Nyikal, M.P.
7. The Hon. John Nyaga Muchiri, M.P.
8. The Hon. Hassan Aden Osman, M.P.
9. The Hon. Dr. James Murgor, M.P.
10. The Hon. David Karithi, M.P.
11. The Hon. Raphael Milkau Otaalo, M.P.
12. The Hon. Dr. Enoch Kibunguchy, M.P.
13. The Hon. Dr. Stephen Wachira, M.P.
14. The Hon. Dr. Susan Musyoka, M.P.
15. The Hon. Paul Koinange, M.P.
16. The Hon. Mwinga Gunga, M.P.
17. The Hon. Leonard Sang, M.P.
18. The Hon. Joseph O. Magwanga, M.P.
19. The Hon. Dr. Dahir D. Mohamed, M.P.
20. The Hon. Stephen M. Mule, M.P.
21. The Hon. Kamande Mwangi, M.P.
22. The Hon. Zipporah Jesang, M.P.
23. The Hon. Christopher Nakuleu, M.P.
24. The Hon. Fred Ota, M.P.

ABSENT WITH APOLOGY

1. The Hon. Dr. Eseli Simiyu, M.P.
2. The Hon. James Gakuya, M.P.
3. The Hon. Alfred Agoi, M.P.
4. The Hon. Mwahima Masoud, M.P.
5. The Hon. Dr. Patrick Musimba, M.P.

NATIONAL ASSEMBLY SECRETARIAT

1. Ms. Esther Nginyo - Third Clerk Assistant.
2. Ms. Ruth Mwhaki - Third Clerk Assistant.

MIN.NO. DCH 105 /2016:

PRELIMINARIES.

The Chairperson called the meeting to order at 10.30 am with a word of prayer and thereafter welcomed Members present and the witnesses to the meeting and requested them to introduce themselves.

MIN.NO.DCH 106/2016:

MEETING WITH MR. BRIAN ONYANGO,  
PETITIONER IN THE PETITION REGARDING  
ALLEGED IRREGULARITIES AT MEDANTA AFRI-  
CARE GROUP OF HOSPITALS, A PRIVATE  
HEALTH FACILITY.

Pursuant the provisions of Standing Order 198, the Committee resolved to have the meeting closed to the Public.

Ms. Margaret Mburu and Mr. Brian Onyango, petitioners, appearing before the Committee informed the committee as follows:

**Background**

1. Ms. Margaret Mburu was a registered nurse by training with specialization in colonoscopy and was a former employee of the hospital where she was hired in 2014 having previously worked at Nairobi Hospital for 7 years and deployed an Endoscopy Unit Manager. Mr. Brian Onyango was a Housekeeping staff hired in 2013 and initially deployed under the supervision of Ms. Mburu in the dialysis unit. He was later transferred to the theatre as a cleaner. There were only two members of staff manning the dialysis unit at that time.
2. The hospital uses police to arrest staff after stage-managing crimes for them and this way they end up dismissing staff. They use the police to institute criminal charges and despite the real criminals being arrested they collude with the same police officers to up-hold charges.
3. In November 2015, the Colonoscopy machine was stolen and Brian was arrested as the main suspect and detained at Muthangari police station. Margaret was later arrested and detained in police custody on the same allegations. The machine been a refurbished one was valued at Kshs 700,000, however hospital management inflated its value while providing information on the machine's worth at Kshs. 3.5million shillings. The inflation was meant to ensure that the highest bond possible given. The bond was set at Kshs.500, 000 and Kshs. 800, 000 for Ms. Mburu and Mr. Onyango respectively after which they were released on paying. Mr. Onyango was held at the Industrial Area Remand prison for a month until he was able to raise the bail. They were also dismissed from work pending investigations.
4. Mr. John Owire, a former member of staff fired for theft confessed to having stolen the colonoscopy machine. On 13<sup>th</sup> November of 2015, the suspects were arraigned in court and charged with stealing of the colonoscopy machine. Despite the hospital having evidence after identifying the real suspect through the CCTV footage, the hospital is yet to drop the charges against Mr. Onyango and Ms. Mburu. The real suspect allegedly disappeared from the police custody.



### Medical Malpractices at the Hospital

5. There is a desk specifically for medical evacuations of patients to their mother hospital Medanta India. Patients are made to believe that the procedures they are referred for are not available locally or they are poorly done. Examples of hip replacement and kidney transplant. The Doctors are allegedly paid about USD 2000 once they facilitate evacuations to India.
6. The Hospital pays commissions to people who refer patients there. There is specifically a desk for this manned by members of Staff (Erick and Aggrey). The Commissions are allegedly paid on Saturdays via Mpesa
7. Patients are forced to have unnecessary tests e.g. CT scans and Chest scans for Flu's and unnecessary laboratory tests. There are commissions paid to doctors who order these tests done. The doctors therefore tend to order for unnecessary tests to earn more commission.
8. Some drugs are commonly abused for instance multi vitamins, Pabrinex and Venofer injections due to their high cost and to ensure sales. For Instance the Director of Clinical Services, Dr. Khushal had been supplied with Venofer and in order for the drug to sell fast; it was being prescribed unnecessarily in some cases. He also allegedly forces patients to have Vitamin D injections which are costly. The explanation given to patients is that they do not get adequate sunlight because of long hours in the office. Women above 40 years of age are also subjected to unnecessary hormone profiles. Patients are also screened for HIV without proper procedures and counseling followed as there is no certified counsellor in the hospital.
9. The Hospital currently has no qualified staff to manage the Endoscopy unit and the unit is being operated by nurse aids/technicians despite all the procedures being done under sedation with DDA drugs. Some of the Hospitals Satellite clinics are run by Clinical Officers who pose as Doctors and patients are made to believe so. Examples are 'Doctor Sheilla' of Embakasi clinic.
10. The hospital has no head of nursing services, no fluid charts in use even in sensitive areas like dialysis unit, does not conduct routine checks for electrolytes in the dialysis unit, has no emergency trolleys and has no functional crash cart. A patient recently died because there were no resources for intubation. Important drugs are also not available like insulin and potassium chloride. This is despite having an active dialysis unit. Further, the hospital has no working bio-hazard ventilator for mixing oncology drugs thus exposing the workers and patients to the dangerous fumes.
11. NHIF has signed a pact for the evacuations thereby fleecing the public. They also have a questionable working relationship with the hospital. For instance, the CEO took a few members of NHIF staff to visit India in February, 2016.
12. During a police camp held in September, 2015 all the police officers were ordered for MRI tests and the hospital was paid about Kshs. 11 million by NHIF as claim for services offered during the camp. Senior police officers have also benefited fraudulently from the scheme by being referred to Medanta India for treatment of conditions that can be treated locally and the NHIF covering the bill. The

- hospital also inflates patient's bills for NHIF patients especially for theatre cases where there are no fixed charges.
13. The Hospital allegedly acquires vaccines for free from government facilities and sells them to patients. Example of Yellow fever vaccine that is sold at Kshs. 3000 and polio vaccine that is sold at Kshs. 1000.
  14. The Hospital has installed CCTV cameras that view patients while undergoing treatment. An example is the dialysis unit where the cameras are used to view the number of patients for logistics purposes. This is a breach of confidentiality.
  15. Some members of staff are operating with expired work permits or in positions not provided for in their work permit e.g. Mrs Anitya Deepak the General Manager and Mr. Deepak Sharman the Chief Operation Officer respectively.
  16. There is no disciplinary procedure in place as a human resource policy. The Disciplinary committee usually makes a unilateral disciplinary decision. For instance, on 24<sup>th</sup> October 2015, a memo was issued by the C.E.O Mr. Anil Maini through the Human Resource Manager that all staff should extend working hours. Being a Saturday they were supposed to work until 1p.m, however the memo stated that they should leave at 5pm to compensate for business lost on 20<sup>th</sup> October which was a public holiday. Those who defied the order were issued with a show cause letter from HR Department why they should not be 'replaced'. The Hospital also reduces of staff salaries against the human resource practices. An example of Sylvester an oncology clinical officer. The hospital has also tapped employee and some ex-employees phones. The HR Manager once released a memo online that contained staff details e.g. age, marital status, number of children. This is a breach to staff confidentiality.
  17. There is intimidation of staff by the HR Manager Mr. Alfred Gakumbi; for example in December 2015 he sacked all the cleaners to pave way for a contracted company. He started re-employing them after the petition was read in Parliament. He has also allegedly spent the last few weeks talking to staff that he had sacked in an attempt to reinstate them. It is also alleged that he has been forging papers to justify terminations of other staffs.

**The Committee resolved as follows:**

1. That the meeting scheduled for Thursday 21<sup>st</sup> April 2016 with the Medanta Hospital CEO be postponed to allow the Committee to conduct an inspection visit to the Hospital before taking evidence from the CEO. Consequently, the Committee resolved to conduct the inspection visit on Wednesday 27<sup>th</sup> April 2016 and thereafter the hospital CEO, Mr. Maini accompanied by the Director of Clinical services and the HR Manager to appear before the Committee on 28<sup>th</sup> April 2016.
2. That the petitioners provide a written submission of the presentation and avails copies of the statements made by the petitioners at Muthangari Police station and copies of the bond receipt to the Committee.
3. That the Ministry of Health, NHIF, Kenya Medical Practitioner and Dentists Board and the Police be invited to the Committee to respond to various issues arising out of the Petition.

4. That the NHIF provides contracts between them and Medanta and also provides information on the total number of referrals to India for treatment covered by NHIF and how many of those referrals are from Medanta Africare Kenya, the purpose, and the amount of claims paid to the Hospital for the same

**MIN.NO.DCH 107/2016: ANY OTHER BUSINESS**

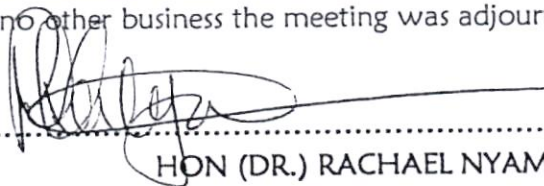
The Committee noted the following under this agenda item that:-

- i. The Departmental Committee on Education had invited the Cabinet Secretary for Health on 21<sup>st</sup> April 2016 to deliberate on the Kenya Medical Training Colleges and Kenya Universities and Colleges Central Placement Services (KUCCPS). The Committee resolved to have a representation in the meeting and nominated Hon. Dr. Robert Pukose, Hon.Dr. James Nyikal and Hon.Dr. James Murgu to represent the Committee in the said meeting.
- ii. The Devolution Conference was scheduled to take place from 19<sup>th</sup> to 21<sup>st</sup> April 2016 in Meru and it would have been important to have the Committee represented at the meeting given that the National Government had a role in the Health Sector despite Health being a devolved function. It was however noted that there was no formal invitation for the Committee to attend the Conference.
- iii. It was resolved that Members be provided with a schedule for meetings over the recess period to enable them plan for them.
- iv. The Committee noted that it had collected enough evidence on the matter of Clinix Health Care Ltd, Meridian Medical Centre and the NHIF to conclude its report. It therefore resolved that the invitation to the Director of Public Prosecution be cancelled.

**MIN.NO. DCH 108/2016 ADJOURNMENT**

There being no other business the meeting was adjourned at 12.30 pm.

SIGNED.....



HON (DR.) RACHAEL NYAMAI, M.P  
CHAIRPERSON

DATE:.....

26<sup>th</sup> April 2016

**ANNEXE III**

**LEVEL 4 STATUS REGISTRATION CERTIFICATE**

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**THE MEDICAL PRACTITIONERS AND DENTISTS ACT**  
(Cap. 253)

**CERTIFICATE OF REGISTRATION AS A PRIVATE MEDICAL INSTITUTION**

**AFRICARE LTD HOSPITAL**

Institution Name

**P.O.Box 66680 00800 NAIROBI**

Postal Address

**Hospital Level 4**

Institution Type

Has been registered as a Private medical institution in accordance with rule 4(3) of the Medical Practitioners and Dentists (Private Medical Institutions) Rules.

Dated this 17th November 2011.

**Prof. George A.O. Magoha**  
MBBS,FMCS,FWACS,FCS  
Chairman

**Medical Practitioners and Dentist Board**

**Dr. Nicholas M. Muraguri**  
OGW,MBChB,MPH,MBA  
Registrar

**Medical Practitioners and Dentist Board**

**Footnotes:**

1. It shall be the duty of the holder of this certificate to inform the Registrar within 14 days of any change in the registered address in accordance with section 5 of the Medical Practitioners and Dentists (Private Medical Institutions) Rules.



**ANNEXE IV**

**LIST OF EMPLOYEES WHO HAD ALLEGEDLY LEFT THE FACILITY**

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## RESPONSE TO PETITION ON UNFAIR TERMINATION/DISMISAL

1. Petition number (iii & vii) is not a fact. Any employee who has been terminated/dismissed has committed a gross misconduct in one way or another. Specifically, the following are crimes committed by employees on the list and all documents are on records and in respective employee files which can be provided for scrutiny;

	NAME	DESIGNATION	REASON
1	Agaitano Atango	Cleaner	Suspect of theft and detained in remand for 1 month. Also he had been caught stealing before and arrested but was forgiven by company
2	Margaret Mburu	Endoscopy manager	Suspect of theft and after police investigations, they indicated her as the major suspect and she was charged in court.
3.	Nick Wainana	Radiographer	Involved in theft of contrast
4	Rebeca Awuor	Nurse	Involved in theft of contrast
5	Osciah Mutwasi	Area sales mngr	Alcoholism at work and insubordination of his boss and the CEO.
6	Ruth Wasiroma	Pharmtech	Resigned.
7	Dennis Ogoti	messenger	Still employed with Africare
8	Paul Okwach	QC manager	Declared redundant after his task was complete and no longer required
9	Esther Kibera	Nurse	End of contact
10	Fredrick Ondieki	Housekeeper	Declared redundant after cleaning services were outsourced



**ANNEXE V**

**LIST CASES OF PATIENTS REFERRED TO INDIA.**

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LIST PROVIDED BY AFRICARE LTD

MEDANTA REFERRAL 2015 PATIENT DATA							
S.NO	PATIENT NAME	SPECIALITY	SEX	REFERRING DOCTOR	DIAGNOSIS	MEDANTA TREATING DOCTOR	DATE OF TRAVEL
1		Neurology	F	Self	Meningioma	Aditya Gupta	23/03/2016
2		Hepatology/Liver	F	Dr HJohn Paul Waswa	Liver failure	Dr Neelam Mohan & Sooin	18/03/2016
3		Oncology	F	Dr Vijay Kumar	Breast cancer	Ashok K Vaid	17/03/2016
4		Oncology	F	self	Breast invasive carcinoma	Ashok K Vaid & Devender Sharma	9/3/2016
5		Cardiology	M	AON insurance	Cardio pulmonary hypertension	Naresh Trehan & Pankaj Bajpai	2/3/2016
6		G.I Surgery	M	self	Anal Fistula	Adarsh Choudhary	28/02/16
7		Dental	F	Dr Nadia Noordin	Fractured Bridge	Amrita Gogia	28/02/16
8		Oncology	M	Dr Wambugu	Colorectal Cancer Management	Adarsh Choudhary & Savio George Bar	22/02/2016
9		Neurology	F	AON insurance	lumbar sponylosis & osteoarthritis	Ajaya Nand Jha	22/02/2016
10		Neurology	F	SELF	Dumbbell tumor	A. N Jha	16/02/16
11		Ophthamology	M	Khushal Singh	phthisis bulbi	Sudipto Pakrasi	12/2/2016
12		G.I Surgery	F	Saran Khalsa	Morbid Obesity	Mriganka Sharma	12/2/2016
13		Ophthamology	F	Dr Joseph M Nyamori	Diabetic Retinopathy	Sudipto Pakrasi & Indrish Bhatia	11/2/2016
14		Oncology	M	Dr Gladwell Klarie	Multiple Myeloma	Ashok K Vaid & Nitin Sood	6/2/2016
15		Oncology	F	SELF	Colon CA	Ashok K Vaid	24/01/2016
16		Neurology	F	SELF	Adrenal mass	Dr Manav Suryavanshi	21/01/16
17		Ophthamology	M	Dr P. T Nyaga	Diabetic Retinopathy	Sudipto Pakrasi & Indrish Bhati	19/01/16
18		Neurology	M	SELF	Lumbar compression	A. Nand Jha & Sudhir Dubey	14/01/16
19		Urology	M	Self	Urology complications	Rajesh Ahlawat	11/1/2016
20		Neurology	M	Dr Saran Khalsa	Spinal canal stenosis	Ajaya Nand Jha	8/1/2016
21		Neurology	F	Dr L. N Gachare	Thoracolumbar scoliosis	Aditya Gupta	07/01//16
22		Oncology	F	SELF	Serous Cystadenocarcinoma	Ashok K Vaid	30/12/15
23		Cardiology	F	SELF	ASD Device	Naresh Trehan & Manish Bansal	23/12/15
24		Orthopaedics	F	SELF	Hip replacement complications	Ashok Rajgopal	19/12/2015
25		Oncology	F	Dr Paresh Dave	PET Scan	Ashok K Vaid	15/12/15
26		Neurology	F	Dr Devluk Kishor	Glossopharyngeal Neuralgia	A. Nand Jha	8/12/2015
27		Oncology	M	Dr Khushal Singh	Right vocal cord swelling	Ashok K Vaid & Devender Sharma	8/12/2015
28		Neurology	F	Aditya Gupta	Degenerated Disc & Nerve Compres	Aditya Gupta	1/12/2015
29		Oncology	M	SELF	Histioytoma-skeletal metastasis	Ashok K. Vaid	30/11/15
30		G.I Surgery	F	Dr Martin Muriithi	Irritable Bowel Syndrome	Randhir Sud & Amit Bhasin	23/11/15
31		Orthopaedics	F	Dr Saran Khalsa	Osteoarthritis	Ashok Rajgopal	23/11/15
32		Health Check	F	Self	Health Check		19/11/2015
33		Kidney	F	D.M.N Kinuthia	Chronic kidney failure	Sidarth Kumar Sethi	18/11/15
34		ENT	M	Dr Saran Khalsa	Deaf	K.K Handa	10/11/2015

35		Neurology	F	SELF	Migranes	Sumit Singh	10/11/2015
36		Oncology	M	Joan Cain	Gastric Adenocarcinoma	Ashok K Vaid	9/11/2015
37		Oncology	F	SELF	colon CA	Sandeep Batra	29/10/15
38		Hepatology(Liver)	M	Dr Khushal Singh	Acute Nephritis & Herpes Simplex	Narendra Singh Choudhary	28/10/15
39		Urology	M	Dr Peter Wambugu	Urological Complication	N.P Gupta	26/10/15
40		Kidney	M	Dr Owiti	Kidney Failure	Vijay Kher	20/10/2015
41		G.I Surgery	M	Dr Macharia Kiruhi	Upper GI Candidiasis	Adarsh Choudhary	12/10/2015
42		Cardiology	M	Dr Naomi Gachara	Large VSD	Naresh Trehan & Munesh Tomar	12/10/2015
43		Neurology	F	Aditya Gupta	Neomuscular complications	Sumit Singh	11/10/2015
44		Kidney	M	SELF	Kidney Failure	Dr Vijay Kher	8/10/2015
45		Neurology	F	Aditya Gupta	Transverse Myelitis	Aditya Gupta	23/09/15
46		Orthopaedics	M	Dr Assad Mughal	Hip Replacement Revision	Ashok Rajgopal	24/09/15
47		Neurology	M	SELF	lumbar osteoporosis	A. N Jha	23/09/15
48		Gynae	F	SELF	Ascitic Fluid & DVT	Sabatya Gupta & Rajiv Parakh	21/09/15
49		Neurology	F	SUMIT SINGH	Proximal muscle weakness	Sumit Singh	14/09/15
50		Oncology	M	Dr Kinyanjui	Suspected Lung CA	Nitin Sood & Ashok K Vaid	12/9/2015
51		Oncology	F	SELF	Breast cancer	Kanchan Kaur	6/9/2015
52		Cardiology	M	Dr Kinyanjui	Heart ailment-pacemaker	Naresh Trehan	4/9/2015
53		Neurology	M	self	Intraventricular Hemorrhage	A N Jha	30/8/15
54		Neurology	F	Dr Lubanga	post traumatic CSF Fistula	A N Jha	19/08/15
55		Neurology	F	Dr Lubanga	Meningioma	A.N Jha	10/8/2015
56		Oncology	M	Dr H. Saha	Adenocarcinoma colorectal	Ashok K Vaid	6/8/2015
57		Rheumatology	F	Dr. Philip Samani	Systemic Lupus	Rajiva Gupta	27/07/2015
58		Health Check	M	SELF	Health Check		19/7/2015
59		Neurology	M	SELF	Staged Reconstruction	Aditya Aggarwal	16/07/15
60		Neurology	F	Dr Barbara Karau	Disc /Lumbar	Ajaya Nand Jha	15/07/15
61		Neurology	F	Dr Barbara Karau	Scoliosis	Sumit Singh	15/07/15
62		Health Check	M	SELF	Health Check		13/7/15
63		Neurology	F	Dr Reema Din	mass lesion lumbar	Aditya Gupta	12/7/2015
64		Health Check	F	SELF	Health Check		5/7/2015
65		Health Check	F	SELF	Health Check		5/7/2015
66		Health Check	F	SELF	Health Check		5/7/2015
67		Aesthetics	F	Dr Consolata Mwangi	Prosthesis	Rakesh Kumar Khazanchi	23/06/15
68		Neurology	M	A.N Jha	Degenerative Disc Dessication	A. N Jha	23/06/15
69		Health Check	F	SELF	Health Check		19/06/15
70		Hepatology(Liver)	F	Dr Consolata Mwangi	Lesion of the liver	Dr A. S. Soin	6/6/2015
71		G I Oncology	M	SELF	Carcinoma stomach	Randir Sud	30/05/15

72		G.I Surgery	M	Dr C.N Chunge	recurrent abdominal issues	Randhir Sood & Amit Bhasin	22/05/15
73		Oncology	F	SELF	PET Scan	Ashok K Vaid	24/05/15
74		Health Check	F	SELF	Health Check		19/5/15
75		Orthopaedics	M	Saran Khalsa	Malaligned knee joint	Himanshu Garg	10/5/2015
76		Neurology	F	Dr Lubanga	Narrowing of spinal canal	Aditya Gupta	9/5/2015
77		Health Check	F	SELF	Health Check		4/5/2015
78		Oncology	M	Dr Kimani Gicheru	gastric, colon polyp & anal mass	Ashok K Vaid	30/04/15
79		Kidney	F	SELF	Recurrent Kidney stones	Dr Rakesh Khera	28/04/15
80		Neurology	M	Dr M M Qureshi	Maxillofacial condition	Rajiv Parakh	25/04/15
81		Oncology	F	Ashok K Vaid	Breast Cancer	Ashok K Vaid	13/04/15
82		Neurology	M	SELF	Chronic lower Back Pain	A. N Jha & Sudhir Dubey	3/4/2015
83		Oncology	F	Dr Ashok K Vaid	Carcinoma gall bladder	DR Askok K Vaid	13/03/15

# LIST PROVIDERS BY THE KMPDB

MEDANTA REFERRAL 2015/2016 PATIENT DATA					
S.NO	PATIENT NAME	SPECIALITY	SEX	DIAGNOSIS	Managed without surgery
1		Aesthetics	F	Prosthesis for the finger	
2		Cardiology	M	Cardio pulmonary hypertension-Open Heart Surgery	
3		Cardiology	F	ASD Device Implantation	
4		Cardiology	M	Large VSD-Surgery/ VSD closure with PA debanding	
5		Cardiology	M	Pacemaker Implantation	
6		Dental	F	Fractured Bridge	
7		ENT	M	Cochlear Implant	
8		G I Oncology	M	Carcinoma stomach- Stenting	
9		G.I Surgery	M	Anal Fistula-Fistulectomy Surgery	
10		G.I Surgery	F	Morbid Obesity- Sleeve Gastrectomy	
11		G.I Surgery	F	Irritable Bowel Syndrome	Management by medication
12		G.I Surgery	M	Upper GI Candidiasis	Management by medication
13		G.I Surgery	M	recurrent abdominal issues	Management by medication
14		Gynae	F	Ascitic Fluid & DVT	Management by medication
15		Hepatology(Liver)	M	Acute Nephritis & Herpes Simplex	Management by medication
16		Hepatology(Liver)	F	Lesion of the liver- Liver transplant	
17		Hepatology/Liver	F	Liver failure- Liver Transplant	
18		Kidney	F	Chronic kidney failure-Kidney Transplant	
19		Kidney	M	Kidney Failure-Kidney Transplant	
20		Kidney	M	Kidney Failure-Kidney Transplant	
21		Kidney	F	Recurrent Kidney stones Surgery	
22		Neurology	F	Meningioma- Cybeknife Radiotherapy	
23		Neurology	F	lumbar sponylosis & osteoarthritis of L. Hip- Hip Replacement	
24		Neurology	F	Dumbbell tumor-Surgery with implant	
25		Neurology	F	Adrenal mass removal surgery	
26		Neurology	M	Lumbar compression- Foramen Magnum Decompression	
27		Neurology	M	Spinal canal stenosis- Surgery - TLIF 2 Level procedure	
28		Neurology	F	Thoracolumbar scoliosis-minimally invasive deformity correction	
29		Neurology	F	Glossopharyngeal Neuralgia	Management by medication
30		Neurology	F	Degenerated Disc & Nerve Compression- TLIF 2 Level Procedure	
31		Neurology	F	Chronic Migranes	Management by medication

32	Neurology	F	Neomuscular complications	Management by medication
33	Neurology	F	Transverse Myelitis	Management by medication
34	Neurology	M	lumbar osteoporosis-Lumbar Decompression surgery	
35	Neurology	F	Proximal muscle weakness-	Management by medication
36	Neurology	M	Intraventricular Heamorrhage-Digital Subtraction Angiography (DSA)	
37	Neurology	F	post traumatic CSF Fistula -Anterior Cranial Fossa Surgery	
38	Neurology	F	left cavernous sinus Meningioma-Radiosurgery	
39	Neurology	M	Staged Reconstruction- Gracilis and Temporalis muscle transfer of the eye	
40	Neurology	F	Disc /Lumbar	Management by medication
41	Neurology	F	Scoliosis diagnosis and Management	
42	Neurology	F	mass lesion lumbar -microsurgery for tumor removal	
43	Neurology	M	Degenerative Disc Dessication -repeat surgery – Intradural Extramedullary	
44	Neurology	F	Narrowing of spinal canal-Microsurgical Decompression surgery	
45	Neurology	M	Maxillofacial condition-Embolization	
46	Neurology	M	Chronic lower Back Pain -Corpectomy & Lumbar Spine Surgery	
47	Oncology	F	Breast cancer-PET Scan	
48	Oncology	F	Breast invasive carcinoma-PET Scan/Palliative Chemotherapy	
49	Oncology	M	Colorectal Cancer Management-PET Scan/Chemotherapy	
50	Oncology	M	Multiple Myeloma-PET Scan/Chemotherapy	
51	Oncology	F	Colon CA-PET Scan/Chemotherapy	
52	Oncology	F	Serous Cystadenocarcinoma-PET Scan/surgery as lymph node dissection	
53	Oncology	F	PET Scan	
54	Oncology	M	Right vocal cord swelling-Biopsy/PET Scan/ Surgery	
55	Oncology	M	Histiomyoma-skeletal metastasis-PET Scan/Chemotherapy	
56	Oncology	M	Gastric Adenocarcinoma-PET Scan	
57	Oncology	F	Colon CA - PET Scan/Chemotherapy/Surgery	
58	Oncology	M	Lung Cancer- PET Scan/Chemotherapy	
59	Oncology	F	Breast cancer- Post Mastectomy Radiotherapy with IMRT technique	
60	Oncology	M	Adenocarcima colorectal- PET Scan	
61	Oncology	F	PET Scan	
62	Oncology	M	gastric, colon polyp & anal mass-PET Scan/Surgery	
63	Oncology	F	Breast Cancer.-PET Scan/post-mastectomy chest wall irradiation	
64	Oncology	F	Carcinoma gall bladder-PET Scan/Chemotherapy/Radiotherapy	

65	Ophthalmology	M	phthisis bulbi-ocular prosthesis	
66	Ophthalmology	F	Diabetic Retinopathy- Corrective surgery	
67	Ophthalmology	M	Diabetic Retinopathy- Retinal surgery	
68	Orthopaedics	F	Hip replacement complications- Revision Total Hip Replacement	
69	Orthopaedics	F	Osteoarthritis- Knee Replacement	
70	Orthopaedics	M	Hip Replacement Revision	
71	Orthopaedics	M	Malaligned knee joint- Knee Replacement	
72	Rheumatology	F	Systemic Lupus	Management by medication
73	Urology	M	Urology complications- PET Scan/ Surgery	
74	Urology	M	Urological Complication-Surgery	

**ANNEXE VI**

**CERTIFICATES OF INCORPORATION AND KMPDB REGISTRATION  
CERTIFICATES**

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No. CPR/2010/30812

## CERTIFICATE OF INCORPORATION

I hereby CERTIFY, that -

**AFRICARE LIMITED**

is this day Incorporated under the Companies Act (Cap. 486) and that the Company is LIMITED.

GIVEN under my hand at Nairobi this 10<sup>th</sup> day of September Two Thousand and Ten



Registrar Of Companies





## REPUBLIC OF KENYA

 THE TRADE MARKS  
 ACT  
 (CAP. 506)

## CERTIFICATE OF REGISTRATION OF TRADE MARK

(Rule 63)

Trade Mark:

**MEDANTA-AFRICARE**

The trade mark shown above has been registered under the Trade Marks Act.  
 Part of Register trade mark is registered in: A

*Registration details:*

Trade Mark No.: 74013

Class: 44 (Provision of medical services.)

Registered proprietor: Africare Limited, a Limited Liability Company duly incorporated under the Laws of Kenya of P.O. Box 66680-00800, Nairobi, Kenya

Effective date of registration: 14<sup>th</sup> February, 2012The registration expires on: 14<sup>th</sup> February, 2022

Sealed at my direction.

Date: 04/09/2012

Assistant Registrar of Trade Marks

Registry of Trade Marks  
 P.O. Box 51648,  
 Nairobi



This certificate is not for use in legal proceedings or for obtaining registration abroad. Upon any change of ownership of the Trade mark or change in address application should at once be made to the Registrar to register the change.



REPUBLIC OF KENYA  
THE TRADE MARKS  
ACT  
(CAP. 506)

CERTIFICATE OF REGISTRATION OF TRADE MARK

(Rule 63)

Trade Mark:

**AFRICARE**

The trade mark shown above has been registered under the Trade Marks Act.  
Part of Register trade mark is registered in: A

*Registration details:*

Trade Mark No.: 74010

Class: 44 (Provision of medical services.)

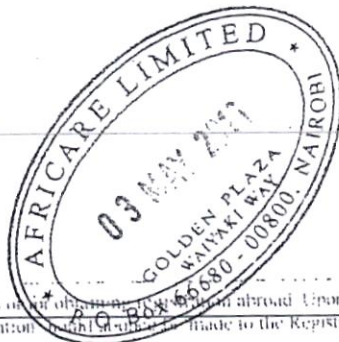
Registered proprietor: Africare Limited, a Limited Liability Company duly incorporated under the Laws of Kenya of P.O. Box 66680-00800, Nairobi, Kenya.

Effective date of registration: 14<sup>th</sup> February, 2012  
The registration expires on: 14<sup>th</sup> February, 2022

Sealed at my direction.  
Date: 05/09/2012

Assistant Registrar of Trade Marks

Registry of Trade Marks  
P. O. Box 51648,  
Nairobi



This certificate is not for use in legal proceedings or for obtaining rights abroad. Upon any change of ownership of this Trade mark, or change in address, application should be made to the Registrar to register the change.



REPUBLIC OF KENYA

THE TRADE MARKS  
ACT  
(CAP. 506)

CERTIFICATE OF REGISTRATION OF TRADE MARK

(Rule 63)

Trade Mark:

MEDANTA

The trade mark shown above has been registered under the Trade Marks Act.  
Part of Register trade mark is registered in: A

*Registration details:*

Trade Mark No.: 74015

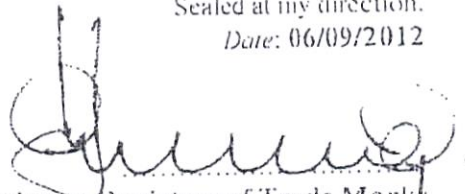
Class: 44 (Provision of medical services.)

Registered proprietor: Africare Limited, a Limited Liability Company duly incorporated under the Laws of Kenya of P.O. Box 66680-00800, Nairobi, Kenya.

Effective date of registration: 14<sup>th</sup> February, 2012The registration expires on: 14<sup>th</sup> February, 2022

Sealed at my direction.

Date: 06/09/2012

  
Assistant Registrar of Trade Marks

Registry of Trade Marks  
P. O. Box 51648,  
Nairobi



This certificate is not for use in legal proceedings or for obtaining protection abroad. Upon any change of ownership of this Trade mark, or change in address, application should be made to the Registrar to register the change.



## REPUBLIC OF KENYA

 THE TRADE MARKS  
 ACT  
 (CAP. 506)

## CERTIFICATE OF REGISTRATION OF TRADE MARK

(Rule 63)

Trade Mark:

**RENOCARE**

The trade mark shown above has been registered under the Trade Marks Act.  
 Part of Register trade mark is registered in: A

*Registration details:*

Trade Mark No.: 74011

Class: 44 (Provision of medical services.)

Registered proprietor: Africare Limited, a Limited Liability Company duly incorporated under the Laws of Kenya of P.O. Box 66680-00800, Nairobi, Kenya.

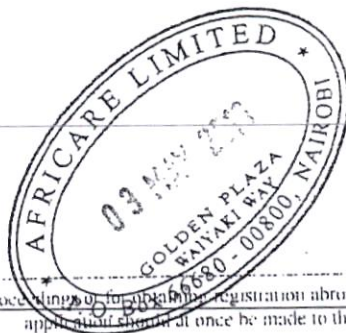
Effective date of registration: 14<sup>th</sup> February, 2012The registration expires on: 14<sup>th</sup> February, 2022

Sealed at my direction.

Date: 05/09/2012

Assistant Registrar of Trade Marks

Registry of Trade Marks  
 P. O. Box 51648.  
 Nairobi



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