

### Khyber Pakhtunkhwa Health Care Commission

Government of Khyber Pakhtunkhwa











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#### **About the Commission**

The Khyber Pakhtunkhwa Health Care Commission is an autonomous body, established and governed under 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 medicine. 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 governance hierarchy i.e. the Board and Executive. 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 head office of the Commission is located at the provincial capital and it is assisted in implementation by four Regional Offices at Swat, Malakand, Abbottabad, and Bannu.



#### **About the Board**

The Board comprises 10 members; three official and seven ex-officio. The Board is led by the Chairman, elected from the ex-officio members through majority vote. The official members are representatives from the Health Department, Home Department, and Pakistan National Accreditation Council, whereas the ex-officio members are technical experts from the private sector. The Board is policy making body and meets at least once every quarter. The current Board consists of highly experienced members, committed to improve quality of healthcare services and patient safety in Khyber Pakhtunkhwa. The commitment of the board can be judged from the fact that despite statutory requirement of only one meeting per quarter, the Board conducted seven meetings in the first nine months and important policy decisions were taken.



**Dr. Ikram Ghani** Chairman



Mr. Muhammad Hamayun



Dr. Nosheen Sahibzada



Mr. Atta Ur Rehman Representative of Health Department



Mr. Ali Gohar Durrani



Mr. Dilwar Khan



Mr. Kashif Qayum Reprsentative of Home Department



Dr. Nasir Idress



Prof Dr. Alam Zeb Durrani



Ms. Ismat Gul Khattak
Representative of
Pakistan National Accreditation Council

#### **Message from the Chairman**



Dr. Ikram Ghani
Chairman, Board of
Khyber Pakhtunkhwa
Health Care Commission

The Government of Khyber Pakhtunkhwa is committed to provide healthcare services to all the citizens of the province. In addition, the government is also determined to improve the quality of care, through the establishment of Khyber Pakhtunkhwa Health Care Commission. The Department of Health is making every effort to facilitate the common man in getting the best possible healthcare.

The year 203-24 remained a significant year for the Commission and several important milestones were achieved. The basic aim of the Commission is to facilitate the health care establishments and care providers to follow the Minimum Service Delivery Standards of the Commission, leading to the provision of quality care to the patients.

My sincere thanks are due to the hon'ble Board Members for their dedication, professionalism and wholehearted support to the cause of provision of quality healthcare to the people of Khyber Pakhtunkhwa. Despite several challenges, the management and staff were successful to take innovative measure for quality of healthcare.

It is a pleasure to share that the 2023-24 had been a year of achievements for the Khyber Pakhtunkhwa Health Care Commission. This became possible due the unwavering support of the Hon'ble members of the Board of the Commission. The Board was ever available for steering the Commission through conducting regular meetings and taking making policy decisions. The Board members are highly professional and committed to the cause o improving quality of care.

The senior management and staff of the Commission worked hard during the year and successfully implemented activities to facilitate implementation of quality of care standards in the province, despite challenges of human resource and finances.

I am also thankful to the Health Department and Government of Khyber Pakhtunkhwa for the invaluable support throughout the year. In addition, my sincere thanks are due to the development partners for their technical assistance to the Commission.



Dr. Nadeem Akhtar
Chief Executive Officer
KP Health Care Commission

#### **Organizational Structure**

The internal management and day to day affairs of the Commission are handled by the Chief Executive Officer, appointed under section 9 of the Khyber Pakhtunkhwa Health Care Commission Act, 2015 and assisted by the Directors and other support staff. In order to ensure transparency, chain of responsibilities and functional specialization, the Commission has been divided into five directorates.

Directorate of Operations

Directorate of Legal Affairs

Directorate of Quality

Directorate of Finance

**Dr. Nadeem Akhtar**Chief Executive Officer
Khyber Pakhtunkhwa Health Care Commission



**Director Operations** 



**Mr. Mohsin Ali Turk** Director Legal Affairs



**Dr. Shabnam Gul** Director Licensing



**Dr.Uzma Syed**Deputy Director, Quality



Javed Khan Afridi Chief Finanical Officer

# Regular Policy Guidance of the Board and Committees



### Board and Expert Committees Meet Regularly to Guide Legislative and Policy Decisions

With the aim to discuss and decide upon all the legislative and policy matters, and provide guidance to the executive, the Board has conducted its regular meetings as per scheme provided in the Khyber Pakhtunkhwa Health Care Commission Act, 2015. The Commission, as per law, has also four functional committees of experts; Finance and Grants Committee, Continuous Quality Improvement Committee, Technical Committee, and Performance Review Committee. The said Committees have also held its meetings as per law and provided guidance to the Commissions on technical matters, as and when expedient.



# Strengthening the Commission through Development Partners' Assistance

uman resource operations are always significant contributors to the success of an organization. Deficiency of the human resource has always remained a weaker link and for that matter, the Commission is in the process of hiring qualified and trained human resource. Concurrently, the Commission continued engagement with the development partner organizations for provision of technical and human resource support for achievement of strategic objectives of the Commission. During the last financial year, the Commission continued its coordination with the World Bank through HCIP. The Commission also had several rounds of discussion with the USAID-Building Healthy Family Activity, the FCDO-Evidence for Health, and UNICEF and

concluded agreements regarding technical and human resource support.

USAID-Building Healthy Family Activities committed revision of the Minimum Service Delivery Standards (MSDS) for Category 1 hospitals and digitalization of the management system by designing and creating ERP system for the Commission and work on both the projects is in progress.



FCDO-Evidence for Health on the other hand agreed on providing assistance to the Commission through revision of the MSDS for out-patient and primary healthcare facilities, such as GP clinics, specialist clinics and BHUs. Similarly, the E4H project has also agreed on providing the services of a consultant for support to the directorate of

Moreover the Commission engaged UNODC for support in enhancing the capacity of the staff of drug rehabilitation centres.

licensing.

Commission Strengthens Human Resources with Development Partner Support: Collaboration with USAID, FCDO, and UNODC Boosts Strategic Initiatives

### **Encouragement of Staff**

Teamwork brings a sense of unity, creativity, collaboration and motivation to the workplace, and the commission has a firm belief in collective efforts as an essence of accomplishment. The Board and Executive of the Commission has a persistent policy of incentivizing the best workers as a source of motivation for the best performers as well as other staff members of the Commission. The Commission thus conferred awards upon the best performers on quarterly basis, through a transparent selection process.



Employee of the Quarter & Appreciation Certificate





### **Quality Standards for HCEs**

nsuring quality of health care services on uniform parameters is one of the core functions of the Commission under the Khyber Pakhtunkhwa Health Care Commission Act 2015 and for regulating health care services across the province, the Commission has already notified the minimum service delivery standards. 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. MSDS are also used as reference manuals for mandatory licensing of the health care establishments. Regulatory framework; however, is an evolving concept. Hence the Commission, based on evidences collected from the field activities, has initiated the process of revising the minimum service delivery standards, in collaboration with the development partners, notified for various categories of health care establishments. These will be finalized soon.









### Capacity Building of Staff of HCEs

Rather than dictation and policing, the Commission has adopted a policy of regulation through consultation and engagement of the stakeholders. For that matter, the Commission has undertaken the responsibility to guide and train the staff of HCEs on the implementation of MSDS. Trainings and orientation sessions are conducted by the highly qualified and skilled trainers, selected by the Commission through a transparent competitive process. Training of service providers is a continuous process and during the past one year, the commission has provided trainings to staff of 79 hospitals, 21 Labs, and 44 GP/Specialist Clinics and trained a total of 238 individuals from diverse areas of the province. The trainees include participants from both the public and private sector hospitals.

Besides the formal training of health care service providers, the Commission also conducted awareness seminars at the Khyber Teaching Hospital & PGMI Lady Reading Hospital, Peshawar for awareness of the medical professionals in general and highlighted the significance of implementation of the minimum service delivery standards for all the individual service providers

KP HCC Shifts Focus to Collaborative Regulation

Over 230 Healthcare Providers Trained on MSDS Implementation Across Khyber Pakhtunkhwa



## Expansion of Pool of Trainers and Assessors

Commission Expands and Trains Independent Assessors to Uphold Confidentiality and Transparency in Healthcare
Licensing

or the purpose of ensuring confidentiality, transparency and informed decision making in the process of assessment for licensing, the Commission has developed a pool of independent assessors and trainers consisting of experts from various fields of medical practice. Owing to persistent awareness campaigns of the Commission and increased number of application for licensing, the Commission during the last year has expanded its pool of assessors and trainers and secured the services of experts. Those assessors and trainers were also trained on Minimum Service Delivery Standards and scoring matrix.



# Regulation of Drug Rehabilitation Centres



espite the resource constraints, the Commission is continuously approaching and engaging with the national and international organizations working in the health sectors. Considering the serious impact of substance abuse on the mental and physical health of the citizens and their living standards, the Commission, in collaboration with the United Nations Office on Drugs and Crime (UNODC) conducted four sessions (8 days each) of training for capacity building of service providers of the drug rehabilitation centres on Universal Treatment Course and trained 26 staff members from 22 rehabilitation centres from different parts of the province.

Collaboration with UNODC Enhances Capacity in Drug Rehabilitation

26 Staff Members from 22 Rehab Centers were Trained





### **Community Awareness**

### **Commission Prioritizes Public** Awareness Through Diverse **Media Channels**

ommunity plays an important role in ✓ regulation of health care services. provided it is sufficiently educated on their rights and obligations under the relevant rules and regulations. Education of the general masses thus remains the top priority of the Commission, as cooperation of the citizens is highly relevant for strategizing quality improvement and eradication of quackery. The Commission during the last years has used all the available print, electronic and social media forums and educated the citizens on their rights and liabilities related to the preventive and well as curative health care. Besides regular dissemination through social media and newspapers, the Commission also broadcasted awareness messages through television and the senior officers attended live awareness shows on national television





تین ماه میں 454 کجی کلینکس اور ہسپتالوں کونوٹس جاری

#### 163 اداروں کوضا بطے کی یابندی ندکرنے رسیل کردیا گیا کے نی ہیلتھ کیئر کمیشن

نے سہ مات ر راورٹ جاری کردی ہے جس کے سہولیات کا معائد کیا ہے جن میں سے 454 کو مطابق 44 فی مرا کڑھت سے 97 ملے کوڑیت نوٹس جاری کئے گئے ہیں اور 163 اداروں کو ضابطے کی یابندی نہ کرنے پرسیل کر دیا گیا ہے نمیشن کو سہ ماہی کے دوران 5 6 5 شکایات

یٹاور (نیوز ر پورٹر) خیبر پختونخواہیلتھ کیئر کمیشن | ایکے س سی کی ٹیموں نے 1ہزار 19 8 ° مطابق 44 نجي مراكز صحت كے 97 عملے كوتربيت دی گئی ہے جس سے تربیت یافتہ عملے کی مجموعی تعداد 373 ہے کمیشن کی جانب سے اس عرصہ کے دوران 44 نئے ہیتالوں کو عارضی لائسنس بھی جاری کئے گئے ہیں۔ رپورٹ کے مطابق



### Registration of Health Care Establishements

Registration and licensing is an essential and primary function of the Health Care Commission, and under the Khyber Pakhtunkhwa Health Care Commission Act, 2015, 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 Commission has established an online registration portal and provided facility of registration of HCEs at the door step. The directorate of licensing has made all possible attempts to reach out to the un-registered and un-licensed health care establishments and ensure their registration and licensing at their cost. During the last one year, the Commission has registered a total of 4687 health care establishments across the province.

Online Portal and Doorstep
Services Facilitate
Compliance
with Registration
Requirements

Health Care Commission Registers 4,687 HCEs

### Licensing

As per Registration and Licensing Regulations 2022, the process of licensing is completed in two stages. In the first stage, on completion of training on MSDS, the Health Care Establishments are issued a provisional licence, valid for three months or till the issuance of a full licence, whichever is earlier. The period may be extended as per law, provided the establishment fails to qualify the criteria for award of full licence. During the last one year, the Commission has issued provisional licences to 144 health care establishments across the province.

Grants of full licence is subject to qualification of the pre-





determined assessment criteria after a comprehensive assessment based on the standards and indicators provided in the minimum service delivery standards, conducted by the independent assessors. During the last one year, the Commission conducted assessments of 103 healthcare establishments and 26 qualified the criteria and were awarded full licences.

Award of full licence serves as acknowledgment of their compliance with the minimum service delivery standards. The total number of licenced health care establishments is 37.

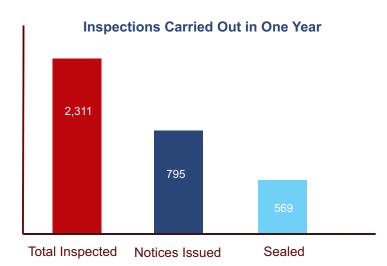




### **Quackery Eradication**

radication of quackery for ensuring the safety of patients is one of the top priorities 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.

The Commission on one hand facilitated the qualified health care providers to register themselves through an easy online registration system and isolate the non-qualified service providers and on the other hand launched serious quackery eradication campaigns throughout the province. During the last one years the Commission conducted inspections of 2311 healthcare establishments. 795 establishments were issued show-cause notices while 569 establishments were sealed.



569 HCEs
Sealed, 2311
Inspected in
Anti-Quackery
Drive



### Geo-tagging of HCEs

With the aim of securing an online access to complete information about the health care establishments, the Commission concluded the field activities of the ongoing project of development of a comprehensive database and GIS map of all the HCEs in the province. The project was implemented with the help of World Bank through HCIP. Through this exercise, the Commission secured data of and geo-tagged 38,402 health care establishments in the province.

Commission Completes GIS Mapping and Database of 38,402 Health Care Establishments with World Bank Support

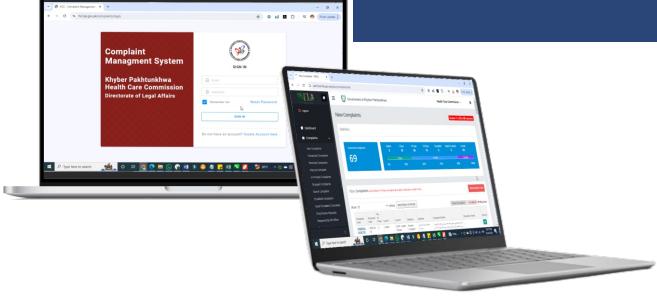


### **Complaints Management**

nother core function of the Commission is to redress the grievances of the citizens as well as the health care service providers and for that matter, the Health Care Commission has, on one hand directed all the health care establishments to maintain a complaint redressal mechanism and on the other hand, the Commission has established a complaint management system. Every stake holder has access to the complaint redressal mechanism of the Commission, which receives, hears and transparently decide upon the complaints related to mal-administration, malpractice, medical negligence, harassment at workplace and refusal in provision of healthcare services. The complaints are received through PMDU (Pakistan Citizen's Portal), online portal established by the Khyber Pakhtunkhwa Health Care Commission and manually on the official address of the Commission. During the past one year, the Commission received 999 new complaints, while decided a total of 1049 complaints. In many cases, the commission has imposed penalties upon the defaulting health care establishments and service providers, in the form of fines, permanent sealing of the HCEs and ban on medical practice.



Complaint
Management
System for Right
Protection



### **Legal Framework**

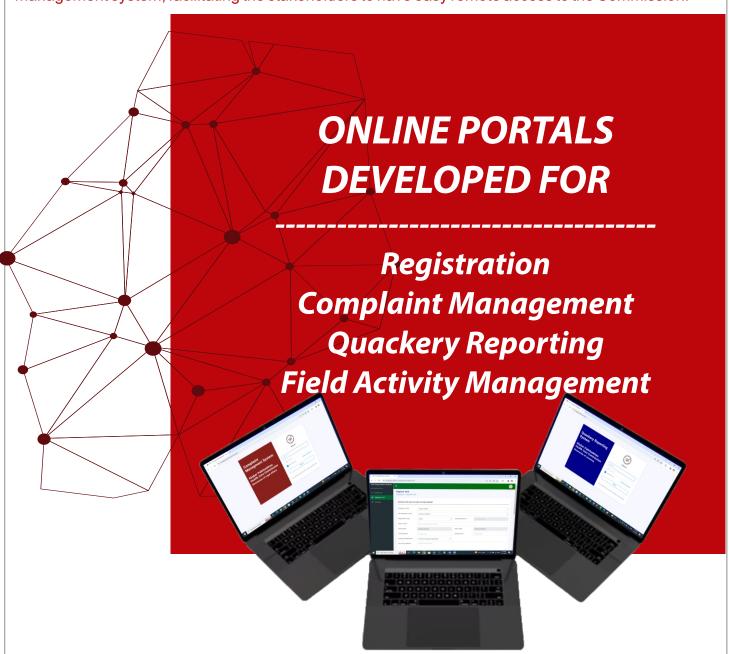
Benefits on retirement is one important source of motivation for employees of any organization. In order to secure and ensure the provision of provident fund for the employees of the Commission on their retirement, the Commission approved and notified the CP Fund regulations, 2024.



Commission Approves CP Fund Regulations 2024 to Secure Retirement Benefits for Employees

### **Automation & Digitization**

n order to ensure transparency, secure uniformity, increase efficiency and promote accountability, the Commission developed a software for online reporting of the field inspections and e-ticketing of the reported irregularities. The Commission is also in the process of developing a comprehensive ERP system, with the technical and financial assistance of USAID-Building Healthy Family Activities. The Commission has already established online registration, quackery reporting and complaint management system, facilitating the stakeholders to have easy remote access to the Commission.



### Development of Assessment Criteria for the Sehat Card Plus

As a result of tripartite Memorandum of Understanding with Sehat Card Plus Programme and State Life Insurance Corporation, the Commission through a third party consultancy firm, has completed the revision and development of assessment criteria for empanelment secondary care and tertiary care hospitals and conducted orientation of the assessors on the newly developed assessment and empanelment criteria.



New Assessment Criteria
Developed for Hospital Empanelment
Following MOU with Sehat Card Plus
and State Life Insurance Coorporation

