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MINISTRY OF HEALTH

STATEMENT ON THE DEATH OF MS. MAUREEN TATA AND DETERIORATING HEALTH STANDARDS IN THE COUNTRY

Statement requested by Senator Daisy Kanaiza on 22nd July, 2015.

Specific Information sought:-

1. Whether the government is aware that one Ms. Tata was hospitalized at St. Francis Community Hospital, Kasarani on 4th July, 2015 for a normal delivery but ended up undergoing a cesarean section that led to internal hemorrhage, this caused her transfer to Kenyatta National Hospital on 8th July, 2015 and she died on 8th July, 2015;
2. What necessitated the cesarean section operation? Who authorized it and whether the doctor who carried out the operation is qualified and licensed by the Kenya Medical Practitioners and Dentists Board (KMPDB) to perform such operations?
3. Why the hospital gave Ms. Tata food immediately after the operation and whether that is allowed for patients who have undergone such an operation;
4. Why did the hospital not inform her family upon realizing that her situation was deteriorating and take quick action upon signs of internal hemorrhage being detected?
5. What action shall be taken against the doctor who attended to Ms. Tata at St. Francis Community Hospital in Kasarani and against the hospital for failing to uphold professional ethics while attending to the said patient?
6. What measures has the government put in place to address deteriorating health care standards in the country?

In relation to the above, the House is also seeking clarifications on the issues below:

7. Explain how many mushrooming private clinics are in this country, how many are registered in Nairobi, if they have suitable maternal care equipment and whether they have qualified medical practitioners;
8. If the personnel who attended to the patient were qualified; including the anesthetist who gave the patient anesthesia, the doctor who operated on the patient; and if the nurse was qualified theatre nurse;
9. Whether the hospital is a registered institution, accredited to offer the kind of services they were offering?
10. Explain the role of KMPDB in terms of bringing criminal charges against the people who have mishandled patients like this one because they are becoming

rampant? Could we also have a record of which cases have been prosecuted apart from just negligence?

11. Whether all the attendant nurses and surgeons are qualified and not just the anesthetist and the surgeon who did the operation.

Answers

Introduction

Upon receipt of the Senate question regarding the death of Ms Maureen Tata, the Preliminary Inquiry Committee ("PIC") of the Medical Practitioners and Dentists Board immediately obtained records on the patient's care from St. Francis Community Hospital and Kenyatta National Hospital as well as the post-mortem report. On 30th September, 2015 the PIC of the Board held a hearing to investigate the complaints raised in relation to the management of the Late Ms. Maureen Tata. The following answers are based on that investigation.

1. **Whether the government is aware that one Ms. Tata was hospitalized at St. Francis Community Hospital, Kasarani on 4th July, 2015 for a normal delivery, but ended up undergoing a cesarean section that led to internal hemorrhage. this caused her transfer to Kenyatta National Hospital on 8th July, 2015 and she died on 8th July, 2015;**

The Ministry is aware that Ms. Maureen Tata was admitted at St. Francis Community Hospital on 4th July 2015 at 0200 for delivery, was delivered through Caesarean Section at the facility and was subsequently referred to KNH on 07//07/2015 where she died on 08/07/2015. An autopsy performed on the body of Ms Tata found no evidence of internal hemorrhage.

2. **What necessitated the cesarean section operation? Who authorized it and whether the doctor who carried out the operation is qualified and licensed by the Kenya Medical Practitioners and Dentists Board (KMPDB) to perform such operations?**

The patient had latent phase of labour that was monitored but failed to progress as expected in spite of augmentation. In such circumstances it is recommended that CS (Caesarean Section) be done to save the mother and her baby. The doctor on duty at the hospital's maternity unit authorized the operation and MS Tata signed the consent form. The evidence on record shows that the staff acted as would have been expected of them.

The doctor who carried out the operation is a qualified medical practitioner competent to perform Caesarean Sections and is licensed by the Kenya Medical Practitioners and Dentists Board (KMPDB)

3. **Why the hospital gave Ms. Tata food immediately after the operation and whether that is allowed for patients who have undergone such an operation;**

Clinical practice requires that patients be allowed to start having oral sips 6 hours after a Caesarean Section and this procedure was applied for MS Tata. Investigations have not revealed evidence that the patient was fed in the Hospital immediately after the operation.

4. **Why did the hospital not inform her family upon realizing that her situation was deteriorating and take quick action upon signs of internal hemorrhage being detected?**

Investigations show that relatives were informed of the condition of the patient at all times. The patient's sister gave evidence that she was informed of the patient's condition and the decision to transfer to Kenyatta National Hospital.

5. **What action shall be taken against the doctor who attended to Ms. Tata at St. Francis Community Hospital in Kasarani and against the hospital for failing to uphold professional ethics while attending to the said patient?**

Neither the doctor who attended to Ms. Tata nor St. Francis Community Hospital were found to be negligent or unprofessional with regard to the management of Ms Tata. Therefore no actions are contemplated against the doctor or the facility.

6. **What measures has the government put in place to address deteriorating health care standards in the country?**

The government has put in place the following measures to improve health care standards in the country

- a. The Ministry in collaboration with health regulatory boards and councils carries out routine inspections of all medical and dental clinics and laboratories in the country. This is done to ensure that only licensed facilities operate and offer services to the public.

Inspections help to root out individuals operating unlicensed facilities. Any person caught operating an unlicensed facility is prosecuted in court. Inspection as a tool also helps the Ministry and the regulatory bodies ensure that optimum standards are maintained in the provision of healthcare. This is done by ensuring that the health facilities allowed to practice meet set standards.

- b. The Ministry has strengthened the regulatory capacity of the boards and councils in the health sector. This has led to the development of **Professional Codes of Conduct** for nurses, clinical officers and medical practitioners and dentists. Codes are similarly being developed for other cadres;

- c. In October 2013, the Ministry developed the first **National Patient's Right Charter**, which sought to address and highlight patients' rights in regard to health services. The charter was developed in consultation with various

stakeholders in the health sector with a view to ensure that patients attain the highest quality of health care services and products possible;

- d. The Ministry and the regulatory bodies have developed and disseminated programs for **Continuous Professional Development (CPD)**. This is meant to ensure that health professionals keep abreast with emerging methods of providing treatment and better their clinical skills and knowledge. To ensure compliance with continuous professional development, regulatory bodies have made it mandatory by merging CPD with subsequent licensure to practice. The requirement of undertaking CPD is one of the key milestones in reducing cases of medical malpractice;
 - e. The Medical Practitioners and Dentists Board in liaison with key stakeholders reviewed the **medical and dental Core curriculum in 2014**. The core curriculum sets the benchmark for training in medicine and dentistry in the Country. This was necessitated by the need to ensure that the training offered in the institutions of higher learning was optimum and geared towards providing better services to the public;
 - f. In September 2013, the Ministry in collaboration with the Medical Practitioners and Dentists Board gazetted new rules to strengthen regulation of the health sector. As part of these disciplinary rules, the Board can constitute a Preliminary Inquiry Committee (PIC) to inquire into cases of malpractice. It is also now possible to constitute a Professional Conduct Committee (PCC) at the county level to hear and determine complaints of medical malpractice by medical and dental practitioners. The Preliminary Inquiry Committee ("PIC") and the Professional Conduct Committee ("PCC") have the legal mandate to impose sanctions and in particular, suspend licenses for practitioners and institutions found negligent for a period of up to twelve (12) months, or to recommend supervised training for practitioners for a specified period.
7. Explain how many mushrooming private clinics are in this country, how many are registered in Nairobi, if they have suitable maternal care equipment and whether they have qualified medical practitioners;

The Medical Practitioners and Dentists Board has the mandate to register and licence private health facilities. Private clinics are licensed to provide outpatient services. The board has no record of mushrooming private clinics. The board has a procedure for registration of private clinics and currently 1392 clinics have been registered countrywide. In Nairobi, there are 521 registered clinics.

Among the criteria for registration of private clinics is availability of related medical equipment and qualified staff. All private clinics are registered by the Board after meeting the registration criteria. Thereafter, the Board carries out routine inspections to ensure compliance.

8. If the personnel who attended to the patient were qualified; including the anesthetist who gave the patient anesthesia, the doctor who operated on the patient; and if the nurse was qualified theatre nurse;

The Committee reviewed the doctor's records with the Medical Practitioners and Dentists Board and noted that the doctors who participated in the management of the patient were qualified and registered with the Medical Practitioners and Dentists Board. The nurse who attended to Ms Tata were also found to be qualified and duly licensed by the Nursing Council of Kenya.

9. Whether the hospital is a registered institution, accredited to offer the kind of services they were offering?

St. Francis Community Hospital is registered by the Medical Practitioners and Dentists Board Registration No. 1402. It is classified as Level 3 Mission Hospital. This means that the hospital has the facilities to provide both inpatient and outpatient services.

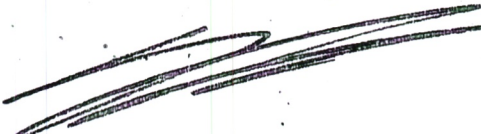
10. Explain the role of KMPDB in terms of bringing criminal charges against the people who have mishandled patients like this one because they are becoming rampant? Could we also have a record of which cases have been prosecuted apart from just negligence?

Section 24 of the Medical Practitioners and Dentists Act, (Cap 253) provides that prosecution for an offence under the Act shall be instituted with the written consent of the Director of Public Prosecutions (DPP). The role of the Board is therefore to investigate reported cases of malpractice and if of the opinion that a criminal offence has been committed seek consent to prosecute from the DPP.

The Board has handled numerous cases of negligence. One case of an offence under the Act (Tribunal case No. 4 of 2013) has been referred to the DPP for consent to prosecute.

11. Whether all the attendant nurses and surgeons are qualified and not just the anesthetist and the surgeon who did the operation.

All medical personnel who attended to the Late Ms. Maureen Tata were qualified and duly licensed by the relevant regulatory bodies.



James W. Macharia
CABINET SECRETARY
October 7, 2015

