

THE COUNTY ASSEMBLY OF KISUMU 3 RD ASSEMBLY	
DATE: 7/03/2023	Time: 2:30 P.M.
	Day: Tuesday
TABLED BY:	Hon. Vincent Jagongo
CLERK AT THE TABLE	A. Obonyo

COUNTY GOVERNMENT OF KISUMU

COUNTY ASSEMBLY OF KISUMU

HEALTH, HOUSING AND SANITATION COMMITTEE

**REPORT ON STUDY TOUR AT MAMA LUCY KIBAKI AND KENYATTA
NATIONAL HOSPITALS.**

Submitted for approval pursuant to Standing Orders No.182.

Presented by;

Hon Vincent Jagongo,
Committee Chairperson.

Prepared by;
Clerks Chambers
County Assembly Buildings.

March, 2023.

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PREAMBLE

Mr. Speaker and Hon. Members,

PURSUANT to the provisions of the Kisumu County Assembly **Standing Orders (Second Schedule) No. 193** read together with **Standing Orders No. 194 (2c)** which mandates the committee to prepare programs and activities to be undertaken in each Fiscal Year, the Committee on Health, Housing and Sanitation prepared its Annual Work Plan for FY 2022/2023 detailing its errands amongst them, a study tour.

Following the approval of the Liaison Committee, the Speaker of the Kisumu County Assembly permitted the Committee to carry out this exercise as it attempts to achieve its mandate.

The committee, through the office of the Clerk, communicated to both Mama Lucy Kibaki and Kenyatta National Hospitals seeking authority to carry out a study tour at their facilities (**attached**). The two hospitals communicated back affirming the request (**attached**).

Legal framework and Mandate of the Committee

Mr. Speaker and Honourable Members,

The Departmental Committee on Health and Sanitation was constituted on Tuesday 18th October, 2022 during the First Session of the Third (3rd) County Assembly pursuant to provisions of the Standing Order (SO) 193(1).

The Committee executes its mandate in accordance with the provisions of Standing Orders 195(5) and Second Schedule from which it draws its mandate to look into and investigate on;

All matters relating to County health services, including, in particular County health facilities and pharmacies, ambulance services, promotion of primary health care, licensing and control of undertakings that sell food to the public, cemeteries, funeral parlours and crematoria and refuse removal, dumps and solid waste disposal; housing; and sanitation.

Objectives

Mr. Speaker and Hon. Members,

The Committee's main objective of the tour was;

1. Comparative analysis: The study tour was to enable the Committee make comparisons and to assess the feasibility of replicating best practices that are working for the two hospitals for improvement of the situation at JOOTRH.

Committee membership

The following are the members of the Committee as constituted pursuant to the Selection Committee report that was adopted by this House;

Members;

- | | | |
|--------------------------|---|------------------|
| 1. Hon Vincent Jagongo | - | Chairperson |
| 2. Hon Emily Oginga | - | Vice Chairperson |
| 3. Hon Seth Okumu | - | Member |
| 4. Hon Jennipher Obonyo | - | Member |
| 5. Hon Nereah Okombo | - | Member |
| 6. Hon Seth Kanga | - | Member |
| 7. Hon Carren Ajwang' | - | Member |
| 8. Hon Joachim Oketch | - | Member |
| 9. Hon Kennedy Ooko | - | Member |
| 10. Hon Kennedy Ouko | - | Member |
| 11. Hon Mickey Ochieng' | - | Member |
| 12. Hon Pamela Oyoo | - | Member |
| 13. Hon Lumumba Owade | - | Member |
| 14. Hon Geoffrey Warindo | - | Member |
| 15. Hon Moses Ochele | - | Member |

Secretariat;

- | | | |
|--------------------------|---|------------------|
| 1. Obonyo Angelyne (Ms.) | - | Clerk Assistant |
| 2. Valery Achieng' (Ms.) | - | Hansard reporter |
| 3. Mr. Abraham Odegi | - | Sergeant-at-arm |

Acknowledgement

Mr. Speaker and Hon. Members,

May I take this opportunity to thank all the Members and secretariat of the Health Housing and Sanitation committee for their dedication, valuable input and contribution during the entire exercise.

Equally, the Committee also applauds Offices of the Speaker and Clerk of the County Assembly of Kisumu for offering extreme support and a show of goodwill that culminated to success of the exercise.

Hon Speaker, the Committee cannot forget to convey its utmost and sincere gratitude to the managements of Mama Lucy Kibaki and Kenyatta National Hospitals for the amiable welcome and full cooperation they accorded the Committee.

It is therefore my honor and privilege on behalf of the Committee to present to this Honourable House, the report on its study tour at Mama Lucy Kibaki and Kenyatta National Hospitals for consideration and adoption.

Thank You.



Hon. Vincent Jagongo,
Chairperson.

BACKGROUND OF THE STUDY TOUR

Mr. Speaker and Hon Members,

A statement was sought on the floor of this House by Hon Nancy Matara on 1st November, 2022 regarding maternal and neonatal deaths at JOOTRH. To Committee visited the facility to verify and gather first-hand information about the statement's related issues. The Committee also passed by the Accident and Emergency (A&E) department which had also been on the limelight on allegations of chaotic and unhygienic conditions with patient waiting for hours on days before getting attention.

Despite issuing a conclusive response to the statement before this House, the Committee felt a need to carry out a study tour to a different hospital to learn how their departments (mentioned above) carry out their activities.

During its meeting of **Thursday 24th November, 2022** vide **MIN. NO.34/CAK/HH&SC/NOV/2022 (attached)**, the Committee unanimously resolved to undertake a study tour at Mama Lucy Kibaki (having one of the busiest maternity hospital in the Country) and Kenyatta National Hospitals (being the leading public hospital in the Country).

At Mama Lucy Kibaki Hospital (MLKH) the Committee's intention was to assess its maternity and newborn section. This report aims to provide an overview of the hospital's management structure, bed capacity, performance indicators, and services offered by the maternity and newborn units.

On the other hand, the visit to Kenyatta National Hospital was aimed at assessing the hospital's disaster management system and its Accident and Emergency (A&E) department.

Hon Speaker, this report therefore highlights key findings and observations made by the committee during the entire exercise and further recommendations to JOOTRH on possible measures they can adopt in order to improve their service delivery.

Mama Lucy Kibaki Hospital (MLKH)

Establishment and management

Mr. Speaker and Hon Members,

MLKH was established on 5th October 2011 and serves neighboring communities of Embakasi East/West/Central/North and other neighborhoods with a catchment population of about 281,000. It serves a total of 2.1 million patients and is the third busiest maternity hospital in the country after Pumwani and Nakuru (Maternity) hospital.

The management team comprises the hospital board, CEO, two deputies, and various units/departments.

The hospital has a total of 633 staff which was reported to be half the required capacity with serious gaps in radiology, nursing and clinical sections. The management however engages additional staff on contract basis to help bridge the gap.

The committee was welcomed by the medical superintendent, Dr. Emma Muturo, and the hospital management team.

Performance Indicators

The committee noted the following performance indicators of the hospital:

- Mortality rate at 3%
- Re-admissions at 0.80%
- Bed occupancy 190%
- Referral rate at 2%
- C/S rate at 35%
- Pre-conception care
- Pediatric Unit

Committee findings at MLKH

Mr. Speaker and Hon Members,

The Committee established that the hospital is divided into pediatric, maternity and newborn units.

Pediatric unit

Has a 100% occupancy rate and handles approximately 1,500 to 2,000 patients daily, out of which about 100 to 200 are daily emergency cases. The unit has

Health, Housing and Sanitation Committee report on its study tour at Mama Lucy Kibaki and Kenyatta National Hospitals.

eight pediatricians and support from student-doctors from JKUAT. The top conditions seen at the unit daily include pneumonia, meningitis, malaria, malnutrition, rickets, and sickle cell. They are also in the process of establishing and equipping its own ICU unit.

Maternity and newborn unit

The maternity unit at MLKH is one of the busiest in the country, conducting about 1,000 deliveries per month. The committee established that the hospital has a bed capacity comprising 71 in maternity, 47 in the pediatric unit, and 11 in the gynecology unit. The average length of stay is 5 days.

The Committee further established that the unit;

1. Boasts a robust security system with uniformed contracted officers, CCTVVs, and security checks.
2. Has a radiology unit dedicated to the services of the maternity and newborn unit.
3. Has a fully equipped one-stop-shop GBV clinic with its laboratory and comprehensive linkages to the justice system. The clinic handles about 100 to 100 rape cases monthly and offers a 24hr service center complete with counseling and all other services without having to walk to the other sections of the hospital.
4. Has a specific records management section for ease of handling documentations for the mothers.
5. Payments are strictly done through Mpesa (No cash is allowed). Charges for maternity and newborns units are paid through Linda-Mama and NHIF programs. No extra charges is levied on the mothers.
6. In cases of lack of Linda-Mama and NHIF are lodged with the hospital's social service who commences the waiver process.
7. The hospital provide food for mothers but they are also allowed to receive food from home.
8. Has a theater divided into; Emergency C/S section, Elective C/S section, and performs all other emergency surgeries.
9. The maternity unit is divided into; C-Section, Post C/S section, and other sections which include mothers' lodging room, lactation room, and kangaroo mother care room.
10. The Kangaroo unit has nutritionists who takes care of mothers who do not have adequate family care. It performs the following functions;
 - Checking on weights and feeding habits of babies before they are discharged.
 - Operates on a discharge weight of 1.8kgs
 - Conducts eye checks on babies on weekly basis.
11. Newborn unit operates at a capacity of 80 newborns, which is above their capacity of 50 and is divided into;
 - a. Gynecology room
 - b. Obstetrics, and
 - c. Labor ward
 - Patients in labor are categorized in a specific room and are reviewed after every 2 hours.

- The C/ Section deliveries are discharged after 3 days.
12. Cases of abandoned children are handled by social workers and are given medical attention after which they are placed under custody of the court upon conclusion of medical care. No child is released without committal of the court and requisite documentation.

Challenges faced by the hospital.

The Committee was informed that the hospital faces the following challenges.

1. Inadequate human resource: The hospital is understaffed compared to its catchment area, with fewer doctors and nurses than needed to provide adequate care to patients.
2. Limited resources.
3. Inadequate infrastructure as the facility currently operates beyond capacity.

Kenyatta National Hospital (KNH)

Establishment and management

Mr. Speaker and Hon Members,

KNH was established in 1901 as a cottage hospital. It was officially named Kenyatta National Hospital in 1966, after Jomo Kenyatta, the first president of Kenya. The hospital has undergone several expansions and upgrades over the years to meet the growing demand for healthcare services in the country.

It is managed by a board of directors appointed by the Cabinet Secretary for Health. The board is responsible for setting policies and making decisions regarding the hospital's operations. The day-to-day management of the hospital is overseen by a chief executive officer who is appointed by the board.

It is funded by the government of Kenya and also generates revenue from patient fees and other sources. The hospital is committed to providing affordable and quality healthcare services to all Kenyans.

The hospital has several departments, each with its own management team.

The hospital has a medical advisory committee that advises its management on clinical matters.

Here the Committee was received by Ms. Stella Githaiga of the department of Affiliations and Institutional Development (A.I.D) together with various staff from the Accidents, Emergency and Disaster Management department led by Dr. Mutua - who is the chair of Emergency and Disaster Management at the Hospital.

Before embarking on a guided tour through the two department, the Committee had a round table meeting with the above mentioned team where the host team proposed;

- i. Partnership agreement between KNH and JOOTRH in order to help Kisumu County establish and operationalize; organ transplant, sickle cell, disaster management and related clinics/ departments. And,
- ii. THAT JOOTRH are welcomed to be sending their health providers for a week's or two attachment at the two departments in order to learn and improve on their patient-care skills among others.

Committee findings at KNH

Mr. Speaker and Hon Members,

The Committee established;

1. THAT the hospital does not refer patients but receive referrals from all hospitals across the country, and all hospitals within the country have KNH referral office numbers to contact in case of a disaster.
2. THAT all hospital staff, including support staff, are trained in basic disaster management skills enable them to be up the task if called upon.
3. THAT the Hospital has rare cases of health providers absconding duties as they have in place a policy agreement which the staff must sign. This policy guides their engagements thus cushioning the hospital from such cases.
4. That KNH **DOES NOT** offer waivers but provides credit on bills where a patient is allowed to leave after receiving treatment with a pledge to pay. This process that involves the hospital's legal team among others and thus it is rare for patients to disappear.

Disaster Management

Mr. Speaker and Hon Members,

At this department the Committee established that;

1. The hospital has a disaster management committee comprising departmental champions from all units within the hospital whose mandate is to oversee the response of the hospital to all cases of disasters across the country.
2. The committee is guided by national policies and response protocols on disaster as provided for by the Ministry of Health and a fully functional training manual on all issues disaster.
3. The department of the hospital is adequately staffed with 106 nurses, 35 doctors, 4 consultants, and 10 specialists available at any given time to handle accidents and emergencies.
4. The hospital has a disaster management plan, and occasionally conducts an annual drill to test its disaster management system.
5. In case of a disaster, the hospital has a disaster mass storage facility fully equipped with all requisite consumables and equipment capable of managing any kind of disaster for 72 hours before exhaustion.
6. According to KNH disaster management response, a disaster involves over 60 casualties being admitted in the hospital at the same time from one accident or occurrence. The number 60 was arrived at based on the calculations of 3% of the total hospital bed capacity, which stands at 2000. Some of the disaster cases the hospital has had to deal with among others include the 1998 Nairobi bomb blast and the Gikomba market fire tragedy.

7. A disaster response system is only activated after an incident of above 60 casualties of trauma and medical disaster.
8. There is a medical record personnel who registers disaster patients using a unique set of records.
9. The hospital does not charge disaster patients as they are taken care of by the disaster response and management budget.

Preparedness in Case of a Disaster

In preparation for a disaster, the hospital;

- Conducts drills to test their disaster management system.
- Has in place a specific mass storage facility with equipment and consumables capable of managing any kind of disaster for 72hours before exhaustion.
- Has staff houses that provide accommodation for critical care staff who are frontline points of call in cases of disaster.
- Has partners who are occasionally called upon to assist under public-private partnership arrangements guided by various Memorandums of Understanding (MoUs).
- Private donations are also encouraged by the disaster management teams from corporations, stakeholders, and individuals.

Accidents and Emergency department

Mr. Speaker and Hon Members,

The hospital's Accident and Emergency Department (A&E) is composed of several sections broadly categorized under surgical unit, obs-gynae unit, and medical services unit.

The department;

1. Prides itself on its critical care rooms for patients in critical conditions, resuscitations, mechanical breathing, and medical and surgical critical rooms.
2. Has a designated nurse in charge who conducts patient triage, observations, and recording of vitals. There are specific nurses handling walk-in cases, and there is also a general designated officer in charge of floor management for order.
3. Has a 24-hour counseling nurse always available.
4. Has a 12-bed capacity dedicated to resuscitation, with all trauma rooms being fully ICU equipped.
5. Has a dedicated 24-hour social work unit that conducts socio-economic assessments of patients facing challenges in paying their hospital bills and those without external family care.
6. Has a referral office that operates 24/7, a trauma theatre specific for emergencies and accidents, and a pharmacy with all drugs made available without external referrals.

7. The typical turnaround time for the services within the department is between 5 to 7 hours, with trauma cases taking about 24 hours.
8. Has a corporate Outpatient Clinic Center that handles outpatients for the private wing of the hospital having 28 specialized clinics with specific days for specific doctors. The clinic has a robust state of the art que-management system for order in service provision. The center operates on a 100% e-hospital system, thus reducing paper use. Other clinics and equipment available include state-of-the-art ultrasound, an international vaccination center, and a dental unit.

Challenges faced by the hospital

Mr. Speaker and Hon Members,

The hospital mentioned just one major challenge that is;

1. Inadequate public health systems. The Committee was informed that hospital often shoulders the burden of treating preventable diseases that could be managed through better public health systems, including improved access to clean water and sanitation.

OBSERVATION

Mr. Speaker and Hon Members,

Among others afore-listed, the Committee further observed;

1. **THAT** the managements of the two hospitals possess excellent management abilities, which could only be compared to a private facility management across the nation. The committee saw.
2. **THAT** KNH has a well-equipped mass storage facility and is adequately prepared to respond to disasters.
3. **THAT** KNH values hygiene with spotlessly clean facilities from the wards to the lavatories, no drugs and/or plaster odor and no patients roaming about the hallways as there is an officer who is strategically in charge of order.
4. **THAT** KNH has a disaster-specific ward which the Committee was made to understand has a full team of staff on standby.
5. **THAT** staff members from the two hospitals possess and portrayed exemplary positive attitude while discharging their duties. Their morale was seemingly high despite the obvious challenges.
6. **THAT** MLKH has an operational incinerator which serves both within and external waste management needs from neighboring facilities. Under construction is an ash pit which would complement the incinerator.
7. **THAT** MLKH has a fully equipped one-stop shop GBV clinic with its own laboratory that handles rape cases monthly offering a 24hr service center complete with counselling. The clinic has comprehensive linkages to the justice system
8. **THAT** MLKH has a theater solely dedicated to the maternity unit and a radiology unit servicing the maternity and newborn unit.
9. **THAT** MLKH Has a well-equipped children playground constructed under a partnership agreement with one of the schools in the neighboring community.
10. **THAT** MLKH has a fully equipped room with fridge and lactation equipment for conducive interaction and lactation services. Members of the staff are also allowed to access the facility.

RECOMMENDATIONS

1. **THAT** to avoid cases of constant abscondment the department of health in collaboration with the in charge of the hospital to come up with and implement a clear policy for contract agreements with health providers: This policy should be well-defined, comprehensive, and strictly enforced. It should outline the roles and responsibilities of health providers, including their duties, compensation, and consequences of abscondment of duties. This will help to ensure that all health providers are held accountable and meet their obligations. The policy should be submitted to the assembly within 60 days upon adoption of this report.
2. **THAT** the CEO of JOOTRH should come up with a program to attach health providers at KNH as this will not only enable them to observe and learn best practices and expose them to different patient populations and healthcare systems but also lead to improved quality of care provided to patients and optimize hospital operations.
3. **THAT** to ensure enhanced readiness and response to catastrophes and disasters, the County government need to invest more on emergency and disaster management infrastructure, equipment, staff and regular and diverse staff training so that they are well-equipped to handle any issue that may arise outside their current station.
4. **THAT** JOOTRH maternity wing should enhance family-centered care in order to provide a more supportive and compassionate healthcare experience for patients and their families.
5. **THAT** the County Public Service Board should endeavor to increase the staffing levels in the maternity and newborn sections of JOOTRH to ensure that there are enough nurses and doctors available to attend to patients. The last time the Committee visited the hospital, inadequate staffing poised as a big challenge to the department.
6. **THAT** the hospital management should consider initiatives that increase public awareness to avoid deaths resulting from late referrals and in readiness for emergencies. Such initiatives may include emergency exercises, public awareness campaigns, and outreach initiatives.
7. **THAT** the hospital should prioritize maternal and neonatal health by addressing issues staffing (in conjunction with the Public Service Board) among other issues. By doing so, it can reduce the high mortality rate (which stood at 16.11% as at November, 2022) and improve the quality of care provided to patients.
8. **THAT** JOOTRH should get in touch with the KHN to foster partnership in the areas the management proposed as had been mentioned earlier in this report.

9. **THAT** the county department of health should increase the capacity of and invest more in the lower-level hospitals to ensure that these hospitals have adequate resources to provide quality healthcare services. This can be done by providing equipment, training, and hiring more healthcare pworkers to ensure that they are adequately staffed and thus relieve JOOTRH off the burden it currently shoulders.

10. **THAT** the county department of health should consider offering telemedicine services to enable healthcare providers in lower-level hospitals to consult with specialists at the Level 5 hospital. This will ensure that patients receive the appropriate level of care without having to travel to the Level 5 hospital.

CONCLUSION

Mr. Speaker and Honourable members,

It is now my pleasure on behalf of the committee, to present the Health, Housing and Sanitation Committee report on its study tour at Mama Lucy Kibaki and Kenyatta National Hospitals to this Honorable House for adoption.

I call upon Hon ... to second.

ANNEXURE

Minutes of the Committee



COUNTY GOVERNMENT OF KISUMU
COUNTY ASSEMBLY OF KISUMU
P.O BOX 86-40100, KISUMU

**MINUTES OF THE SECTORAL COMMITTEE ON HEALTH, HOUSING AND
SANITATION HELD ON THURSDAY 24TH NOVEMBER, 2022 AT 9:00 A.M.
IN COMMITTEE ROOM 1.**

MEMBERS PRESENT.

- | | | |
|------------------------|---|------------------|
| 1. Hon Vincent Jagongo | - | Chairperson |
| 2. Hon Emily Oginga | - | Vice Chairperson |
| 3. Hon Nereah Okombo | - | Member |
| 4. Hon Kennedy Ooko | - | Member |
| 5. Hon Carren Odhiambo | - | Member |
| 6. Hon Geofrey Warindo | - | Member |
| 7. Hon Seth Okumu | - | Member |
| 8. Hon Mickey Ochieng' | - | Member |
| 9. Hon Jennifer Obonyo | - | Member |
| 10. Hon Kennedy Ouko | - | Members |
| 11. Hon Pamela Oyoo | - | Member |
| 12. Hon Seth Kanga | - | Member |

Secretariat present

- | | | |
|---------------------------|---|------------------|
| 1. Ms. Angelyne A. Obonyo | - | Clerk Assistant |
| 2. Mr. Abraham Odegi | - | Serjeant-at-arm |
| 3. Ms. Jacklyne Otieno | - | Hansard reporter |

MIN NO.28/CAK/HH&SC/NOV/2022

PRAYER

The meeting was called to order at 9:21 a.m. by a word of prayer from the Chairperson.

MIN NO.29/CAK/HH&SC/NOV/2022

PRELIMINARIES

- i. **Apology-**
No apology was registered.

Health, Housing and Sanitation Committee report on its study tour at Mama Lucy Kibaki and Kenyatta National Hospitals.

ii. **Communication from The Chair**

The Vice Chairperson welcomed Members to the 9th meeting of Thursday 24th November, 2022.

MIN NO.30/CAK/HH&SC/NOV/2022

ADOPTION OF AGENDA

The agenda was adopted as below;

1. Prayer.
2. Preliminaries
 - a) Communication from the Chair.
 - b) Apologies if any.
3. Adoption of Agenda.
4. Confirmation of previous minutes.
5. Matters Arising.
6. **Deliberation on the Committee's report on its consideration of the annual report and financial statements of Kisumu County Referral Hospital for the year ended 30th June, 2022**
7. A.O.B
8. Adjournment and date of next meeting.

The agenda was adopted with amendment to include A.O.B upon being proposed by Hon Lumumba Owade and Seconded by Hon Mickey Ochieng'.

MIN NO.31/CAK/HH&SC/NOV/2022
MINUTES

CONFIRMATION OF PREVIOUS

Minutes of Thursday 17th November, 2022 were read by the Clerk and thereafter proposed by Hon Pamela Odhiambo and Seconded by Hon Seth Kanga as the true deliberations of the previous meeting.

MIN NO.32/CAK/HH&SC/NOV/2022

MATTERS ARISING

There were no matters arising.

MIN NO.33/CAK/HH&SC/NOV/2022

**DELIBERATION ON THE
COMMITTEE REPORT ON
CONSIDERATION OF THE ANNUAL
REPORT AND FINANCIAL
STATEMENTS OF KCRH FOR THE
YEAR ENDED 30TH JUNE, 2022.**

The Vice Chairperson moved the agenda and invited the clerk to take Members through the Committee report.

It was noted that the hospital was yet to submit the documents as was instructed in the previous meeting.

Resolution agreed upon

The Committee thereafter resolved as follow;

Health, Housing and Sanitation Committee report on its study tour at Mama Lucy Kibaki and Kenyatta National Hospitals.

- i. The Clerk to remind the Hospital to submit the documents within a week's time.

MIN NO.34/CAK/HH&SC/NOV/2022

A.O.B

A member sought to know when the Committee would retreat now that the House is set to adjourn in a week's time.

The Chairperson thereafter opened the agenda for debate to get Members' opinions on the nature and venue for the exercise.

A member suggested that the Committee, having visited the maternity and A&E wings at JOOTRH while investigating a statement sought by Hon. Nancy Matara, carry out a study tour to learn about how other hospitals are handling matters maternity and neonatal deaths and, the status of Accidents and Emergency departments.

After deliberations the Committee resolved to carry out a study tour to Mama Lucy Kibaki and Kenyatta National Hospital being one of the busiest maternity hospital and the leading public hospital in the country respectively, in accordance with the Liaison Committee schedule for Committees' retreat.

MIN NO.35/CAK/HH&SC/NOV/2022 ADJOURNMENT AND DATE OF NEXT MEETING

There being no any other business for consideration, the meeting adjourned at 10:07 a.m. Date of the next meeting was to be communicated later.

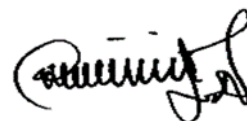
Agenda was to be as follows;

1. **Deliberation and Adoption on the Committee's draft report on its consideration of the annual report and financial statements of KCRH for the year ended 30th June, 2022.**

Minutes approved by;



**Hon Vincent Jagongo,
Committee Chairperson.**



**Angelyne A. Obonyo,
Committee Clerk.**



COUNTY GOVERNMENT OF KISUMU
COUNTY ASSEMBLY OF KISUMU
P.O BOX 86-40100, KISUMU

**MINUTES OF THE SECTORAL COMMITTEE ON HEALTH, HOUSING AND
SANITATION HELD ON THURSDAY 2ND MARCH, AT 9:00 A.M. IN
COMMITTEE ROOM 1.**

MEMBERS PRESENT.

- | | | |
|-------------------------|---|---------|
| 1. Hon Nereah Okombo | - | Member |
| 2. Hon Kennedy Ooko | - | Member |
| 3. Hon Kennedy Ouko | - | Members |
| 4. Hon Pamela Oyoo | - | Member |
| 5. Hon Seth Kanga | - | Member |
| 6. Hon Joachim Oketch | - | Member |
| 7. Hon Geoffrey Warindo | - | Member |

Secretariat present

- | | | |
|---------------------------|---|------------------|
| 4. Ms. Angelyne A. Obonyo | - | Clerk Assistant |
| 5. Mr. Abraham Odegi | - | Serjeant-at-arm |
| 6. Ms. Jacklyne Otieno | - | Hansard reporter |

MIN NO.1/CAK/HH&SC/FEB/2023

PRAYER

The meeting was called to order at 9:21 a.m. by a word of prayer from the AgChairperson Hon Nereah Okombo upon being proposed by Hon Kennedy Ooko and seconded by Hon Kennedy Ouko, in accordance with the provisions of Standing Orders No. 171, to chair the meeting on behalf of the Chairperson and his deputy who were held up on an official duty.

MIN NO.2/CAK/HH&SC/FEB/2023

PRELIMINARIES

- iii. **Apology-**
No apology was registered.

iv. **Communication from The Chair**

The Vice Chairperson welcomed Members to the 1st meeting of Thursday 2nd March, 2022.

The agenda was adopted as below;

1. Prayer.
2. Preliminaries
 - a) Communication from the Chair.
 - b) Apologies if any.
3. Adoption of Agenda.
4. Confirmation of previous minutes.
5. Matters Arising.
6. **Adoption of the Committee report on its consideration of KCRH reports and financial statements for the year ended June, 2022.**
7. **Deliberation and adoption of Committee report on its study tour at Mama Lucy Kibaki and Kenyatta National Hospitals.**
8. Adjournment and date of next meeting.

The agenda was adopted without upon being proposed by Hon Moses Ochele and Seconded by Hon Kennedy Ooko.

MIN NO.4/CAK/HH&SC/FEB/2023**CONFIRMATION OF PREVIOUS MINUTES**

Minutes of Thursday 24th November, 2022 were read by the Clerk and thereafter proposed by Hon Joachim Oketch and Seconded by Hon Seth Kanga as the true deliberations of the previous meeting.

MIN NO.5/CAK/HH&SC/FEB/2023**MATTERS ARISING**

There were no matters arising.

MIN NO.6/CAK/HH&SC/FEB/2023**ADOPTION OF THE COMMITTEE REPORT ON CONSIDERATION OF THE ANNUAL REPORT AND FINANCIAL STATEMENTS OF KCRH FOR THE YEAR ENDED 30TH JUNE, 2022.**

The AgChairperson moved the agenda and invited the clerk to take Members through the Committee report after which she opened the agenda for debate.

After a lengthy deliberations the Committee unanimously adopted the report and appended their signatures upon proposal from Hon Geoffrey Warindo and seconding by Hon Joachim Oketch.

The AgChairperson thereafter instructed the Clerk to forward the report to the House Business Committee for purposes of scheduling for debate.

The AgChairperson once again invited the Clerk to take Members through the draft report of the Committee's study tour and thereafter opened the agenda for debate.

After deliberation, the Members adopted the report with few adjustments and appended their signatures upon being proposed and seconded by Hon. Kennedy Ouko and Hon Seth Kanga respectively.

The clerk was once again instructed to forward the report to the House Business Committee for scheduling.

There being no any other business for consideration, the meeting adjourned at 10:07 a.m. Date of the next meeting was to be communicated later.

Agenda was to be as follows;

- 1. Deliberation on the grievances forwarded by one Mr. William Ondigo on alleged illegal dismissal without pay by Rabuor Sub County Hospital.**

Minutes approved by;



**Hon Vincent Jagongo,
Committee Chairperson.**




**Angelyne A. Obonyo,
Committee Clerk.**

Correspondences

Letter to Mama Lucy Kibaki

P.O Box 86-40100, Kisumu
Email: kisumuassembly@gmail.com



Email: owenojuok@gmail.com
Web: www.kisumuassembly.go.ke

County Assembly of Kisumu
OFFICE OF THE CLERK

Ref. CAK/MED-SUP-MLKH/1/2023(1) DATE: 16TH JANUARY 2023

To Medical Superintendent,
Mama Lucy Kibaki Hospital,
NAIROBI.

Dear Sir/Madam

RE: INTENTION TO CARRY OUT A STUDY TOUR AT YOUR FACILITY.

The above matter refers;

Aware that it is our obligation as a country to take legislative, policy and other measures including setting standards to achieve the progressive realization of the right to health as is stated under Article 42(1) of the Kenyan Constitution.

Kisumu County has in the recent past been hit with cases of maternal and neonatal deaths. It is against this backdrop that the Committee earmarked Mama Lucy Kibaki hospital for this exercise to learn from your operations towards efficiency and improvement of the County Hospitals.

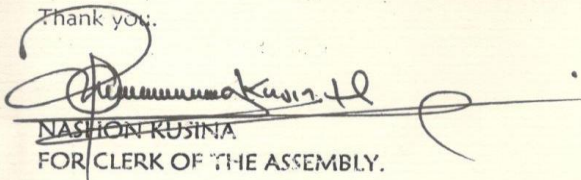
We therefore intend to visit the following sections:

- i. Maternity unit.
- ii. Newborn Unit

The purpose of this letter is therefore to request your authority to carry out this exercise at your facility from **1st February to 7th February, 2023.**

We look forward to a productive learning exercise.

Thank you.


NASHION KUSINA
FOR CLERK OF THE ASSEMBLY.

Health, Housing and Sanitation Committee report on its study tour at Mama Lucy Kibaki and Kenyatta National Hospitals.

Letter to Kenyatta National Hospital

P.O Box 86-40100, Kisumu
Email: kisumuassembly@gmail.com



Email: owenojuok@gmail.com
Web: www.kisumuassembly.go.ke

County Assembly of Kisumu OFFICE OF THE CLERK

Ref. CAK/CEO/KNH/1/2023(2)

DATE: 16TH JANUARY 2023

To Chief Executive Officer,
Kenyatta National Hospital,
P.O Box 20723- 00202,
NAIROBI.

Dear Sir/Madam

RE: INTENTION TO CARRY OUT A STUDY TOUR AT YOUR FACILITY.

The above matter refers:

Aware that it is our obligation as a country to take legislative, policy and other measures including setting standards to achieve the progressive realization of the right to health as is stated under Article 42(1) of the Kenyan Constitution.

It is in this regard that the County Assembly Health, Housing and Sanitation Committee wishes to carry out a visit to the **disaster and emergency department** and also to learn how the hospital is dealing with the following:

- i. Disposal of uncollected bodies.
- ii. Universal Health Coverage

The purpose of this letter is therefore to request your authority to carry out this exercise at the facility from **1st February to 7th February, 2023.**

We look forward to a productive learning exercise.

Thank you.

NASHON KUSINA
FOR CLERK OF THE ASSEMBLY.

Response from Mama Lucy Kibaki Hospital

Telephone: Nairobi

020 – 2297000

020 – 8022676



MAMA LUCY KIBAKI HOSPITAL-EMBAKASI

P.O. Box 1278-00515

BURUBURU-NAIROBI

**EXECUTIVE OFFICE OF THE PRESIDENT
NAIROBI METROPOLITAN SERVICES
DIRECTORATE OF HEALTH**

DATE: 25TH JANUARY 2023

Clerk of the Assembly
County Assembly of Kisumu
P. O. Box 86-40100
Kisumu

Dear Sir,

RE: INTENTION TO CARRY OUT A STUDY TOUR

We are in receipt of your letter Ref: CAK/MED-SUP-MLKH/1/2023(1), dated 16th January 2023.

Your request to carry out a study tour within our facility especially at the maternity and newborn units has been approved.

We, therefore remain to see you on the proposed dates for further engagement.

**Dr. Emma Muturo,
MEDICAL SUPERINTENDENT.**

Pictorials



A section of Committee Members and KNH staff posing for a photo.



The KNH Emergency and Disaster Management Committee chairman, Dr. Mutua taking the Committee through the details of the department before embarking on a guided tour.



Committee Members taken through the disaster and Management by the nurse in charge of the unit.



Committee posing for a photo at Mama Lucy Kibaki Hospital.





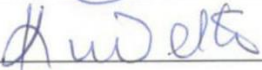





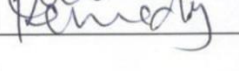

MLKH Medical superintendent Dr. Emma Muturo giving Members a brief about the hospital.



Committee members on a guided tour at the maternity and newborn unit at MLKH

Adoption Schedule

We Members of the Health, Housing and Sanitation do hereby affix our signatures to affirm the correctness and support for this report and every information prescribed herein.

SRL NO.	NAME	POSITION	SIGNATURE
1.	Hon Vincent Jagongo	Chairperson	
2.	Hon Emily Oginga	Vice Chairperson	
3.	Hon Seth Okumu	Member	
4.	Hon Jennipher Obonyo	Member	
5.	Hon Nereah Okombo	Member	
6.	Hon Seth Kanga	Member	
7.	Hon Carren Ajwang'	Member	
8.	Hon Joachim Oketch	Member	
9.	Hon Kennedy Ooko	Member	
10.	Hon Kennedy Ouko	Member	
11.	Hon Mickey Ochieng'	Member	
12.	Hon Pamela Oyoo	Member	
13.	Hon Patrick Owade	Member	
14.	Hon Geoffrey Warindo	Member	
15.	Hon Moses Ochele	Member	