



HEALTH CARE COMMISSION

Government of Khyber Pakhtunkhwa

July 2022 - June 2023

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The Khyber Pakhtunkhwa Health Care Commission is an autonomous body, established and governed by the Khyber Pakhtunkhwa Health Care Commission Act, 2015. The Act envisages regulation of both public and private Health Care Establishments in the province to improve quality of care. The Commission is legally mandated to ensure right of citizens to safe and good quality healthcare through eradication of quackery and other malpractices, as well as setting standards for all types of medical practice, including but not limited to allopathic and alternative medicines. The Commission carries out this function through registration and licensing of the Health Care Establishments, and complaints management of patients and health care providers.

The Khyber Pakhtunkhwa Health Care commission operates through a two tier management hierarchy i.e. the Board and the executive. The Board consists of 10 members, three are representatives of the government departments while seven are selected from the private sector. The Board is policy making body. The executive, consisting of the CEO, directors and staff members, is responsible for implementation and performing the core functions of the Commission.

The Board is highly vibrant, committed and expert and has taken charge of office, with a pledge to uplift the Commission and healthcare standards in the province. Commitment of the board can be realized from the fact that despite statutory requirement of only one meeting per quarter, the Board had seven meetings in the first nine months and many important policy decisions were taken.

ABOUT THE COMMISSION



Message from the Chairman

I am happy to note that health sector in the province of Khyber Pakhtunkhwa has witnessed historic reforms in the recent past, and the establishment of Khyber Pakhtunkhwa Health Care Commission in the 2015 is one of those outstanding accomplishments. During the last one year in particular, the Commission ensured and facilitated notable improvements in health care infrastructure and quality of care, use of medical technology, increased access to health care services and bridging the health care gaps by providing easy option of registration and licensing to new HCEs. The Commission has also engaged the stakeholders through continuous training sessions and the citizens through a robust grievance redressal mechanism. My sincere thanks are due to the hon'ble Board Members for their dedication, professionalism and wholehearted support to the cause of Health care Commission. I congratulate the entire management and staff of the Commission for fast track implementation and remarkable achievements, despite many challenges. I look forward to an increased level of commitment during the days to follow.



Message from the CEO

It has been a terrific year of effort, hard work and success in multiple directions and we have tried to achieve many of the milestones for securing excellence in the health care system in the province, that were planned years before but could not be initiated due to numerous organisational challenges, including the in-house technical capacity, financial constraints, lack of assistance from development partners and resistance to change due the culture of status quo that remained a rule for quite long. I am, however, highly grateful for the support through timely and intelligent decisions of the Board and efficient assistance by the senior management and staff of the Commission in meeting the targets set for the year. I am also thankful to the Health Department, Government of Khyber Pakhtunkhwa for the valuable support. Moreover, the role of all the stakeholders remained commendable in the implementation of service delivery standards and I foresee the same level of cooperation in future also.



“The Commission was Restructured According to its Core Functions”

The Board along with the senior management assessed the existing organizational structure and the main functions of the Commission. It was realized that restructuring is required. The whole structure was revamped and five directorates were formed, i.e., Quality, Licensing, Legal Affairs, Operations, and Finance. This way the organization was restructured according to its core functions.

The restructuring helped in improving performance and fast track implementation was carried out; however, the Commission faced several challenges during the year.

Fast track implementation and remarkable achievements despite serious challenges:

- ***Lack of human resource***
- ***Non-availability of development partners assistance***
- ***No release of funds by Government***

“Staff Motivation: Employee of the Quarter, and Appreciation Certificates”



The Commission believes in team work and always appreciates and motivates its staff members. For that matter, the Commission grants quarterly awards to employee/s of the quarter and also awarded certificates of appreciation to the staff members for their contribution in development of MSDS.



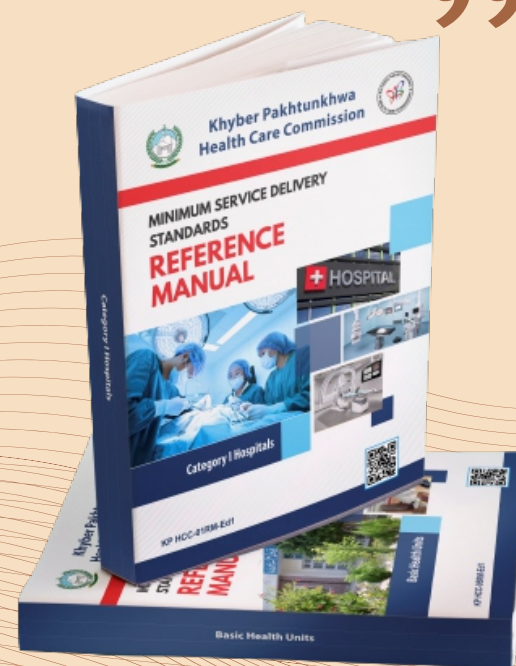
In order to ensure quality of service, and bring uniformity in healthcare system, throughout the province, the Commission developed Minimum Service Delivery Standards for various categories of Health Care Establishments (HCEs) and services. The Commission has developed 11 Reference Manuals of standards for various categories of HCEs and notified the same for implementation by the care providers. The MSDS defines a set of benchmarks for a minimum level of quality of services that a health care establishment is responsible to achieve and patients have a right to expect.

All the reference manuals of Minimum Service Delivery Standards, were developed by the staff of the Commission, without any external assistance from development partner or hiring of consultant.



Minimum Service Delivery Standards (MSDS)

“
11 Reference
Manuals of
Standards
Developed &
Notified
”



“303 Staff of 110 HCEs Trained on Quality Standards”



The Commission has also undertaken the responsibility to guide the HCE's on how to implement the MSDS and for that matter regular trainings and orientation sessions of the health care managers, both formal and informal, are conducted. During the last one year the commission conducted 16 training sessions for different categories, such as the managers, clinicians, pharmacists, nurses, biomedical engineers and pathologists etc. and trained a total of 303 staff of 110 hospitals/HCEs from across the province.

MSDS Training

Number of Sessions	Number of Hospitals	Number of staff
16	110	303

The Commission signed an MoU with the Project Management Implementation Unit, which is a project of the health department for revamping of Secondary Care Hospitals. The purpose of MOU was to facilitate trainings of staff of the Public Hospitals in the province, on quality and standards of health services.

Trainings of HCEs



“Hospitals were Assisted During Implementation of Standards”



Besides training, the Commission also provided supportive supervision and handholding to the health care establishments. The hospitals were assisted and on-field guidance was provided through meetings, orientation sessions, target setting and inspections by the staff of the Commission. In order to prepare the hospitals for final assessment by independent assessors, mock assessments were arranged for them. This helped them in understanding the process of assessment and expectations of assessors. This way the hospitals were helped in the implementation of the minimum service delivery standards for grant of Full Licence by the Health Care Commission.

Supportive Supervision

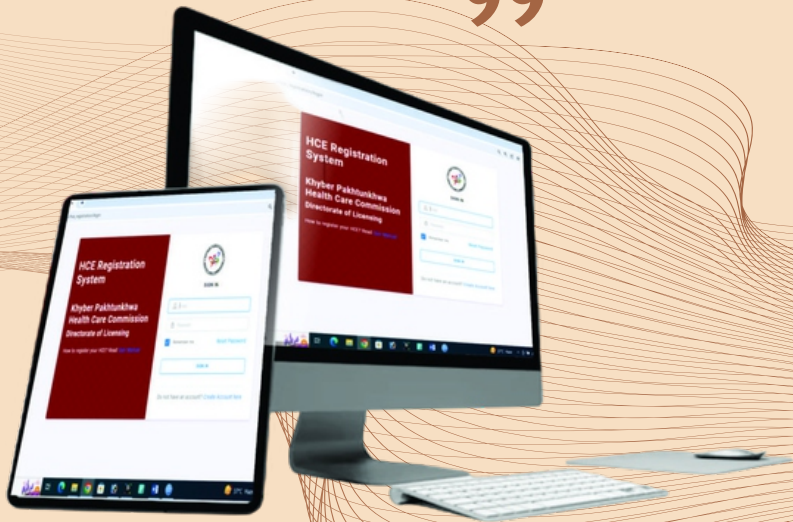


Registration and licensing is an essential and primary function of the Health Care Commission and under the Act, it is mandatory for all the private Health Care Establishments to get registered and for all the Health care establishments to get licensed by the Health Care Commission subject to compliance of the Minimum Service Delivery Standards. The directorate of licensing worked hard and during one year, a total of 6,860 new HCEs were registered.

HCEs Registered

Total HCEs Registered	Total during last one year
14,888	6,860

“Registration
is Online”



Total HCEs
Registered - 14,888
Number Doubled
in
One Year

After finalization of Minimum Services Delivery Standards for Category 1 HCEs, the Commission initiated the process of licensing of the health care establishments. In September 2022, the Commission awarded provisional licence to 25 HCEs (10 hospitals and 15 labs) in a ceremony graced by the then Provincial Minister for Health, Mr. Taimur Saleem Khan Jhagra. During the last one year, the Commission, on successful completion of training, awarded provisional licences to 110 health care establishments in the province.



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110 HCEs
Provisionally
Licensed
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In order to ensure transparency in the process of licensing, the commission established a pool of independent assessors, trainers and experts, consisting of qualified and senior professionals from various specialties of medical services, including clinicians, health managers, nurses, pharmacists, and electro-medical engineers.

Pool of Assessors and Trainers

“ Assessment through Independent Assessors ”



18 Hospitals Assessed



“6 Awarded Full Licence”

The Commission assessed 18 provisionally licensed hospitals through independent assessors. Criteria for assessments was based on the standards and indicators provided in the minimum service delivery standards. After detailed assessment, six category 1 hospitals of district Peshawar were found eligible and they were awarded full licence during a ceremony on June 26, 2023. Award of full licence was an acknowledgment of their compliance with the minimum service delivery standards and it has been the first ever event in the province that any hospital was awarded a full licence. The licences were awarded by the Chairman Khyber Pakhtunkhwa Health Care Commission, subject to renewal after three years.



Quackery is one of the major problems of the health care sector in the province and the Khyber Pakhtunkhwa Health Care Commission is determined to eradicate quackery from the entire province. The Commission has prepared a comprehensive plan and adopted multi-pronged strategy, i.e., excluding quacks through registration and licensing of qualified healthcare professionals; conducting regular anti-quackery campaigns; online and manual complaint management system; imposition of fines and permanent sealing of the establishments and public awareness to join hands with the Commission for eradication of the menace of quackery and ensuring safety of patients.

The Commission on one hand facilitated the qualified health care providers to register themselves through a very easy online registration system and isolating the non-qualified ones and on the other hand launched serious quackery eradication campaigns throughout the province. In addition to the routine inspections, the Commission also conducted sweeping anti-quackery campaign in several districts. The Commission also extended its operations to the merged tribal districts.

Quackery Eradication

6,971 HCEs Inspected 1,569 Notices Issued 777 Sealed





In order to secure complete information about the health care establishments in the province, the Commission has launched a project to develop a comprehensive database and GIS map of all the HCEs in the province. The exercise will not only identify and tag the HCEs but will also facilitate the unregistered HCEs to apply for registration on the spot. Moreover, the quacks will be identified for further necessary legal action. The project is assisted by the World Bank and implemented by an independent third party.



“Third Party Registration and Geo-Tagging in Progress”



“Complaint Management System for Right Protection”

Complaints Management

In order to maintain transparency and accountability in the health care system, it is vital to have an effective and responsive complaints management system. The Commission has established a robust mechanism for complaints management and grievance redressal of the patients as well as service providers. The Commission accepts complaints regarding medical negligence, maladministration, malpractice or failure in provision of the health care services according to quality standards through the Pakistan Citizens' Portal, KP HCC Online Complaints Portal, and manually submitted to the Commission. During the last one year the commission has received 1,642 complaints on various forums and resolved 1,470.



1,642 Complaints Received, 90% Resolved

“ Amendments to Act and Licensing Rules Submitted to Government ”

The Khyber Pakhtunkhwa Health Care Commission was established through Act No. V of 2015, followed by the Conduct of Business Regulations 2016. However, in order to align the existing legal framework with the contemporary healthcare standards and regulations, the Commission approved certain essential amendments to the Act of 2015, and the Licensing Rules, 2022 which were submitted to the Government of Khyber Pakhtunkhwa. The Commission has also developed and approved the Human resource Management, Financial Management, Establishment, Anti-quackery, Registration and Licensing, and Complaints Management Regulations, 2022 for conduct of its day to day business.

Legal Framework

6 Manuals of Regulations Drafted and Approved by the Board



Automation and digitization increases efficiency, improves transparency and reduces over-reliance on human interaction. The Commission has developed a state of the art website and provided online Complaint Management, Quackery Reporting and Registration Systems, thereby facilitating the stakeholders to have easy remote access to the Commission. This, however, is just the beginning and the Commission has started work on further digitization of the processes and establishment of online data bases.

Digitization



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**Online Portals
Developed for**
Registration
Complaints Management
Quackery Reporting
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“ 37 Sehat Card Hospitals Assessed ”



The Khyber Pakhtunkhwa Health Care Commission believes in team work and working in harmony with the partners in health care system. On the Directives of the Hon'ble Peshawar High Court, the Secretary Health Government of Khyber Pakhtunkhwa established a Grievance Redressal Committee (GRC) for the health insurance programme in the province, which is headed by the Chief Executive Officer of the Health Care Commission. Under the auspices of the GRC, the commission trained 40 assessors on the empanelment criteria under the Sehat Card Plus Programme and conducted assessment of 37 Sehat Card Plus empaneled hospitals.

***Support to Sehat Card Plus
Programme***

“ Assistance to Sehat Card Plus for Standards Development ”



The Commission inked a tripartite Memorandum of Understanding with Sehat Card Plus Programme and State Life Insurance Corporation, for review of assessment criteria for empanelment of secondary care hospitals, development of assessment criteria for tertiary care hospitals, establishment of a joint pool of assessors and assessments of five Sehat Card Plus empaneled tertiary care hospitals. Services of a third party consultancy firm have been hired for the purpose and the project will be completed soon.

Tripartite MoU between the KP HCC, Sehat Card Plus and State Life

“ Covid-19 Control Measures Assessed at Bacha Khan International Airport ”



Due to surge in the Covid-19 cases in the country, and in order to follow the measures being taken by the Federal Government for mitigation and control of the virus transmission, the Khyber Pakhtunkhwa Health Care Commission took active part in the activity and conducted assessment of disease control measures at Bacha Khan International Airport, Peshawar. The report, containing recommendations, was submitted to the Ministry of National Health Services, Regulations and Coordination.

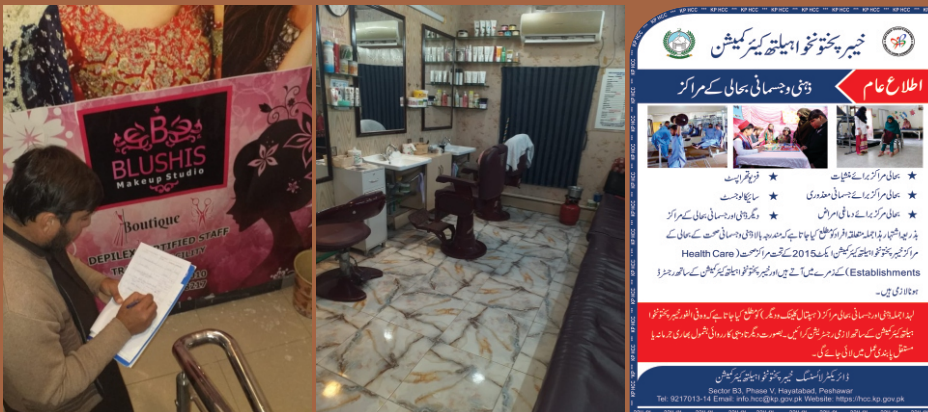


“Aesthetic and Rehabilitation Centres Brought under Regulatory Net”



The Khyber Pakhtunkhwa Health Care Commission conducted thorough consultation on the services provided by the beauty salons and rehabilitation centers. It was realized that they provided services which are infact medical services and therefore, steps were taken to bring them under the regulatory net of the Commission. Awareness campaigns were conducted through social, print and electronic media. This was followed by field visits and registration of these centres.

Aesthetic and Rehabilitation Centers



“Awareness is Integral Part of Strategy to Improve Quality of Health Care and Curb Quackery”

Citizens being the major stakeholders of the Health Care System, the Khyber Pakhtunkhwa Health Care Commission prioritized the right to information and awareness of the citizens and took various initiatives for educating them regarding their rights and the relevant regulatory frameworks in vogue from time to time. For this purpose the Commission used the available forums of print and electronic media, social media and dissemination of information through door to door campaigns. Besides regular dissemination through social media and newspapers, the Commission also broadcasted awareness messages through various TV Channels and the senior officers attended live awareness shows on national television.





KP HCC is part of the various Federal level Committees of the Federal Ministry of Health Services and actively engages in consultative dialogue. It is contributing to the policy discourse and is part of the Technical Working Group on Hospital Sector Vision, National Price Fixation Committee for Life Saving Medical Devices, National Consultations on Maternal and Perinatal Death Surveillance and Response, Patient Safety Committee on Development of National safety Standards for Hospitals, and Medical Tourism. KP HCC is also part of the consultative dialogue with UNODC on National Standards and Protocols for the Treatment of Drug Use Disorder.

In order to ensure uniformity in the policies and standards of health care, the Chief Executive Officer, Khyber Pakhtunkhwa Health Care Commission held various consultative meetings with the Health Regulatory Authorities of the other provinces and shared the experiences and adopted best practices from the other provinces.

“Participation in Federal and Provincial Consultations”





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