



REGULATORY POLICY, PROFESSIONAL STANDARDS, AND GOVERNANCE IN A GLOBALISED HEALTHCARE SYSTEM

Kenya's healthcare sector continues to evolve as a regional referral and investment destination within East Africa. Increased participation by international hospital groups, specialist clinicians, academic institutions, humanitarian organisations, and cross-border healthcare investors has led to a growing presence of foreign medical practitioners within the country.

This trend reflects global realities in healthcare delivery. However, it is firmly anchored in a clear policy position: foreign medical practitioners may practise in Kenya only within a structured regulatory framework designed to protect patient safety, uphold professional standards, and preserve public confidence in the healthcare system.

Kenya's approach aligns with internationally accepted models of professional mobility—permissive, but controlled; open, but accountable.

Kenya's Legal and Regulatory Architecture

Kenya does not recognise automatic or unrestricted entry into medical practice by foreign professionals. The right to practise medicine is statutory, conditional, and subject to regulatory discretion exercised in the public interest.

The governing framework comprises:

- The Medical Practitioners and Dentists Act (Cap. 253).
- Regulations, circulars, and licensing guidelines issued by the Kenya Medical Practitioners and Dentists Council (KMPDC).
- Immigration and work authorisation laws administered by the Department of Immigration Services.
- Ministry of Health policies on human resources for health, patient safety, and quality assurance.

This framework reflects international best practice adopted in jurisdictions such as the United Kingdom, the European Union, Canada, and Australia, where professional mobility is permitted only through equivalence-based, regulator-led assessment and continuous oversight.

Current Government Policy on Foreign Doctors

Kenya's current policy position on foreign medical practitioners is guided by four core principles.

1. Skills Complementarity and Knowledge Transfer

Foreign doctors are licensed where they address clearly identified specialist gaps, support training and research, or contribute to humanitarian, academic, or referral-level services. Licensing is needs-based and grounded in national health system priorities rather than market convenience.

2. Preservation of National Regulatory Standards

All foreign practitioners are subject to Kenyan professional, ethical, and disciplinary standards, continuous oversight by the KMPDC, and regulatory conditions tailored to the local healthcare environment.

Foreign qualifications and experience are assessed *mutatis mutandis*, meaning they are recognised only to the extent that they are fully aligned with Kenya's statutory, clinical, and ethical benchmarks, without dilution or exception.

3. Patient Safety and Public Interest Supremacy

Regulatory discretion is exercised primarily to safeguard patient safety, maintain clinical quality, and protect public confidence in healthcare institutions. Commercial expediency or staffing pressure is not, of itself, a sufficient basis for approval.

4. Inter-Agency Regulatory Coordination

The Ministry of Health has reinforced coordination between professional regulators, immigration authorities, and health facility licensing bodies to ensure that no practitioner operates outside lawful, supervised, and authorised parameters.

Registration and Licensing of Foreign Doctors in Kenya

Foreign doctors seeking to practise in Kenya must undergo a comprehensive, multi-stage approval process administered by the Kenya Medical Practitioners and Dentists Council.

Step 1: Application for Temporary Registration

Applicants must submit certified medical and postgraduate qualifications, proof of current registration and good standing in the home jurisdiction, a valid practising licence from the country of origin, and detailed professional experience together with the intended scope of practice.

Step 2: Credential Verification and Equivalence Assessment

The KMPDC undertakes primary source verification of credentials, equivalence assessment against Kenyan medical education and training standards, and evaluation of the clinical necessity and public interest rationale for the engagement. Approval is discretionary and assessed on a case-by-case basis.

Step 3: Institutional Sponsorship

Foreign doctors must be sponsored by a licensed healthcare institution and practise strictly within an approved role, facility, and duration. Supervision and reporting requirements apply, and independent practice is prohibited unless expressly authorised.

Step 4: Issuance of Temporary Licence

Where approved, registration is time-limited and renewable. Practice rights are conditional and subject to monitoring, and breach of licence terms attracts regulatory sanction.

Step 5: Immigration Compliance

Separate and mandatory immigration compliance includes valid work permits, alignment between immigration status and professional scope, and ongoing compliance audits. Practicing without full regulatory and immigration approval constitutes unlawful medical practice.

Professional Standards and Governance Expectations

Kenya's regulatory model emphasizes that clinical independence, ethical integrity, and professional accountability are central to healthcare delivery.

Foreign doctors are subject to the same disciplinary jurisdiction as Kenyan practitioners, required to comply with Kenyan ethical codes and clinical protocols, and fully accountable for patient outcomes and professional conduct.

This governance approach reflects international consensus that professional dignity, regulatory clarity, and accountability are prerequisites for safe, effective, and sustainable healthcare systems.

Implications for Healthcare Institutions and Investors
Healthcare providers, investors, NGOs, and institutional sponsors engaging foreign doctors in Kenya must ensure full compliance with KMPDC licensing and supervision conditions, robust governance frameworks separating clinical decision-making from commercial pressures, alignment between regulatory, immigration, and institutional policies, and continuous compliance monitoring.

Failure to do so exposes institutions to regulatory enforcement, operational disruption, reputational damage, and material investment risk.

Conclusion

Foreign doctors contribute meaningfully to Kenya's healthcare ecosystem when engaged within the law. Kenya's policy framework is neither restrictive nor permissive by default; it is principled, structured, and patient-centred.

Global participation in healthcare must therefore operate within Kenya's legal and regulatory framework, adapted mutatis mutandis to domestic standards, and anchored firmly in public interest and patient safety.

This approach strengthens institutional credibility, investor confidence, and the long-term sustainability of Kenya's healthcare system.

Contact Us — Healthcare, Life Sciences & Pharmaceuticals (HLSP) Practice

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