



OPC SUCCESS STORY • NAIROBI COUNTY • MOMENTS PHARMACEUTICALS

“Now I Can Prove It”

How a late-night chemist on Moi Drive became one of Umoja’s accredited family planning points, and what its owner wants every pharmacy in Kenya to follow.



Mark Midimu (left, in white coat) with the KPA OPC team outside Moments Pharmaceuticals on Moi Drive, Umoja, Embakasi West.

AT A GLANCE

Pharmacy	Moments Pharmaceuticals (Late Night Chemist)
Location	Moi Drive, Umoja, Embakasi West, Nairobi County
Owner & Director	Mark Midimu
Accredited	April 2025, certificate no. KPA/PPB/FP0041
Now offering	Short-term family planning, including DMPA injectables
Linked facility	Umoja Health Centre (referrals and waste collection)

TO A PASSER-BY, it looks like any other neighbourhood chemist. A bold red-and-white signboard on Moi Drive in Umoja, Embakasi West, reads **MOMENTS PHARMACEUTICALS – LATE NIGHT CHEMIST**. Step inside, though, and you find something many community pharmacies in Kenya still cannot

offer: a provider who is trained, assessed and accredited by the Ministry of Health to deliver short-term family planning services, injectables included.

That provider is Mark Midimu, the owner and director of Moments Pharmaceuticals and one of more than 150 pharmacies that have taken part in the Optimizing the Pharmacy Channel (OPC) Project, implemented by the Kenya Pharmaceutical Association (KPA) over the last three years. His journey from “just hearing” about family planning to proudly displaying a QR-coded certification on his wall is a story of skills, trust and a community that has noticed the difference.

Before: “Things We Were Just Hearing”

Mark does not pretend he was always ready. Before KPA onboarded him for training, he says, family planning was made up of “some of the things we were just hearing.” There was little connection between his pharmacy and the wider health system, and one service in particular was out of reach. “Before, I was not giving out the injection on family planning,” he recalls.

The OPC Project changed that. Mark was trained on the Ministry of Health family planning curriculum, then put his new knowledge to work in a supervised practicum. The training gave him more than a new skill; it gave him a method. He learned how to approach each client, how to counsel, how to keep records, and how to give both intramuscular and subcutaneous DMPA injections.

“*By now I can prove that I can give the service to the client without any other difficulty.*”

— Mark Midimu, Moments Pharmaceuticals

Support, Not Supervision

After the classroom came a visit that Mark describes as a turning point. A technical assistance team came to his pharmacy, not to police him, but to help him find and fix his weak spots. They looked at infection prevention and control, waste bins and space for private client counselling.

Mark is refreshingly honest about what they found. “We didn’t have a setup like the way we are now,” he admits. Yellow and black waste bins were sometimes mixed. Injection technique, practised in the training room, now had to be perfected on real clients. With guidance, Mark reorganised his facility, put the right information materials on display, corrected his waste segregation, and learned to submit his data on time.

Today, before giving any method, he checks for underlying conditions such as high blood pressure and other medicines the client may be taking, using the Medical Eligibility Criteria (MEC) wheel. His counselling has changed too: clients, he says, now “feel they are part of it.”

The Paper That Builds Trust

Mark recorded the clients he served in a logbook, which was submitted to the Ministry of Health for verification. Once confirmed, he received his Certificate of Accreditation, issued in April 2025 pursuant to

the National Family Planning Guidelines for Service Providers in Kenya and signed by KPA, the Ministry of Health and the Pharmacy and Poisons Board.

Alongside it came a unique identifier for his premise. It carries the Ministry of Health, Kenya Pharmaceutical Association, Blue Cross and Pharmacy and Poisons Board logos, and a QR code. Any client who scans it is taken to the Ministry of Health database of trained providers, and can confirm on the spot that Moments Pharmaceuticals is accredited.



Mark's Ministry of Health Certificate of Accreditation, issued in April 2025.



The QR-coded unique identifier that lets any client verify the pharmacy's accreditation.

The effect on clients, Mark says, was immediate. People now know they are dealing with someone who has been trained and is practising by the rules, and that knowledge brings them closer.

“ Once they know that you are accredited and practising as per the instructions, it brings about confidence. They believe in you. **”**

— Mark Midimu



Mark Midimu welcomes the KPA OPC team to Moments Pharmaceuticals.

Found on the Map

Through OPC's digital visibility activities, Moments Pharmaceuticals is now on Facebook and Google Maps, and the phone has started ringing with new clients. Some call to ask for directions, checking whether the

pharmacy is the place they saw on Google Maps. “We have been having new clients following the platform,” Mark says.

A Bridge to Umoja Health Centre

OPC also linked the pharmacy to the county health system, working with the County Health Management Team. Moments Pharmaceuticals is now connected to Umoja Health Centre. When a client needs a method Mark does not provide, he writes a referral in a dedicated referral form, with his own contacts and those of the person receiving the client. The client does not feel passed on to strangers; they feel carried through one system.

The link works both ways. The health centre collects the pharmacy’s medical waste, and CHMT and public health officers visit to offer guidance. Mark’s monthly records are shared with the health centre as well as submitted to government.

Every Client, Every Need

Asked what has changed for his community, Mark lists it without hesitation. He can now manage side effects with confidence. He can tackle the myths clients bring with them, even the religious ones, and bring the conversation “to a level of simple understanding.” Supplies are steady, awareness is up, and the number of clients coming through his door has grown.

He has also learned that no two clients are alike. His pharmacy is wheelchair-accessible all the way to the consultation room. With deaf clients, he communicates in writing; with blind clients, he encourages them to come with a partner so that the discussion is clear. He is candid that he has not been trained in sign language, and he would welcome basic training to close that gap.

For adolescents under 18, Mark provides information, invites their parents in, and uses a parental consent form. Young women present a different challenge: “By the time you are giving them information, they seem to be having all the information,” he observes. His job, he says, is to guide them to the right information.

The Data Dilemma

Every month, by the 5th, Mark reports his family planning numbers: one copy to his referral centre and another to government through the Ministry of Health. He knows data drives quantification and policy, and he has not shied away from the hard parts. Some clients miss their return dates or disappear altogether, which is why he counsels every client on what to do after a late or missed dose. Some do not give accurate names or full details. And sometimes, on deadline day, the reporting system simply hangs.

His biggest frustration is the register itself, a tool designed for hospitals. Holding his hands far apart to show its size, he calls it “so big and hectic,” with too much to fill in. What pharmacies need, he says, is a simpler, pharmacy-adapted reporting tool. It is a request KPA is already acting on, as it works to align reporting tools with the realities of private pharmacy practice and explores digitising them.

What Stays When the Project Ends

For Mark, the OPC Project may be winding down, but the practice is not. He now gives every client a family planning follow-up card, recording blood pressure, weight and the date of their next visit. He intends to keep reporting his data, keep nurturing the relationships he has built with his clients, and keep the awareness spreading through his community.

Looking back over three years, he counts his transformation in four things: the training, the accreditation certificate, the unique identifier, and the injection he can now confidently give.

A Message to over 13,000 Colleagues

Through OPC and related efforts, KPA has trained about 500 pharmaceutical technologists, a small share of a membership of over 13,000. Mark's advice to colleagues who have not yet been trained is simple: ask for the training, take part, and gain the knowledge he now has.

He also has a bigger idea. Family planning skills, he believes, should be built into the curriculum at training institutions, so that new graduates enter practice ready to serve, and government is spared the cost of retraining them after college.

“*Those who are out there practising, go for the training and make your facility shine.”*

— Mark Midimu's last word



Cletus Otieno

**Project
Administrator, OPC
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Association**

EDITOR'S REMARKS

When KPA set out to implement the OPC Project, our aim was clear: *to expand the scope of practice of the Kenyan pharmaceutical technologist beyond dispensing, and to place community pharmacies firmly within the government's Universal Health Coverage and primary healthcare agenda.* Mark Midimu's story shows what that looks like on the ground.

At Moments Pharmaceuticals, accreditation has become visible trust. A client can scan a QR code and confirm that the provider in front of them is qualified. A referral book connects a late-night chemist on Moi Drive to Umoja Health Centre. A follow-up card keeps a client on track long after she has left the counter.

Mark was also honest about the gaps: *reporting tools built for hospitals rather than pharmacies, systems that go down on deadline day, and the need for sign language skills.* These are not setbacks; they are our agenda. With only about 500 of over 13,000 pharmaceutical technologists trained, KPA will keep working with partners to train more providers, and to keep county linkages, community health promoter links and referrals working.

To every pharmacy still watching from the sidelines, Mark has already said it best: *go for the training and make your facility shine.*