Vision: A world class patient centred specialized care hospital
VISION

A world class patient centered specialized care Hospital.

MISSION

To optimize patient experiences through innovative evidence based specialized healthcare, facilitate training, research and participate in national health Policy formulation.

MOTTO

We listen, We care

CORE VALUES

- Customer focus
- Professionalism & Integrity
- Teamwork
- Equity and Equality
- Teamwork and Team Spirit
- Safety
FOREWORD
The KNH Anti-Corruption Policy outlines a framework for working towards zero-tolerance to corruption in the Hospital. This Policy has been developed in line with the KNH Mandate, Vision, Mission, Core Values and other prevailing laws of the country.

The Board of Management has adopted the KNH Anti-Corruption Policy to supplement legal provisions and other government initiatives for fighting and preventing corruption in Kenya. This Policy seeks to provide a framework for efficient and effective detection and prevention of corruption at the workplace. Towards this, the Board of Management is committed to the implementation of this Policy.

Each individual is required to uphold high standards of integrity to protect our Hospital’s reputation. Further, a commitment to enhancing transparency and accountability in the management of public resources shall be embraced by all stakeholders.

The benefits of this Anti-Corruption Policy cannot be overemphasized. The Hospital is destined to achieve her vision and mission through efficient and quality services; improved infrastructure; fairness, justice and equity; respect for the rule of law; and improved personal safety and security of property.

It is therefore incumbent on Management and employees to fully implement this Policy and ensure total adherence to it in order to create an environment of zero tolerance to corruption.

The Board of Management commits to avail necessary resources and provide leadership for successful implementation of this Policy.

MARK K. BOR, CBS
CHAIRMAN
KNH BOARD OF MANAGEMENT
COMMITMENT BY THE CHIEF EXECUTIVE OFFICER

Kenyatta National Hospital is committed towards zero tolerance to corruption. In this respect, the commitment on the part of KNH Board and Management is as follows:

1. Integrity and transparency in the conduct of KNH’s affairs.
2. Enforcement of anti-corruption programs in the pursuit of personal and corporate integrity in all activities.
3. Provision of required resources for the effective implementation of this Policy and attendant programs and strategies.
4. Review and revise the Policy in response to changes in law, reputational demands and business environment.
5. Take responsibility for the implementation and monitoring of various anti-corruption programs and strategies.

I would like to affirm my commitment to the fight against corruption by ensuring that every member of employees has the responsibility to prevent corruption and provide quality and timely healthcare services to the public.

My office shall oversee the implementation of this Policy through the Corruption Prevention Committee.

LILY KOROS TARE

CHIEF EXECUTIVE OFFICER
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ACRONYMS

BoM : Board of Management.
CEO : Chief Executive Officer
CPC : Corruption Prevention Committee
CTC : Cancer Treatment Centre
DCPC : Departmental Corruption Prevention Committees
DDNS : Deputy Director Nursing Services
DD : Deputy Directors
EACC : Ethics and Anti-Corruption Commission
HOD : Head of Department
HOU : Head of Unit
IAO : Integrity Assurance Officer
ICT : Information Communication Technology
KNH : Kenyatta National Hospital.
MRI : Magnetic Resonance Imaging
OT : Occupational Therapy
QA : Quality Assurance
R&IAD : Risk and Internal Audit Department
SDAC : Staff Disciplinary Advisory Committee
SOP : Standard Operating Procedure
1. **POLICY STATEMENT**
   The Board of Management, the entire employees and stakeholders of KNH are prohibited from engaging in any form of corrupt practices whether directly or indirectly. The Hospital Management is committed to sensitization and training of employees on matters of ethics and integrity in a bid to eradicate corruption in all its forms.

2. **INTRODUCTION**
   Corruption is an offense under the provisions of the anti-corruption and Economic Crimes Act 2003; which includes bribing agent, secret inducement for advice, deceiving the principal, conflict of interest, improper benefits to trustees for appointment, bids rigging, abuse of office and dealing with suspect property, etc. In this respect, corruption shall be deemed to have occurred if any of the Hospital employees and stakeholders engages in any of the above illegitimate practices, directly or indirectly.

   The KNH Anti-Corruption Policy outlines a framework for working towards zero-tolerance to corruption in the Hospital. This Policy has been developed in line with the KNH Mandate, Vision, Mission, Core Values and other prevailing laws of the country.

   KNH will transact and conduct its business in an honest and ethical manner and avoid the appearance of questionable conduct in relation to KNH operations. Neither KNH (or entity associated with it) nor any other person, shall facilitate payments or relationships with third parties, or offer promise, authorize or receive any bribe, kickback, or other illicit inducement, payments or benefits in violation of the Laws of Kenya.

   The prevention, detection and reporting of all incidences of corruption and malpractices is the responsibility of all employees and mechanism for confidential reporting of any suspicious case have been put in place.
3. **DEFINITIONS**

In this Policy, unless otherwise requires:

(a) ‘**Benefits**’ means any gift, loan, fee, reward, appointment, service, favour, forbearance, promises, or other consideration or advantage.

(b) ‘**Bribery**’ means to give, solicit, and receive any gift or other form of favour that may influence an individual’s function, directly or indirectly.

(c) ‘**Committee**’ for purpose of this Policy refers to the KNH Corruption Prevention Committee.

(d) ‘**Corruption**’ means a form of dishonest or unethical conduct by a person entrusted with the position of authority, often to acquire personal benefit.

(e) ‘**Economic Crimes**’ means an offence under section 45 of the Act (Protection of public properties and revenues) and/or an offence involving dishonesty under any written law providing for the maintenance or protection of the public revenue.

(f) ‘**Gift**’ means something given voluntarily without payment in return, as to a gesture of assistance, present or honour an occasion.

(g) ‘**Investigator**’ for purposes of this Policy means a person authorized by the KNH Board of Management or CEO to conduct an investigation on behalf of the Hospital or any other person authorized by the Director of the EACC under section 23.

(h) ‘**Private body**’ means any person or organization not being a public body and including a voluntary organization, charitable organization, and any other body or organization however constituted.

(i) ‘**Unexplained Assets**’ means assets in possession of a person acquired at or around a time the person was allegedly guilty of corruption or economic crime, or whose value is disproportionate to his known source of income at or around that time and or which there is no satisfactory explanation.

(j) ‘**Whistle blower**’ means a person who makes corruption disclosures whether openly or in secret.

4. **SCOPE**
This Policy aims at providing guidelines to all employees, customers, service provider and any other stakeholders or bodies associated with KNH for eradication of any form of corruption.

This Policy shall apply to Kenyatta National Hospital Board of Management, the entire employees, suppliers, students, interns and all other stakeholders interacting with the Hospital.

5. **OBJECTIVES**
   
i) Establish a framework for prevention of corruption.
   
ii) Provide framework for dealing with unethical behaviour.
   
iii) Integrate all corruption prevention initiatives in the Hospital’s undertakings.
   
iv) Provide a platform for training and sensitization on ethics and integrity.

6. **RESPONSIBILITIES**
   
6.1. **Board of Management**
   
Ensure that the Policy is approved, fully implemented and avail the necessary resources required for successful implementation.

6.2. **Chief Executive Officer**

Ensure implementation, monitoring, evaluation, and compliance to the Policy.

6.3. **Corruption Prevention Committee**

Keep a constant check on the Hospital’s operations and procedures, and ensure elimination of corruption and malpractices in all areas.

The specific roles and functions of the CPC are: -

i) prioritizing action in the prevention and elimination of corruption;

ii) planning and coordinating corruption prevention strategies;

iii) integrating all corruption prevention initiatives in the Hospital’s undertaking;

iv) receiving and reviewing reports on corruption prevention initiatives and recommending appropriate action;

v) receiving and undertaking action on corruption reports made by employees and other stakeholders;
vi) spearheading Integrity, ethics and anti-corruption campaigns;

vii) monitoring and evaluating the impact of corruption prevention initiatives; and

viii) Preparing and submitting quarterly reports to the EACC and Performance Contracting Steering Committee.

6.4. **Corruption Prevention Committee Unit/Secretariat**
   
i) Monitor the implementation of this Policy.

ii) Coordinate the preparation of the Annual Corruption Risk Assessment and Corruption Prevention/Mitigation Plan.

iii) Preparation of statutory reports for approval by CPC and onward transmission to relevant bodies.

iv) Ensure that all business partners, contractors, and suppliers of KNH know and adhere to this Policy.

v) Be responsible for control of access to corruption reports and related documents including gift and conflict of interest registers.

vi) Spearhead prevention, detection and investigation of corrupt practices within KNH.

vii) Develop corruption prevention training and awareness plans.

viii) Be responsible for the coordination and handling of corruption related activities including complaints.

ix) Liaise with other agencies dealing with anti-corruption matters.

6.5. **Directors, Deputy Directors and Head of Departments**

Take appropriate action when concerns are raised and for ensuring that employees are aware of this Policy and their duty within it.

6.6. **Departmental/Divisional Corruption Prevention Committee**

Keep a constant check on the Department’s/Divisional operations and procedures, and ensure elimination of corruption and malpractices in these areas.

6.7. **Employees**
KNH Ant-Corruption Policy

Ensure that the best possible standards of care are achieved and to act in accordance with their professional codes of conducts and the KNH Code of Conduct and Ethics. All employees are advised to:

i) Co-operate with the Management to achieve the objectives of this Policy.

ii) Participate in the Hospital wide initiatives to counter corruption.

iii) Desist from accepting or offering any corrupt payment, gift, Hospitality, or any other form of inducement, and instead report to the CPC for appropriate action.

iv) Disclose any form of conflict of interest using the prescribed form.

v) Uphold high standards of integrity at all times.

7. **Structures to Fight Corruption**

KNH structures that assist in the fight against corruption and deal with corrupt officers include:

i) Corruption Prevention Committee (CPC).

ii) Corruption Prevention Unit (Secretariat).

iii) Staff Disciplinary Advisory Committee.

iv) Departmental Corruption Prevention Committee.

8. **Composition of Corruption Prevention Committee**

The Corruption Prevention Committee shall comprise of 15 members with a secretariat not exceeding six (6) IAOs. The CEO shall chair this committee and members to the committee shall be by person appointed by CEO as follows:

i) Secretary (IAO)

ii) Clinical services - 7 Representatives

iii) Corporate services - 6 Representatives

The quorum of every CPC meeting shall be half of the membership.

The tenure of office shall be for a period of three (3) years.
9. **COMPOSITION OF DEPARTMENTAL CORRUPTION PREVENTION COMMITTEES**

The Departmental Corruption Prevention Committee shall comprise of a minimum of three members. The Head of Department/Division shall chair this committee, with an IAO as the Secretary.

The quorum of every DCPC meeting shall be half of the membership.

10. **CORRUPTION RISK AREAS AT KNH**

All functional areas at KNH are potential corruption practices areas. Every division/department/unit has identified corruption risk areas and their prevention strategies as outlined in Appendix II.

11. **CORRUPTION PRACTICES**

For the purpose of this Policy, the following acts will be construed as corruption practices if engaged in by employees, customers, interns, suppliers, including potential suppliers, or any member of the public dealing with KNH but not limited to: -

(a) deceiving or knowingly making a false or misleading statement to KNH in favour of own private interest;

(b) receiving or soliciting, agreeing to receive or to solicit any benefits/property on account or divulging confidential KNH information;

(c) engaging in bid rigging and other procurement malpractices;

(d) fraudulently making payment or excess payment for sub-standard or defective goods, untendered, inadequate services and/or for unsupplied goods;

(e) hindering or obstructing fellow colleagues from performing their duties as per the service charter/performance contract;

(f) fraudulently altering accounts, withholding information, records and other documents;

(g) soliciting, receiving and/or demanding for an inducement in order to facilitate any services;

(h) canvassing for self or other person to be recruited;

(i) receiving or soliciting for sexual favours in return for any services including but not limited to as a condition for employment, training, salary increments and/or promotion;

(j) financial or other donations to political parties, politicians, or political activities including campaigns;
(k) facilitation fee or other payment made with a view to expediting the performance of public duty and/or fast tracking any payment, benefit, advantage, business or other authorization due or required by the organization for the conduct of its business;

(l) protection money is regarded as form of extortion and may involve threats or harm to employees or other agents. As a Policy, employees shall not give in to such demands and/or threats, instead the same shall be reported to the relevant law enforcement agencies for appropriate action; and

(m) gifts and Hospitality aimed at influencing a decision or outcome of any matter and advanced to officers on duty are prohibited. Gifts include items such as wine, confectionary, clothes, flowers, sports tickets or cultural events, and Hospitality in form of meals, reception, complimentary training or tickets among others.

12. **Internal Audit Reviews**

Internal Audit shall ensure that audits are up to date and viable so as to provide institutionalized mechanism for supervision, control, and review or operational systems and assessing the nature and extent of fraud and corruption risk.

13. **Reporting**

Reporting of corruption cases shall be made to the CPC identifying self or anonymously but with evidence attached through use of channels such as designated corruption reporting boxes, or reporting via email knhanticorruption@knh.or.ke or Cell phone number 0702498808 or KNH extension 43037. Alternatively, corruption cases can be reported to the EACC directly.

14. **Handling of Corruption Complaints**

All corruption cases will be handled promptly with fairness and in accordance with the law. Members of employees, students, interns, suppliers, or other stakeholders suspected of any contravention of this Policy shall be handled in the manner outlined in Appendix III and corresponding Standard Operating Procedures.
15. **Sanctions/Penalties**

Any employee who is in breach of any of the provisions of this Policy shall be subject to disciplinary action as laid down in the KNH Terms and Conditions of Service and applicable laws. Some corruption cases may be referred to EACC for further investigations and actions.

16. **Protection of Whistle Blowers**

The Hospital is committed to the protection of whistle blowers, and assures confidentiality of information, identity, and their safety in line with the Policy.

17. **Capacity Building**

The Management shall ensure:

i) Training of IAOs and CPC members.

ii) Sensitize employees on ethics and integrity, issue a copy of this Policy and sign off *[Appendix IV]*.

iii) Students suppliers and other stakeholders are sensitized on this Policy.

18. **Legislative and Administrative Framework**

The applicable legislations are:


iii) Public Officer Ethics Act No. 4 of 2003.

iv) Leadership and Integrity Act No. 9 of 2012.

v) Public Procurement and Asset Disposal Act, 2015 and its Regulations.


viii) Bribery Act No.47 of 2016.


x) Public Service Code of Conduct and Ethics.

xi) KNH Board of Management Performance Contract.

xii) KNH Strategic Plan.

xiii) KNH Code of Conduct and Ethics.

xiv) KNH Whistle Blowing Policy.
19. **IMPLEMENTATION**

19.1 The KNH Board of Management is responsible for approving this Code and is fully committed to playing an oversight role in implementing and enforcing the Policy.

19.2 The Chief Executive Officer is responsible for the day-to-day implementation of the Policy within the Hospital and its respective divisions/departments.

19.3 It is the duty of the line managers to ensure that employees carry out their duties efficiently, honestly and to the best of their ability and knowledge within the confines of this Policy.

20. **MONITORING AND EVALUATION**

In order to ensure effective implementation of this Policy, the following will be undertaken: -

i) develop an Implementation matrix for this Policy within three months of approval;

ii) develop a tool for monitoring and evaluating the implementation of the Policy;

iii) submit quarterly status reports to the BoM and EACC;

iv) develop Standard Operating Procedures within Six months of approval of this Policy and rolled out; and

v) conduct an annual corruption perception audit to gauge the impact of the implementation of this Policy.

21. **REVIEW**

This Code shall be reviewed every three (3) years unless circumstances dictate for an earlier review.
### APPENDIX I – KNH CONFLICT OF INTEREST REGISTER

**KNH CONFLICT OF INTEREST REGISTER**

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Date advised of interest</th>
<th>Interest disclosed</th>
<th>Nature of potential conflict and estimated value (if known)</th>
<th>Action taken/recommendation</th>
<th>Date implemented</th>
<th>Review / comments</th>
</tr>
</thead>
<tbody>
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</table>

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## APPENDIX II: 2016/2017 CORRUPTION RISKS AT KENYATTA NATIONAL HOSPITAL

<table>
<thead>
<tr>
<th>FUNCTIONAL AREA</th>
<th>CORRUPT RISK ACTIVITY</th>
<th>PREVENTION STRATEGIES</th>
<th>ACTION BY</th>
</tr>
</thead>
<tbody>
<tr>
<td>SUPPLY CHAIN MANAGEMENT</td>
<td>• Lack of performance bonds</td>
<td>• Generate reports of performance bonds for fresh awards</td>
<td>DD SUPPLY CHAIN MANAGEMENT</td>
</tr>
<tr>
<td></td>
<td>• Biased selection of bidders to be invited for quotations</td>
<td>• Invite quotations from prequalified/approved bidders</td>
<td></td>
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<tr>
<td></td>
<td>• Raising LPOs and LSOs but not issuing to supplier with intention of creating emergency</td>
<td>• Uncollected LPOs to be returned to the chief supplies officer for confirmation</td>
<td></td>
</tr>
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<td></td>
<td>• Biased issuing of quotations.</td>
<td>• Open dispatch registers as per LPO serial numbers for each section</td>
<td></td>
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<td></td>
<td>• Delay in inspection of goods, works and services.</td>
<td>• Maintain a collection register, request for detailed quotations from bidders and</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Failure to raise Purchase requisition in line with the established reorder levels</td>
<td>email/SMS all participants</td>
<td></td>
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<td></td>
<td>• Deliberate loss of accepted samples</td>
<td>• Avail samples and/or literature at the receiving area</td>
<td></td>
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<td></td>
<td>• Opening quotations past deadline</td>
<td>• All nil stocks to be explained by the stock orders and SSCMO warehouse to</td>
<td></td>
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<tr>
<td></td>
<td>• Alteration of LPOs</td>
<td>countercheck the purchase requisition before the AIE approves</td>
<td></td>
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<tr>
<td></td>
<td>• Bid rigging and Canvassing with bidders</td>
<td>• Open sample room store for all accepted samples and assign an officer as the</td>
<td></td>
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<tr>
<td></td>
<td>• Stealing/ swopping of samples at evaluation stage</td>
<td>custodian</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Delay in dispatch of LPOs</td>
<td>• Maintain quotation opening date and time, email all participants and send SMS</td>
<td></td>
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<tr>
<td></td>
<td>• Exaggerated quantities in warehousing</td>
<td>• Altered LPOs should not be accepted</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>• All alterations to be countersigned</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>• Adhere to Public Procurement and Disposal Act</td>
<td></td>
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<td></td>
<td></td>
<td>• Tender processing committee to receive</td>
<td></td>
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</tbody>
</table>

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---
### FINANCE
- Altering of cheque amount and name
- Holding/delaying cheques with a view to gaining financially from the customer
- Colluding with thugs to intercept cash in transit
- Forging of signatures in cheques or authorizing document
- Fraudulent activities such as bribing of cash/pay agents
- Extorting cash at pay points
- Misrepresenting financial statements
- Theft of cash and other resources
- Irregular investment of cash
- Overpricing of goods and services
- Fictitious payment for goods and services
- Processing of fictitious refunds.

### DD FINANCE
- All accounting documents and cash should be kept in a fireproof safe.
- Only an authorized person of integrity should keep keys to the safe.
- Adherence to service charter
- All the cash should be transported with at least two armed police officer escorts.
- Limit the amount of cash being transported at any one particular time.
- Enhanced Supervision
- Enhanced Supervision
- Enhanced Supervision
- Establish and enforce financial policy and procedures to govern revenue collection, imprest management, cash handling and banking, book keeping and accounting, investment, expenditure, payment and data Management.
- Enhanced Supervision
- Enhanced Supervision
- Regular audits
| HUMAN RESOURCE & ADMINISTRATION | • Engaging in tribalism/nepotism when recruiting.  
• Recruiting unqualified staff.  
• Demanding favours from recruits.  
• Leaking interview questions to recruits  
• Involving interested parties in preparing job descriptions and in short-listing  
• Limiting circulation of job advertisements.  
• Deploying or transferring employees for personal interests or punitive purposes.  
• Interview panellists with vested interests.  | • Adherence to scheme of work, indicating job descriptions and requisite qualifications.  
• Advertisements should conform strictly to the job description and specification.  
• Short-listing and appointment panelists should be people of integrity and who hold relevant and higher qualifications/ranking in the job at hand.  
• Clear guidelines on the quantity and quality of personnel needed.  
• A high integrity committee should deploy staff based on merit.  
• Short-term, intermediate and long-term plans to safeguard against ad hoc hiring, particularly of unqualified persons.  
• Adherence to the recruitment policy.  
• Merit and strict adherence to the set criteria  
• Proper accountability and supervision  
• Declaration of conflict of Interest  | DD HUMAN RESOURCE |
| --- | --- | --- | --- |
| ADMINISTRATION | • Bribery and favouritism in allocation of houses,  
• Improper accountability in utilization of imprest and allowances  
• Theft of fuel and biased allocation of duties  
• Unauthorized printing, typing and stamping of private documents using hospital resources.  | • Enforcement of Housing standard operating Procedure  
• Enhanced Supervision  
• Enforcement of Transport standard operating procedure  
• Enhanced Supervision  
• Proper documentation of all work done.  | ADADMINISTRATION |

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| CORPORATE SUPPORT SERVICES PLANNING | • Manipulation of documents  
• Absenteeism and lateness, | • Involvement of document originator in editing  
• Enhanced supervision | HOD PLANNING |
| CORPORATE AFFAIRS AND COMMUNICATION | • Misappropriation of donations  
• Favours in training  
• Misuse of office equipment for personal gain | • Adherence to donations procedure and regular monitoring  
• Adherence to departmental training projections  
• Enhanced supervision and allocation of responsibilities | HOD MARKETING & COMMUNICATION |
| INFORMATION AND COMMUNICATION TECHNOLOGY (ICT) | • Improper accountability in utilization of imprest  
• Absenteeism from work  
• Cannibalizing faulty computing equipment  
• Favouritism in the distribution of office equipment.  
• Procurement of ICT equipment | • Proper Accountability and  
• Enhanced supervision  
• Enhanced supervision  
• Maintain an asset register and sensitize staff involved in corrupt practice.  
• Needs analysis to be done  
• Training of staff on procurement procedures | HOD ICT |
| TELEPHONE SERVICES | • Unauthorized redemption of Bonga points  
• Unauthorized use of hospital communication lines  
• Theft of surrendered mobile handsets | • Enhanced supervision | HOU TELEPHONE SERVICES |
| CHAPLAINCY | • Unauthorized preachers within the hospital visiting the sick. | • Develop and implement vetting procedures. | IN-CHARGE CHAPLAINCY |
| TECHNICAL SERVICES ENGINEERING | • Overestimation in the Bills of Quantities  
• Skewed specifications to favour specific suppliers  
• Stealing of spare parts  
• Taking too much time to complete works  
• Delayed certification of works  
• Bribery and favouritism in award of service contracts  
• Commissioning of projects, Fuel and Gas deliveries and receiving, Motor vehicle repairs and Authorization of services rendered/works done | • Proper specification of spare parts and materials  
• Strict adherence to SOP on the award of service contracts  
• Enhanced supervision  
• Carry out regular systems audit and impromptu team inspections  
• Enhanced supervision  
• Merit and strict adherence to the set criteria  
• Merit and strict adherence to the set criteria | HOD ENGINEERING |
|---|---|---|
| LAUNDRY | • Staff absenteeism and abscondment of duty  
• Unauthorized stitching and laundering of linen  
• Lack/delayed promotions  
• Theft of linen and detergents. | • Surcharge and discipline  
• Enhanced supervision  
• Develop and implement scheme of service for staff  
• Enhanced security surveillance and inspection  
• Sensitization of staff on integrity and ethics | LAUNDRY MANAGER |
| BIO-MEDICAL | • Cannibalizing faulty equipment/machines  
• Theft of spares for machines/equipment  
• Theft of working time (Absenteism from work) | • Enhanced Supervision  
• Adherence to hospital code of conducts & Ethics  
• Enhanced Supervision | HOD BIOMEDICAL ENGINEERING |
| RISK AND QUALITY ASSURANCE | Improper documentation of records  
| Theft of time | Ensure that all documents are accurate and complete  
| Enhanced supervision | QA MANAGER |
| CANCER TREATMENT CENTER | Use of hospital machines and equipment for private gain  
| Soliciting bribes for services  
| Stealing of hospital working hours  
| Diversion of patients | Adherence to hospital guidelines and procedures  
| Regular surveys and scrutiny of medical records  
| Regular audit of service records  
| Spot checks  
| Staff sensitization and upholding of integrity and professional ethics | HOD CTC |
| NURSING SERVICES | Theft of medical supplies  
| Utilization of locum  
| Favouritism and biased allocation of duties and theft of time.  
| Exam leakage in the school of nursing  
| Unethical actions by staff | Enhanced supervision  
| Centralization of locum  
| Procurement of a safe  
| Enforce code of conduct | DD NURSING SERVICES |
| CLINICAL SERVICES PUBLIC HEALTH | Staff absenteeism and abscondment.  
| Selective enforcement of Public Health and other related Laws  
| Theft of detergents and other cleaning materials  
| Ineffective sanitary inspection. | Enhanced supervision  
| Continuous sensitization and professional development  
| Enhanced sanitary inspections, reports are properly written. | HOU PUBLIC HEALTH |
| ADMINISTRATIVE SERVICES SECURITY & SAFETY SERVICES | Abetting crime  
| Collusion in crime concealing  
| Biased Security Investigation  
| Absenteeism  
| Ineffective Surveillances  
| Soliciting of bribes to facilitate unauthorized entry to the wards and | Training of staff  
| Improve documentation  
| Anti-Corruption sensitization  
| Enhanced supervision | HOD SECURITY AND SAFETY SERVICES |

Vision: A world class patient centred specialized care hospital
## Vision:
A world class patient centered specialized care hospital

### PHARMACEUTICAL & NUTRITIONAL SERVICES
- Theft of drugs
- Acceptance of inferior/quality drugs
- Non-adherence to ethical practices
- Biased allocation of duties
- Theft of time
- Lack of transparency and accountability in handling donations.

### CATERING
- Absenteeism and lateness at work
- Acceptance of substandard food stuff
- Theft of food stuff and cutlery.

### DIAGNOSTIC SERVICES AND HEALTH INFORMATION LABORATORY MEDICINE
- Staff absenteeism
- Forged bills and specimen not billed
- Unnecessary delays in processing patient specimen
- Processing private specimen
- Bribery and collusion for lab specimen processing

### RADIOLOGY DEPARTMENT
- Diversion of patients to private clinics especially Magnetic Resonance Imaging (MRI) and Ultra sound patients
- Bribery to access radiological services
- Theft of time in which staff engage in locum duties outside the hospital leaving students to handle patients.

### Actions
- Enhanced supervision
- Adherence to Professional Code of Ethics
- Staff Rotation
- Enhanced supervision
- Adherence to both professional and KNH Code conduct and Ethics
- Enhanced supervision
- Sensitization on code of conduct and ethics
- Adherence to specifications
- Anti-corruption sensitization
- Enhanced supervision and improve on physical security
- Monitoring of clocking registers
- Staff sensitization
- Monitoring of the receiving specimen register
- Enhanced supervision
- Spot checks/audits
- Adhere to SOPS and professional code of Ethics
- Adherence to both professional and KNH Code of Conduct and Ethics
- Regular surveillance
- Staff sensitization
- Enforcement of SOPs
- Adherence to service charter

### Roles
- CHIEF PHARMACIST
- CATERING MANAGER
- HOD LABMEDICINE
- HOD RADIOLOGY
## KNH Ant-Corruption Policy

<table>
<thead>
<tr>
<th><strong>Vision:</strong></th>
<th>A world class patient centred specialized care hospital</th>
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<tr>
<th><strong>HEALTH INFORMATION</strong></th>
<th><strong>Enhanced Supervision</strong></th>
<th><strong>HOD HEALTH INFORMATION</strong></th>
</tr>
</thead>
</table>
| • Bribery, tribalism and nepotism in the registration of patients and filing and retrieval of patients' records. | • Enforcement of registration SOP  
• Enhanced Supervision  
• Adhere to client’s service charter.  
• Sensitization and awareness to staff | |

<table>
<thead>
<tr>
<th><strong>FAREWELL HOME</strong></th>
<th><strong>Enhanced Supervision</strong></th>
<th><strong>HOU FAREWELL HOME</strong></th>
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</thead>
</table>
| • Bribery in body storage, embalming and Body clearance.  
• Theft of hospital time by staff | • Reduce congestion by mass disposal of unclaimed bodies  
• Enlighten customers on their rights by display of notices/service charter  
• Staff sensitization on integrity and ethics  
• Enhanced supervision  
• Suggestion Boxes | |

<table>
<thead>
<tr>
<th><strong>PAEDIATRICS</strong></th>
<th><strong>Enhanced supervision</strong></th>
<th><strong>HOD PAEDIATRICS</strong></th>
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<td><strong>PAEDIATRICS</strong></td>
<td><strong>Enhanced Supervision</strong></td>
<td><strong>HOD MEDICINE</strong></td>
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</tbody>
</table>
| • Theft of hospital time by staff  
• Prolonged appointments | • Carry out customer satisfaction survey and adhere to SOPs | |

<table>
<thead>
<tr>
<th><strong>MEDICINE</strong></th>
<th><strong>Enhanced Supervision</strong></th>
<th><strong>HOD MEDICINE</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Theft of hospital time and items by staff.</td>
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</tbody>
</table>

| **MENTAL HEALTH** | **Adherence to both professional and KNH Code conduct and Ethics**  
• Internal audits checks  
• Introduction of clocking register  
• Assigning responsibilities to individual staff | **HOD MENTAL HEALTH** |
| --- | --- | --- |
| • Theft of hospital time by staff  
• Theft of Hospital property | | |
### SURGICAL SERVICES
#### DENTAL DEPARTMENT
- Rampant absenteeism by staff
- Wastage of dental materials
- Nepotism in service delivery
- Diversion of patients to private clinics
- Bribery for early appointment.

#### ORTHOPAEDIC DEPARTMENT
- Selective theatre booking
- Selective admissions of patients
- Wastage of materials

#### REPRODUCTIVE HEALTH SERVICES
- Nepotism in further training
- Preferential admissions of friends or relatives of staff
- Collusion to aid patient abscond
- Unethical behaviour by staff.

#### SPECIALIZED SURGICAL SERVICES
#### DEPARTMENT
- Nepotism in theatre bookings
- Rampant absenteeism by staff
- Collusion to defraud the hospital its revenue by allowing unwarranted credit and Fraudulent use of hospital equipment

### HOD DENTAL SERVICES
- Enhanced Supervision
- Monitor and instill punishment appropriately
- Upholding both professional and KNH Code of conduct and Ethics
- Increase manpower especially Nursing and Dental Officers

### HOD ORTHOPEDICS
- Open booking register for day surgery on first come, first served basis
- Develop admission criteria
- Ensure proper records keeping for surgical materials

### HOD REPRODUCTIVE HEALTH
- Enforce training policy
- Develop admission criteria
- Constitute a committee to deal with credit facilities
- Adherence to professional Code of Conduct and KNH code of conduct and Ethics.

### HOD SPECIALIZED SURGERY
- Open booking register for day surgery on first come, first served basis
- Adherence to professional Code of conduct and KNH code of conduct and Ethics
- Proper billing by all service providers and disclosure of anticipated bills to relatives during treatment period
- Sensitize staff on importance of charging for services rendered

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**Vision:** A world class patient centred specialized care hospital
| ACCIDENT & EMERGENCY SERVICES | • Bribery, tribalism and nepotism in the treatment of patients  
| • Misuse of credit facility  
| • Delay in reporting time. | • Adherence to professional Code of Ethics  
| • Enhanced supervision | HOD ACCIDENT AND EMERGENCY |
| THEATRE SERVICES | • Unnecessary sick offs  
| • Utilization of locum  
| • Exchange of junior officers to work for others  
| • Favouritism in drawing up theatre list  
| • Bribery to get a bed and theatre space  
| • Theft of drugs/machines and equipment | • Enhanced supervision  
| • Centralization of locum and computer alert on duty double entry  
| • Enhanced Supervision  
| • Enhanced Supervision  
| • Adhering to booking register as per numbering on the register  
| • Adherence to code of Ethics and hospital code of conduct. | HOD ANESTHESIA |
| REHABILITATIVE SERVICES PHYSIOTHERAPY DEPARTMENT | • Diversion of patients to private clinics for personal gain  
| • Favouritism, Bribery in the treatment of patients | • Adhere to professional Code of Conduct and KNH code of conduct  
| • Enhanced supervision  
| • Staff rotation  
| • Display anti-corruption posters  
| • Sensitize staff | HOU PHYSIOTHERAPY |
| OCCUPATIONAL THERAPY DEPARTMENT | • Nepotism in service delivery  
| • Lateness by staff  
| • Favouritism on staff matters and unethical behaviour  
| • Theft of machines and equipment | • Adherence to professional Code of Conduct and Ethics  
| • Enhanced supervision  
| • Enhanced supervision  
| • Accountability in the stores | HOU OCCUPATIONAL THERAPY |
| OFFICE OF THE CORPORATION SECRETARY | • Bribery and Inflating advocates bills | • Distribute summons on rotational basis  
• Scrutinize bills vis-a-vis the advocates remuneration order  
• Scrutiny of contracts by two lawyers in the department | DD CORPORATION SECRETARY |

The corruption risk practices and strategies identified and listed are not exhaustive
APPENDIX III

PROCEDURE FOR HANDLING CORRUPTION COMPLAINTS

(1) Upon receiving any corruption allegation, the matter shall first be addressed by the CPC secretariat who shall record the allegations/complaints in a complaints register.

(2) The CPC secretariat shall review the complaints supporting evidence and if possible receive additional submission by the complainant, and will present the case to CPC for determination of validity or otherwise of the complainant.

(3) In the absence of sufficient evidence to warrant any further action, the CPC shall dismiss the complaint and advice all the concerned parties accordingly where possible.

(4) Where the evidence supplied by the complainant reasonably suggests that corruption may have occurred and that a staff, student, intern, supplier, or other stakeholder was involved, then the Committee shall set a sub-committee of at least three of its members to investigate the allegations and make recommendations to the Committee.

(5) The designated sub-committee shall then receive the alleged complaints, invite the complainant to make a written statement and adduce all material evidence in relation to the case. If necessary, the aggrieved party will also be summoned to appear personally before the sub-committee and provide further information to support the allegation.

(6) Upon conclusion of the preliminary investigation, if it is established that any of the parties listed was involved in any corrupt practice, the Committee shall make a statement of the allegations and invite the staff or other party concerned to respond to them.

(7) Upon receipt and evaluation of the response, the Committee shall either dismiss the case for lack of adequate and/or relevant evidence or proceed to institute disciplinary proceedings against the suspect in case of a staff, or refer the matter to the Board in case of a Board Member.
(8) After according all the concerned parties reasonable opportunity to be heard and considering each parties claims as well as the findings of the investigations, the Committee shall come up with a conclusion and final recommendations.

(9) Where allegations are made against a member of the CPC or secretariat, the member shall be required to step aside from the Committee for the duration of the investigation to allow independent investigations and determination of the case for a period not exceeding 3 months.

(10) At the conclusion of the hearing of any case, decision of the committee shall be communicated in writing to the complainant (where applicable) and the suspect within seven (7) days of the determination of the proceedings.

(11) In case the Committee establishes, after investigation that an employee or agent or supplier or customer or any other stakeholder is guilty of any corrupt practice, appropriate disciplinary measures shall be taken, or the matter shall be referred to the relevant body/ agency/ authority for appropriate action.
KENYATTA NATIONAL HOSPITAL

COMMITMENT TO INTEGRITY AND TRANSPARENCY

I.................................................................
(First Name) (Middle Name) (Surname)

Personal No./Student No./ID No: .................................................................

Designation: ................................................................................................

Division/Department/Unit: .................................................................

Hereby commit myself to uphold integrity and transparency in the course of my duties at all times as stipulated in the Hospital’s Anti – Corruption Policy.

Signed: .............................................on...............day of......................................................20....................
Commitment to Integrity and Transparency

I..........................................................(First Name) (Middle Name) (Surname)

Personal No./Student No./ID No: ..........................................................

Designation: ..........................................................................................

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Hereby commit myself to uphold integrity and transparency in the course of my duties at all times as stipulated in the Hospital’s Anti-Corruption Policy.

Signed: .............................................on...........day of.................................................20...............

NAMES OF CONTRIBUTORS