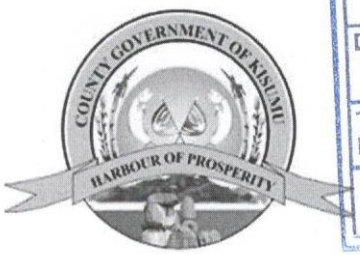
COUNTY GOVERNMENT OF KISUMU



THE COUNTY ASSEMBLY OF KISUMU
3RD ASSEMBLY
DATE: 5/12/2023
Time: 2:30pm
Day: Tuesday
TABLED BY: Hon. Vincent Jagongo
CLERK AT THE TABLE: A. Obanyo

COUNTY ASSEMBLY OF KISUMU

THIRD ASSEMBLY **SECOND SESSION**

MEDICAL SERVICES, PUBLIC HEALTH AND SANITAION COMMITTEE

REPORT ON THE CURRENT STATUS OF SUB COUNTY HOSPITALS

Presented by;
Hon Vincent Jagongo,
Chairperson.

December, 2023

Clerk's Chambers
County Assembly Buildings
Kisumu, Kenya

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CHAIRPERSON'S FORWARD

PURSUANT to the provisions of Article 185 (3) of the Constitution of Kenya, section 8 of the County Governments Act No.17 of 2012, and Orders No. 193(5) (a) and 193(second schedule) of the Kisumu County Assembly Standing Orders, the Committee during its meeting held on 29th June, 2023, and made a resolution to initiate a comprehensive surveillance exercise on the status of health facilities within the County. This dedicated effort aimed to ensure the improvement of healthcare services and seamless functionality.

The Committee, as detailed in the report presented to this House on Thursday, 10th August, 2023, resolved to conduct the surveillance exercise in four phases, aligning with each quarter of the FY 2023/24. Subsequently, the Committee developed and adopted a program (**refer to annex 1**) to guide its activities for phases 1 and 2. The first phase, undertaken in the first quarter, focused on evaluating the status of referral hospitals. The second phase, scheduled for the second quarter, involved an inquiry into the current status of Sub-County hospitals.

Consequently, the Committee communicated its intention to the Honorable Speaker and sought his authority, in accordance with Orders No. 165 of the County Assembly Standing Orders, to hold its sittings outside the County Assembly precinct (**refer to annex 3**).

The Committee sought to address critical issues such as services offered, workload, staffing levels, staff details, equipment status, ambulance count, ongoing projects, financial aspects, and challenges faced by the facilities.

Mr. Speaker and Honorable Members,

This report presents the findings on the status of the Sub-County Hospitals visited by the Committee and outlines the proceedings of these visits.

Committee Proceedings

From the inception of the surveillance exercise to the adoption of this report, the Committee diligently conducted several meetings, including those held at the facilities (**refer to annex 3**).

ACKNOWLEDGEMENT

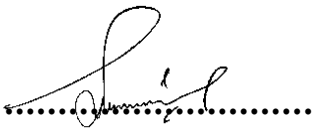
Mr. Speaker and Hon. Members,

I would like to express my gratitude to all the Members and secretariat of this committee for their unwavering dedication throughout this endeavor.

Additionally, the Committee extends its appreciation to the Offices of the Speaker and the Clerk of the County Assembly of Kisumu for their exceptional support and goodwill, which played a pivotal role in the success of the exercise and the subsequent creation of this report.

Honorable Speaker, the Committee is deeply thankful to the managements of the facilities involved for their warm welcome and complete cooperation during the exercise.

It is an immense honor and privilege therefore, on behalf of the Committee, to present to this esteemed House the report of the Medical Services, Public Health, and Sanitation Committee on the current status of Sub County hospitals. I submit this report for your thoughtful consideration and adoption



Hon. Vincent Jagongo,
Chairperson.

CHAPTER ONE

1.0. PREFACE

1.1. Establishment and Mandate of the Committee

Mr. Speaker and Honourable Members,

The Committee executes its mandate in accordance with the provisions of Orders 195(5), and the Second Schedule, of the County Assembly 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.***

Members of the Committee

The following are the members of the Committee as constituted pursuant to the Selection Committee report of Monday 17th July, 2023;

1. **Hon Vincent Jagongo - Chairperson**
2. **Hon Emily Oginga - Vice Chairperson**
3. Hon Seth Okumu - Member
4. Hon Nereah Okombo - Member
5. Hon Kennedy Ooko - Member
6. Hon Joachim Oketch - Member
7. Hon Lumumba Owade - Member

Secretariat to the Committee

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

CHAPTER TWO

LEGAL FRAMEWORK

Mr. Speaker and Hon. Members,

Below are the laws that enabled and governed the Committee prior to during and post this exercise;

1.1. Article 185(3) of the Constitution of Kenya, 2010

Legislative authority of county assemblies

(3) A county assembly, while respecting the principle of the separation of powers, may exercise oversight over the county executive committee and any other county executive organs.

1.2. Section 8(1)(f) of the County Governments Act No.17 of 2012

Role of the county assembly

1) The county assembly shall –
   f. perform any other role as may be set out under the Constitution or legislation.

1.3. Kisumu County Assembly Standing Orders No. 193(5) (a)

(5) The functions of a Sectoral Committee shall be to —
   (a) investigate, inquire into, and report on all matters relating to the mandate, management, activities, administration, operations and estimates of the assigned departments.

1.4. Kisumu County Assembly Standing Orders No. 193(second schedule).

Mandates the Committee to investigate and inquire into-

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, refuse dumps and solid waste disposal; housing; and sanitation.

1.5. Kisumu County Assembly Standing Orders No. 193 (5) (g)

(5) The functions of a Sectoral Committee shall be to —

(g) make reports and recommendations to the County Assembly as often as possible, including recommendation of proposed legislation.

CHAPTER THREE

INTRODUCTION

Mr. Speaker and Hon Member,

a sub-county hospital, as defined by the Kenya Health Act, 2015, is a vital component of the healthcare system, offering comprehensive secondary-level healthcare services and playing a crucial role in the overall well-being of the population it serves

There are a total of fifteen (15) Sub County hospitals within the County as seen in the table below.

SRL NO.	SUB COUNTY	FACILITIES	
1.	Kisumu Central	1)	Migosi Sub County Hospital
2.	Kisumu East	2)	Gita Sub County Hospital
		3)	Chiga Sub County Hospital
3.	Kisumu West	4)	Nyahera Sub County Hospital
		5)	Ober Kamoth Sub County Hospital
		6)	Ojola Sub County Hospital
4.	Seme	7)	Miranga Sub County Hospital
		8)	Manyuanda Sub County Hospital
5.	Nyando	9)	Nyang'ande Sub County Hospital
		10)	Rabuor Sub County Hospital
6.	Muhoroni	11)	Nyang'oma Sub County Hospital
		12)	Masogo Sub County Hospital
7.	Nyakach	13)	Katito Sub County Hospital

		14)	Sondu Sub County Hospital
		15)	Nyamarimba Sub County Hospital

Due to resource constraints, the Committee decided to visit only one facility per sub county. Having already visited the two referral hospitals, both of which are located in Kisumu Central Sub County (with plans to visit a county hospital in the third quarter), the Committee opted not to visit any sub county hospitals within the constituency.

In conclusion, the committee visited the following facilities;

1. Ojola Sub County Hospital
2. Miranga Sub County Hospital
3. Gita Sub County Hospital
4. Sondu Sub County Hospital
5. Nyang'ande Sub County Hospital
6. Nyang'oma Sub County Hospital

CHAPTER FOUR

4.1. FINDINGS

4.1.1. OJOLA SUB COUNTY HOSPITAL

Services offered

- The facility offers;
- Out-Patient/In-Patient services
- Maternity services
- CCC
- Pharmacy
- Nutrition
- Laboratory
- Family Planning.
- Immunization
- Ante Natal Care
- Gender Based Violence

Staff establishment

The facility has 13 government sponsored staff, 5 partners sponsored (USAID), one support staff and 5 casual workers as shown

Cadre	No. (Govt sponsored)	No. (Partner sponsored)
Clinical Officers	2	1 (USAID - Nuru Ya Mtoto Project)
Health Administrator	1	0
Nursing Officers	7	0
Lab Tech	1	0
Health Records Information Officer	1	0
Public Health Officer	1	0
Data Officer	0	1 (USAID - Nuru Ya Mtoto Project)
Peer Educator	0	1 (USAID - Nuru Ya Mtoto Project)

HTS Officer	0	1 (USAID - Nuru Ya Mtoto Project)
Mentor Mother	0	1 (USAID - Nuru Ya Mtoto Project)
Total	**13**	**5**

THAT one nurse retired in June, 2022 and is yet to be replaced.

Bed Capacity

The facility has 23 beds, all of which are operational.

Ambulances.

The facility has no ambulance but usually contact the EOC, which is always available if needed.

Projects

There are a number of incomplete projects at the facility;

- Maternity wing that is approximated to cost Kshs.4,000,000
- Wards and offices.

Pending Bills

The facility has the following bills pending;

- Water bill at Ksh 366,473
- Electricity bill at Ksh 120,000

4.1.2. MIRANGA SUB COUNTY HOSPITAL

Staff establishment

The facility has 19 health providers of various cadre as shown by the table below. Out of which 10 are government sponsored and 9 partner-sponsored (Waltereed). There are also 8 casuals supporting the facility.

Cadre	No. (Government sponsored)	No. (Partner sponsored)
Clinical Officers	2	1
Nursing Officers	6	0
Lab Officers	1	1
Health Records Officer	1	0
Pharm Tech	0	1
Adherence Counsellor	0	1
Clinical Attendant	0	1
TB screener	0	1
Sample Transporter	0	1
HTS Counsellor	0	2
Total	**10**	**9**

No staff has left the facility under any circumstance.

Bed Capacity

The facility has 13 beds distributed as follows;

- General one block ward of 8 beds
- Maternity unit with 2 delivery beds and 3 post-delivery beds. The facility however lacks a disability user friendly delivery bed.

Operational status of equipment

- Solar system - functional
- Kepi fridge - functional
- Laboratory fridge - functional
- Kitchen freezer - functional
- Microscope - functional
- Centrifuge - functional
- 2 desk top - functional
- 2 printers/scanners - functional

- 1 resuscitaie - functional
- 2 tv screens - functional

Ambulances

The facility has one fully functional ambulance available. Make Ford Ranger KCA 445F.

Projects;

The following are the projects available for the facility

- Completion of maternity block - septic tank construction ongoing; at an estimated cost of KShs. 1,500,000 needed to complete it.
- Renovation of 3 staff houses blocks - proposed for 2023/24; an average of KShs. 2,000,000 needed to complete.
- Renovation of the gate - proposed for 2023/24; an average of KShs. 100,000 needed
- Construction of a burning chamber - proposed 2023/24; estimated to cost KShs. 500,000
- Renovation of floor by tilling - proposed 2023/24; estimated to cost Kshs. 500,000
- Procurement of FHG machine at a cost of KShs. 500,000 - proposed based on availability of funds
- Purchase of pharmacy fridge at a cost of KShs. 50,000 - proposed based on availability of funds
- Installation of water tanks at a cost of KShs. 200,000 - proposed based on availability of funds

Amount Owed to the facility by NHIF

The facility is owed a total of KShs. 1750,000 distributed as follows;

- LINDA MAMA KShs. 1,250,000 (Aug to Dec 2022 152 deliveries @ 5000 totalling to Kshs. 760,000 then Jan to July 2023 104 deliveries @ 5000 totalling to Kshs. 520,000).
- EDU AFYA KSH 500,000.

Pending bills

The facility has pending bills amounting to KShs. 150,000, of which Kshs 50,000 is for ambulance services and Kshs. 100,000 for casual salaries.

4.1.3. GITA SUB COUNTY HOSPITAL

Services offered

- Inpatient services
- Outpatient services
- Maternity services
- Laboratory services

Staff establishment

THAT the facility has 14 staff employed by the County Government and 1 senior support staff and 13 casual workers as shown in the table below;

SRL No.	Cadre	No.
1.	Clinical Officers	6
2.	Nursing Officers	10
3.	Laboratory Technologists	4
4.	Pharmaceutical Technologists	2
5.	Nutritionists	1
6.	Physiotherapists	1
7.	Occupational Therapists	1
8.	Driver	1
9.	Senior Support staff	1
10.	Casuals; Security - 3 Cleaners - 7 Grounds - 1 Billing Clerks - 3	13

11.	CHEW	1
12.	PHO	1
13.	Health Records	2

THAT two staff have left the facility and have not been replaced.

Bed Capacity

THAT the facility has a total of 22 beds distributed in various sections as shown;

- Maternity - 7
- Pediatric - 9
- Female - 3
- Male - 3

Operational status of equipment

SRL NO.	Equipment	No.	Status
1.	Oxygen Cylinders	2	Operational
2.	Oxygen Concentrators	2	Operational
3.	Laboratory Fridges	2	Operational
4.	Pharmacy Fridge	1	Operational
5.	Maternity Fridge	1	Operational
6.	BP Machines	4	Operational
7.	Adult weighing Scales	6	3 Operational 3 Obsolete
8.	Rehab Equipment (tens machine)	1	Operational

9.	Mobilizing Machine	1	Operational
10.	Ambulance	1	Operational
11.	Patient Beds	22	In use

Ambulances

THAT the facility has one ambulance and is operational

Projects

Amount owed to the facility

THAT the facility is owed as;

- NHIF - Kshs2,834,410
- MARWA - Kshs253,413

Pending Bills

THAT the facility has bills amounting to KShs. 300,00 pending.

Impact of FIF

1. Infrastructural Development
    - Renovation of old servant quarter to be pharmacy department with dispensing area and drugs store.
    - Patient confidentiality and comfort has been achieved by contraction of Dispensing booth which has intern improved service delivery
    - Relocation of pharmacy services has decongested outpatient department and creation of other departments like health records information office.
    - Hospital curtains and screens done which has greatly improved patient privacy and comfort.
    - Working surface in the laboratory has enabled the personnel work efficiently and also improved their wellbeing, motivation and productivity. It has also created space where others machines can be placed.

- Fencing of the waste disposal area.

2. Hospital has had consistent supply of basic commodities in key departments i.e. Laboratory, Pharmacy, Non-Pharmaceuticals etc.
3. Staff motivation, like hospital was able to do staff uniforms, organized staff team building as a way of motivation and staff lunch.
4. Patients food are always available
5. Hospital able to pay for utilities like water, electricity and casual wages consistently.

4.1.4. SONDU SUB COUNTY HOSPITAL.

1. **No. of healthcare providers per department/section (currently available against the ideal number required for optimal performance)**

Cadre	Number present	department
Clinical officers	2	Out patient
Nurses	9	Maternity /MCH
Labtechs	2	Laboratory
Pharmtech	2	pharmacy
Nutritionist	0	
Sonographer	0	Sonography room
Community health assistant	1	Community health department
Casuals	3	Maternity
Security guards	2	
clerks	2	Registry
Total		

THAT no staff has left the hospital through retirement, or death.

Bed capacity

- Two natal beds
- Five postnatal beds

Operational status of equipment's in the facility

- All equipment are operational except the autoclave which the ticket has been raised to sub county biomedical officer.

Availability of an ambulance and the operational status

- No ambulance is available

Projects

Proposed projects for the FY 2024/2025

- Perimeter fence
- Construction of septic tank

There is no project ongoing at the facility.

Amount owed to the facility by NHIF and/or LINDA MAMA

THAT from September 2021 to June 30th 2022 Linda mama in patient claim for the period was KShs. 567,500 out of which only KShs. 190,000 was paid.

THAT from July 1st 2022 to June 30th 2023 Linda mama claim for both inpatient and outpatient was KShs. 1,555,168 out of which only KShs. 471,000 was paid.

THAT for the two financial years, NHIF owes the facility Linda Mama claims amounting to Kshs. 1.461,668.

Pending Bills

The facility has pending bills amounting to Kshs. 367,032.48 for;

- Casual arrears for 8 months (42,000×8 months) = **336 000.00**
- Electricity bills = **25,032.48**
- Water bill = **6,000.00**

Impact of FIF act and the shortcomings.

The Committee established

THAT FIF has;

- Enhanced patient care by upgrading the service offered within facility
- Increased capacity: Facility improvements through FIF has resulted in increased bed capacity and expanded treatment areas
- Has led to economic growth
- Positive community impact.

THAT despite having positive impacts, there are also a number of shortcomings so far experienced;

- Lack of proper infrastructure for revenue collection -
- Reduce work load due to introduction of fee for service
- Accountability of funds collected through manual collection
- Low collection of revenue hence missing target of hospital budget

Challenges faced by the facility while carrying out its duties

The facility listed the following as its major challenges;

1. The maternity septic tank is in a bad state and therefore needs repair.
2. No proper fencing of the facility
3. Poor access road to the facility.
4. Delayed casual wages due to delay in disbursement of recurrent funds.

5. Lack of MCH waiting bay.

Attempts to address the challenges

The facility has however attempted to address these challenges as follows;

1. Seeking modern infrastructure for revenue collection e.g. MPESA PAY BILL, COMPUTERISED MODE OF COLLECTION SYSTEM, ETR MACHINE.
2. The health development committee has been notified about the status of the maternity septic tank and they promised to allocate funds for the same during the budget for the financial year 2024/2025
3. The access road to hospital - the ward admin was notified through hospital board and promised to work on it when the fund is available
4. Delayed casual wage - the HMT is following up with NHIF to pay the reimbursement owed to hospital.

4.1.5. NYANG'ANDE SUB COUNTY HOSPITAL

Services offered

- Antenatal Services
- Family planning services
- Child welfare clinic
- Cervical cancer screening services
- Postanal services
- Labour and Delivery services
- Nutrition service
- PMTCT Services
- HTS Services
- HIV Care and Treatment
- Health Education services
- Community Health Services
- Health Records and Information System
- TB Screening and Treatment
- CCC Services
- Inpatient care Services
- Minor Surgical services
- VMMC Services
- Laboratory Services
- Pharmaceutical Services
- NHIF and Linda Mama Services

Workload

MAY	JUNE	JULY	TOTAL
2487	1453	1916	5856

Deliveries

MAY	JUNE	JULY	TOTAL
32	35	18	85

Staff establishment

SRL No.	CADRE	NUMBER AVAILABLE
1.	Clinicians	5
2.	Nurses	8
3.	Health records	2
4.	Nutrition	1
5.	Pharmacy	2
6.	Laboratory	2
7.	HTS	3
8.	CHA	2
9.	Peer educator	3
10.	Mentor mother	2
11.	Cleaners	4
12.	Security	2
13.	Grounds man	0
14.	Sonographer	0
15.	Public health	1
16.	Ambulance driver	1

Bed Capacity

The facility has a total of 19 beds distributed in various sections as follows;

- Maternity 4 Beds
- Inpatient 8 Beds
- Outpatient 2 Coaches
- ANC 1 Coach

- Cancer Screening 1 Coach
- VMM 1 Coach
- Observation room 2 Beds

Ambulances

The facility has one ambulance of make Toyota Land cruiser that is operational.

Operational status of equipment

The table below shows the equipment available at the facility and their status

Equipment	**Functional**	**Not functional**
Bp machine	4	2
Weighing machine adults	2	2
Thermoguns	2	2
Baby weighing machines	2	1
Microscopes	2	0
Centrifuge machine	1	0
Fridges	4	0
Freezer	1	0
Glucometer machine	2	0
Hemicube machine	1	0
Computers	6	0
Laptop	1	0
Resuscitaie	1	1
Oxygen cylinder	2	0
Oxygen concentrator	1	0
Neonatal weighing machine	1	0

Baby warmer	0	0
Printers	2	1
Water pump	1	0
Electricity meter	1	0
Children playing equipment	6	0
Examination Ligia	2	0
Ultra sound machine	1	0

Pending bills

The pending bills at the facility totals to KShs.332,000 being monies pending for salaries of Casuals for 6 months (6x4100=246,000) and vehicle maintenance fee of KShs. 86,000.

Impact of FIF so far experienced in the process of its implementation.

Positive impact

THAT FIF has supported the facility in;

1. Hospital renovations and maintenance
2. Inpatients' feeding)
3. Purchase of office items

Short comings

1. Delay in dispatchment of A.I.E by the finance department
2. Community members are complaining that treatment should be free and not charged thus affected health seeking behaviors being that we are handling economically challenged community.
3. Irregular dispatchment of the collected funds by the county finance department.

Projects

1. Incomplete kitchen/Laundry Building
    - Was initially a project of the National government through CDF but was later handed over to county government of Kisumu to ensure its completion.
    - Amount required for its completion is Ash 500,000.

2. Incinerator
    - Was a FACES program but was left incomplete and handed over to county government of Kisumu.
    - The amount required for its completion is KShs.1, 000,000.

Amounts owed to the facility by NHIF and/or Linda Mama

NHIF services owed to the facility is Kshs. KSH 200,000 and amounts resulting from LINDA MAMA services is KShs. 900,000

4.1.6. NYANG'OMA SUB COUNTY HOSPITAL

Nyangoma is a sub county/ level 4 hospital as per gazette notice dated 10/11/2017 thus the name **Nyangoma sub-county hospital.**

Its situated in Kisumu county, Muhoroni sub county, Muhoroni constituency, Nyangoma-Masogo ward, Kong'weny village. Along Ahero- Awasi road, approximately one kilometer from Ogwethi market.

The facility is serving a catchment population of 15,840 in 2137 households.

Listed below are the points of inquiry;

1. **Services offered.**

    - General clinical services, i.e. outpatient services and comprehensive care clinic for both adults and paderaites.
    - Maternal and child health services (MCH) i.e. anti-natal and post-natal care to families.
    - Immunization services.
    - Cervical cancer screening services.
    - Family planning services.
    - Maternity services ie, pre-natal, natal and post-natal care.
    - Nutrition services.
    - HIV testing services.
    - Laboratory services.
    - Pharmacy services.
    - Community extension services including community outreaches

Facility workload.

attached below is the facility's June and July monthly workload from all departments.

INDICATOR	JUNE	JULY
OVER 60	21	25
CWC	401	276
FP	99	86
ANC	126	131
PNC	77	47
MATERNITY	26	17
CCC	1527	1542
TB	35(6NEW)	38(3 new)
NUTRITION	17	17
TOTAL	**2942**	**2749**

Staff establishment

THAT the facility has 58 staff shown in the table below;

	Staff cadres	No. available
1.	Consultants	0
2.	Medical officers	0
3.	Dentists	0
4.	Dental technologists	0
5.	Public health officers	1
6.	Pharmacists	0
7.	Pharmacy technologists	2
8.	Laboratory technologists	5

9.	Orthopedic technologists	0
10.	Nutritionists	1
11.	Radiographers	0
12.	Physiotherapists	0
13.	Occupational therapists	0
14.	Plaster technicians	0
15.	Health records & information officers	2
16.	Medical engineering technologists	1
17.	Medical engineering technicians	0
18.	Mortuary attendants	0
19.	Drivers	0
20.	Accountants	0
21.	Administrators	1
22.	Clinical officers (specialists)	1
23.	Clinical officers (general)	7
24.	Nursing staff (KRCHNs)	7
25.	Nursing staff (KECHN)	1
26.	Laboratory technicians	0
27.	Community oral health officers	0
28.	Secretarial staff/Clerks	0
29.	Attendants/Nurse aides	0
30.	Cooks	0
31.	Cleaners	0
32.	Security	3

33.	Community health extension workers (PHT's, social workers, etc.)	1
34.	Community health workers	21
35.	Casual workers/staff	7
		58

Staff who have left, retired and/or died.
The facility did not lose any staff in the last financial year (2022/2023).

Beds capacity per department/section.
The facility is currently operating a temporary maternity department with a 3-bed capacity.

Operational status of equipment.
Below is the hospital inventory list for equipment in addition to;

1. vaccine refrigerator (biomedicals TCW2000AC) partially faulty, freezing compartment not functioning and needs replacement or repair.
2. Standby generator partially faulty (change over system, triple charger and battery not functioning.)

Number of ambulances.

The facility currently operates with one ambulance attached to the sub county hospitals. The vehicle was however involved in an accident and is undergoing mechanical repair that is 80% done.

Currently the facility relies on the Sub County ambulance services through the EOC call center.

Projects

Constructing a new building to replace the condemned ESP Block was proposed in the financial year 2021/2022 at a cost of 35 million Kenya shillings. However, nothing has been done so far as regards the same.

Total amount owed to the facility by NHIF and/or Linda Mama.
As per the end of August 2023, NHIF owes the facility a total amount of 308,000 Kenya shillings.

11. Pending bills (Total amount).

The facility has a pending bill totaling to 1,525,418 Kenya shillings.

CODE	ITEM	AMOUNT
2110202	Casuals wages (7 casuals for 10 months)	420,000/=
2210101	Electricity	261,234/=
2211015	Food and Rations	73,555/=
2211001	Non-Pharm and Medical Drugs	181,321/=
2210303	Board allowance	83,500/=
2211204	Other fuel	30,000/=
2210201	Refined fuel and lubricants	60,000/=
2210502	Printing and Publishing	42,000/=
2220201	Maintenance of motor vehicle	38,000/=
2220205	Building and Stations	262,298/=
2211103	Sanitary and Cleansing	43,510/=
22110008	Laboratory materials	30,000/=
	TOTAL	1,525,418/=

Impacts of FIF Act and the shortcomings so far experienced in the process of its implementation.

IMPACTS OF FIF	**SHORTCOMINGS OF FIF**
Smooth running of the facility since we are able to budget on 100% of our facility collections quarterly.	Delayed disbursement of claims from the NHIF department.

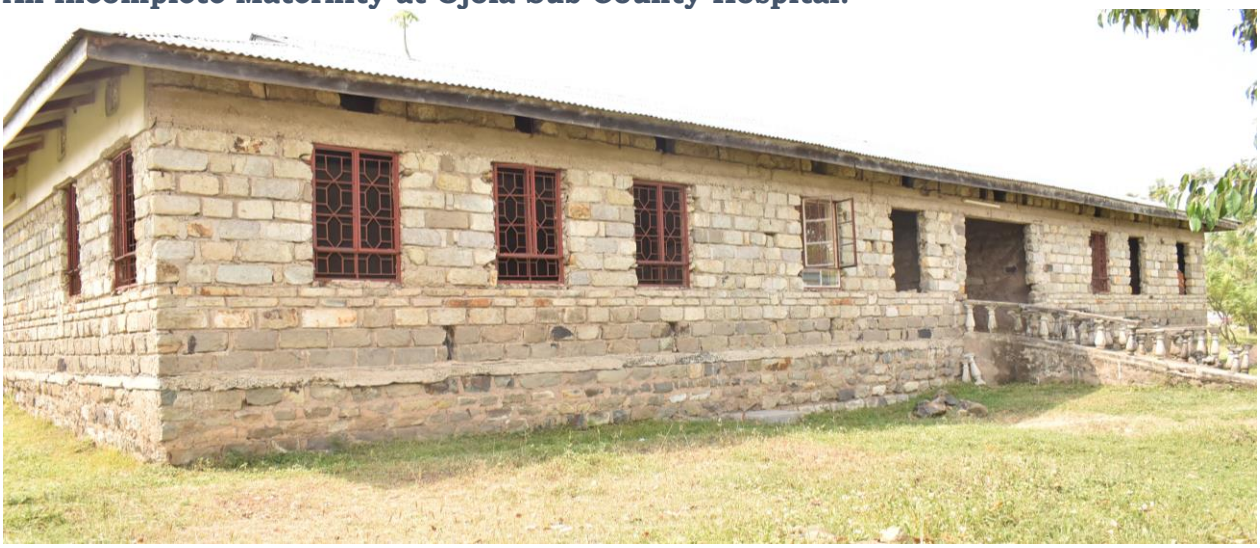
4.2. OBSERVATIONS

Mr. Speaker and Hon Members,

The Committee wishes to present its observations in terms of pictorials so that Hon Members can get first hand observation of the critical state of infrastructure in some of these facilities;

4.2.1. Ojola Sub County Hospital

An incomplete Maternity at Ojola Sub County Hospital.



Inside a ward at Ojola Sub County Hospital.

4.2.2. Miranga Sub County Hospital

That Committee made the following observations

a. **Waste disposal pit at Miranga Sub County Hospital**

b. Condemned staff quarters at Miranga Sub County Hospital

4.2.3. Gita Sub County Hospital

a. Ongoing Theatre at Gita Sub County Hospital.

b. Substandard does fitted at the ongoing theatre at Gita Sub County Hospital.

4.2.4. Sondu Sub County Hospital

a. The sunken septic tank at Sondu Sub County Hospital.

b. Reception/Registry area at Sondu Sub County Hospital.

4.2.5. Nyang'ande Sub County Hospital

a. Waste disposal area at Nyang'ande Sub County Hospital.

b. Cracked walls on a ward in Nyanga'nde Sub County Hospital.

c. Inside a ward in Nyang'ande Sub County Hospital.

4.2.6. Nyang'oma Sub County Hospital

a. Cracked walls of a structure at Nyang'oma Sub County Hospital

b. Waste disposal pit at Nyang'oma Sub County Hospital.

c. Severely cracked inside walls of the hospital

CHAPTER FIVE

5.1. CHALLENGES AND RECOMMENDATIONS

5.1.1. Specific challenges

Mr. Speaker and Hon Members

The table below shows challenges specific to each facility and the Committee's recommendations for each alongside

FACILITY	CHALLENGES	COMMITTEE RECOMMENDATION
Ojola S.C Hospital	Delayed payment of casual wages that had not been paid for 10 months due to erratic recurrent funds disbursement.	**THAT** the CECM for Medical Services, Public Health and Sanitation, and that of Finance and Economic Planning should establish a financial contingency plan to mitigate the impact of funding fluctuations on essential payments.
	Lack of proper fencing exposes the facility to security risks.	**THAT** the CECM for Medical Services, Public Health and Sanitation should prioritize the installation of proper fencing and enhance security measures to safeguard the facility and its personnel.
	Shortage of working offices and furniture	**THAT** the CECM for Medical Services, Public Health and Sanitation should; i. Conduct an assessment to the facility to identify immediate needs for additional offices and furniture. ii. Allocate resources to address the shortages promptly, creating a conducive work environment for staff. iii. Explore cost-effective solutions, such as refurbishing existing furniture.
	High utility bills	**THAT** the CECM for Medical Services, Public Health and Sanitation should;

		i. Conduct an energy audit to identify areas for efficiency improvements. ii. Implement energy-saving measures, such as adopting renewable energy sources and upgrading equipment for better energy efficiency. iii. Negotiate with utility providers for favorable rates and explore cost-sharing initiatives.
	Insufficient working equipment such as desktops across all departments	**THAT** the CECM for Medical Services, Public Health and Sanitation should invest in the procurement of desktop computers for departments, prioritizing those with critical functions.
	Long and cumbersome procedures hinder the disposal of obsolete equipment.	**THAT** the CECM for Medical Services, Public Health and Sanitation should review and streamline the procedures for disposing of obsolete equipment by developing clear guidelines and workflows to expedite the disposal process while ensuring compliance with relevant regulations.
	Incomplete structures such as maternity.	**THAT** the CECM for Medical Services, Public Health and Sanitation should prioritize completion of the unfinished structure by allocating necessary resources and expediting construction to ensure timely functionality and utilization of these facilities.
	Leaking doctor's house	**THAT** the CECM for Medical Services, Public Health and Sanitation should; i. Promptly address the issue of leaking by engaging skilled professionals to assess the extent of the leaks, fixing the identified problems, and implementing preventive measures to

		ensure the long-term integrity of the housing structures**.** ii. Conduct regular maintenance checks and timely repairs should be institutionalized to prevent such issues from recurring in the future.
Miranga S.C hospital	Low Facility Improvement Fund (FIF) collection due to a limited range of services offered.	**THAT** the range of services offered by the facility should be expanded and diversified to increase the facility's revenue streams. Also, an assessment should be conducted to identify potential services demand within the community and develop a strategic plan for their implementation.
	Poor motivation among support staff due to delayed payment of stipends	**THAT** the CECM for Medical Services, Public Health and Sanitation should establish a reliable and consistent stipend disbursement system and improve on the financial planning and management to address any funding gaps affecting timely payment of stipends.
	Low allocation of drawing rights from the Kenya Medical Supplies Authority (KEMSA).	**THAT** the CECM for Medical Services, Public Health and Sanitation should; i. Engage in dialogue with KEMSA to negotiate for a fair and sustainable allocation of drawing rights. ii. Provide accurate data on the facility's needs and consumption patterns to strengthen the case for increased allocations. iii. Explore alternative suppliers if necessary.
	Low allocations from the government	**THAT** the in-charge of the facility should present to the CECM for Medical Services, Public Health and Sanitation a

		comprehensive overview of the facility's needs and the impact on healthcare delivery for increased budgetary allocations from the county government.
	High costs associated with ambulance maintenance	**THAT** the department of Medical Services, Public Health and Sanitation needs to explore cost-saving measures, such as preventive maintenance schedules, to minimize emergency repairs and associated expenses.
	Inadequate allocation of resources for food services, affecting ratios.	**THAT** for revision of the budget accordingly to ensure sufficient allocations for food services the facility's nutritionist and/or dietary expert should; i. Conduct a thorough assessment of nutritional needs. ii. Develop balanced and cost-effective meal plans. The report should be submitted to the department of Medical Services, Public Health and Sanitation within 30 days of adoption of this report.
	Condemned staff House	**THAT** the department of Medical Services, Public Health and Sanitation must urgently address the issue of condemned staff houses by; i. Carrying out a comprehensive evaluation of the structural integrity and safety concerns of the condemned houses. ii. Allocating resources for either extensive renovations or the construction of new staff housing.

		iii. Establishing an efficient monitoring and maintenance system to prevent the deterioration of structural conditions and ensure the well-being of healthcare professionals and the community at large.
	Lack of adequate water supply as the facility relies majorly on tapped rainwater which is periodical.	**THAT** the CECM for Water, Environment, Natural Resources and Climate Change should adopt a multi-faceted approach that addresses both immediate and long-term water supply issues. This will enhance the resilience of the healthcare facility and contribute to improved patient care and overall operational efficiency.
Gita S.C hospital	Ordering commodities from KEMSA/MEDS, that oftentimes lack most essential supplies leading to stockouts and high expenditures on basic supplies.	**THAT** the CECM for Medical Services, Public Health and Sanitation should identify and engage affordable suppliers, authorizing purchases from alternative sources when necessary, to ensure a consistent and cost-effective supply of essential medical supplies.
	Inadequate staffing affects 24-hour service provision, particularly in crucial departments like the Lab and Pharmacy	**THAT** the CECM for Medical Services, Public Health and Sanitation should explore sustainable solutions to address the shortage of personnel, considering long-term recruitment strategies, training programs, and incentives to ensure continuous and reliable healthcare services.
	Limited space due to small parcel of land on which the facility lies.	**THAT** the CECM for Medical Services, Public Health and Sanitation should consider reaching out to the Ministry of Defense regarding the neighboring land where a police station is located and propose a collaborative effort where a portion of this land can be shared with the healthcare facility to expand its

		infrastructure and address the space constraints.
	Insufficient infrastructure was noted with the need for adequate space for various departments such as health records, physiotherapy, and occupational therapy.	**THAT** the CECM for Medical Services, Public Health and Sanitation should prioritize the improvement of infrastructure, ensuring that the facility has appropriate spaces for all departments to function effectively, thereby enhancing overall service delivery.
	Insufficient equipment for the newly established departments like Physiotherapy and Occupational Therapy which is impacting the quality of care.	**THAT** the CECM for Medical Services, Public Health and Sanitation should carry out a comprehensive assessment of the facility's current inventory and thereafter prioritize allocating resources for the procurement of equipment that are lacking.
	There is a substantial demand for waivers by focal in the community in the community.	**THAT** the CECM for Medical Services, Public Health and Sanitation should assess and come up with criteria (i.e. functional ethics and governance committee) to help with granting of waivers that will ensure a balanced approach to providing support while maintaining fiscal responsibility.
Sondu S.C hospital.	Deteriorating and sunken maternity septic tank.	**THAT** the CECM for Medical Services, Public Health and Sanitation should; i. Prioritize the immediate repair of the maternity septic tank to ensure proper sanitation and hygiene. ii. Allocate funds for routine maintenance to prevent future issues and engage qualified professionals for a comprehensive assessment and timely repairs.

	Lack of proper fencing that compromises security of the facility and staff.	**THAT** the CECM for Medical Services, Public Health and Sanitation should prioritize the installation of proper fencing and enhance security measures to safeguard the facility and its personnel.
	Poor access road conditions	**THAT** the CECM for Infrastructure, Public Works and Energy should collaborate with relevant authorities to advocate for road maintenance funds to improve the condition of the access road leading to the facility.
	Delayed payment of casual wages due to late disbursement of recurrent funds	**THAT** the CECM for Medical Services, Public Health and Sanitation, and that of Finance and Economic Planning should establish financial contingency plans to mitigate the impact of funding by implementing measures to streamline and expedite the disbursement of recurrent funds to ensure timely payment of wages.
	No waiting bay for Maternal and Child Health (MCH) services.	**THAT** the CECM for Medical Services, Public Health and Sanitation should prioritize construction of a waiting bay specifically for Maternal and Child Health services and ensure it is equipped with necessary amenities to provide comfort to pregnant women and mothers waiting for health services.
Nyang'ande S.C hospital.	Dilapidated buildings and structures including the maternity ward, staff quarters, MCH, and outpatient structures all of which are at risk of collapse.	**THAT** the CECM for Infrastructure, Public Works and Energy should engage qualified professionals to conduct thorough evaluations and provide recommendations on the structural integrity of these buildings and further demolish of recommend for urgent renovations, as the case may be, to ensure the safety of patients and staff.

	Rampant power surges, posing a risk to electrical equipment.	**THAT** the department of Medical Services, Public Health and Sanitation to liaise with the department of Infrastructure, Energy and Public Works to ensure investing in appropriate electrical infrastructure, surge protection systems, backup power sources and develop a contingency plan to ensure uninterrupted healthcare services.
	High costs associated with ambulance maintenance.	**THAT** the department of Medical Services, Public Health and Sanitation should explore cost-effective measures for ambulance maintenance, such as preventive maintenance schedules and regular inspections
	Flooding during rainy seasons.	**THAT** the CECM for Infrastructure, Public Works and Energy should address infrastructural issues contributing to flooding by implementing drainage improvement projects to mitigate flooding risks.
	Inadequate space due to a limited number of structures in the facility to accommodate services.	**THAT** the department of Medical Services, Public Health and Sanitation should conduct a facility expansion assessment to identify immediate needs for additional structures.
Nyang'oma S.C hospital.	Constraints in service delivery due to limited working space, particularly after the condemnation of the ESP building.	**THAT** the department of Infrastructure, Energy and Public Works should conduct a thorough assessment of the condemnation claims within the facility and explore options for repurposing or demolishing to create space for construction of sound structures.
	Lack of running water	**THAT** the CECM for Water, Environment, Natural Resources and Climate Change should undertake immediate measures to address the water scarcity issue through installation of water supply systems,

		including wells, boreholes, or connections to municipal water sources to ensure regular, sustainable and reliable water supply to the facility.

5.1.2. General challenges and recommendations

Mr. Speaker and Hon Members

The table below shows cross-cutting challenges across all the facilities and the Committee's recommendations for each alongside.

SRL NO.	CHALLENGE	COMMITTEE RECOMMENDATION
1.	Inadequate supply of non-Pharmaceuticals	**THAT** the department of Medical Services, Public Health and Sanitation should; i. Collaborate with relevant stakeholders to improve the supply chain for non-pharmaceuticals. ii. Establish a reliable procurement and distribution system to ensure a consistent and adequate supply of essential medical supplies. iii. Periodically review and adjust supply agreements to meet the facility's evolving needs. iv. Prioritize construction of a well-managed and regulated drug store within the County Health that will significantly cure issues around drug shortages, ensuring timely access to essential medications, and improving overall healthcare service delivery.

2.	Poor network coverage affecting timely online claims	**THAT** the department of Medical Services, Public Health and Sanitation should; i. Invest in improving and expanding network infrastructure within health facilities. ii. Collaborate with telecommunication providers to enhance connectivity, ensuring seamless online claims processing. iii. Consider implementing backup systems for situations of network outages.
3.	Delay and inconsistent disbursement of recurrent funds	**THAT** the CECM for Medical Services, Public Health and Sanitation should work closely with the department of Finance and Economic Planning to streamline the disbursement process, ensuring timely and predictable financial support for health facilities.
4.	Financial starvation due to delays in reimbursement of NHIF and/or Linda Mama claims	**THAT** the CECM for Medical Services, Public Health and Sanitation should; i. Reach out to NHIF for a discussion geared towards finding a lasting solution to the consistent delays in reimbursements for services already rendered. ii. Explore interim funding solutions to mitigate the impact of delayed reimbursements.
5.	Several cases of condemned buildings, particularly in areas with black cotton soil and Some Parts of Kisumu West Sub County.	**THAT** the department of Infrastructure, Energy and Public Works should; i. Conduct a comprehensive assessment of the structural integrity of the condemned structures in high-risk areas (in Nyang'ande, Sondu and Nyang'oma) and further develop and implement a plan for the reconstruction where necessary.

		ii. Endeavour to engage engineering experts to design resilient buildings suitable for the local soil conditions when undertaking projects.
6.	Acute shortage of staff.	**THAT** the Department of Medical Services, Public Health and Sanitation should collaborate closely with the Public Service Board should; i. Prioritize staff recruitment and retention initiatives and establish a mechanism for regular workforce assessment and planning. ii. Develop competitive remuneration packages and offer professional development opportunities to attract and retain skilled healthcare professionals.
7.	Inadequate waste disposal systems pose a threat to environmental and public health	**THAT** the Committee recommends purchase and installation of burning chambers in all sub-county hospitals within the county to enhance waste management practices, protect public health, and contribute to environmental sustainability, fostering a healthier and safer community for all.
8.	Lack of title deeds to the parcels on which these facilities lie.	**THAT** the department of Medical Services, Public Health and Sanitation to liaise with the department of Lands, Housing, Physical Planning and Urban Development to provide legal and administrative interventions to establish clear ownership and secure the hospital's long-term presence on the land.

5.2. CONCLUSION

Mr. Speaker and Hon Members,

It is now my pleasure on behalf of the committee, to present this report of the Medical Services, Public Health, and Sanitation Committee on the current status of Sub County hospitals to this Honorable House for adoption.

I call upon Hon … to second.

APPENDIX

ANNEX 1: PROGRAM FOR SITE VISIT

PHASE	CATEGORY	SITE	DATE
1	Referral Hospitals	Jaramogi Oginga Odinga Teaching and Referral Hospital	Monday 3rd July, 2023
		Kisumu County Referral Hospital	
2	County and Sub County Hospitals	Chulaimbo County Hosp.	Friday 7th July, 2023
		Ojola Sub County Hosp.	
		Lumumbs County Hospital	Monday 10th June, 2023
		Gita Sub County Hospital	
		Pap Onditi County Hospital	Wednesday 19th July, 2023
		Sondu Sub County Hospital	
		Chulaimbo County Hospital	Friday 21st July, 2023
		Miranga Sub County Hospital	
		Muhoroni County Hospital	Monday 25th July 2023
		Sub County Hospital	
		Ahero County Hospital	Thursday 27th July, 2023
		Nyang'ande Sub County Hospital	

ANNEX 2: REQUEST TO CARRY OUT SURVEILLANCE EXERCISE

COUNTY ASSEMBLY OF KISUMU

THIRD ASSEMBLY **SECOND SESSION**

INTERNAL MEMO

TO: THE SPEAKER
FROM: CHAIRPERSON; HEALTH, HOUSING AND SANITATION COMMITTEE
REF: CAK/HH&SC/JUNE/2023 (2)

DATE: 20TH JUNE, 2023

RE: REQUEST TO CARRY OUT SITE VISIT

The above subject refers;

Article 185 (3) of the constitution of Kenya and section 8 of the County Governments Act No.17 of 2012 mandates the County Assembly to exercise oversight of the county executive committee and any other county executive organs. Further, Standing Orders No. 193 of the Kisumu County Assembly Standing Orders, the Committee on Health, Housing and Sanitation is mandated to oversee all matters related to Health Services and Sanitation.

In fulfilment of its mandates, the Committee wishes to commence surveillance exercise in all the health facilities within the County and has adopted a program detailing how it intends to carry out the first and second phase of this exercise.

The purpose of this memo therefore is to seek the authority of your office to sit outside the precincts of the County Assembly **pursuant to the provisions Standing Orders No.165**.

Enclosed is a copy of the Committee program for your perusal.

We look forward to your kind consideration.

Thank you.

.....
Hon Vincent Jagongo,
Chairperson.

ANNEX 3: MINUTES

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 29TH JUNE, AT 11:00 A.M. IN COMMITTEE ROOM 1.

MEMBERS PRESENT.

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

Secretariat present

1. Ms. Angelyne A. Obonyo - Clerk Assistant

MIN NO.6/CAK/HH&SC/JUN/2023 PRAYER

The meeting was called to order at 11:22 a.m. by a word of prayer from the Vice Chairperson.

MIN NO.7/CAK/HH&SC/JUN/2023 PRELIMINARIES

i). Apologies

No apology was registered

ii). Communication from the Chair.

The Vice Chairperson welcomed Members to the meeting and thanked them for coming out in large numbers for the meeting. She recognized that this was arguably the first meeting the Committee is holding with 99% attendance.

MIN NO.8/CAK/HH&SC/JUN/2023 ADOPTION OF THE AGENDA

The agenda was adopted as below;

1. Prayer.
2. Preliminaries
    a) Communication from the Chair.
    b) Apologies if any.
3. Adoption of the agenda.
4. **Deliberation on the draft Committee workplan FY 2023/24**
5. **Deliberation on the first phase program for surveillance exercise on the state of health facilities within the County**
6. Adjournment and date of next meeting.

The agenda was adopted without amendments upon being proposed by Hon Lumumba Owade and seconded by Hon Jennifer Obonyo.

MIN NO.9/CAK/HH&SC/JUN/2023 CONFIRMATION OF PREVIOUS MINUTES

Minutes of the previous meeting were read by the Clerk and thereafter confirmed to be the true deliberations of the previous meeting upon being proposed by Hon Seth Kanga and Seconded by Hon Mickey Ochieng'.

MIN NO.10/CAK/HH&SC/JUN/2023 MATTERS ARISING

There were no matters arising.

MIN NO.11/CAK/HH&SC/JUN/2023 DELIBERATION ON THE DRAFT COMMITTEE WORKPLAN FOR THE FY 2023/24

The Vice Chairperson moved the agenda and invited the Clerk to take Members through the draft workplan, which was read as follows;

OBJECTIVE: To enhance the health and well-being of the residents of Kisumu County through effective oversight, policy formulation, and collaboration with relevant stakeholders.

#	Activity	Venue	Performance Indicators	Target	Time Frame FY2022/2023				Responsible Officers.	Cost Implication
					Q1	Q2	Q3	Q4		
1.	Develop a report on the state of healthcare facilities in the county pursuant to Standing Orders No. 193(5)(a).	**To be decided at a later date**	Complete and approved reports	2 comprehensive reports on the state of healthcare facilities in the county					Committee Members & Secretariat	
2.	Consideration of annual reports and financial statements of the referral hospitals.	**To be decided at a later date**	Complete and approved reports	2 comprehensive reports					Committee Members & Secretariat	

3.	Conduct a review of existing health policies pursuant to Standing Orders No. 193(5)(c).	**Assembly precincts**	Approved reports on Policies reviewed	at least 4 policies (1 per quarter)					Committee Members & Secretariat	
4.	Stakeholder engagements	**Assembly precincts**	Approved reports	4 (1 per quarter)					Committee Members & Secretariat	
5.	Conduct field visits to healthcare facilities to assess service delivery pursuant to Standing Orders No. 193(5)(e).	**Health facilities**	Approved reports	health facilities					Committee Members & Secretariat	
6.	Facilitate	**To be decid**	Approved reports	Organize 2					Committee Members &	

	capacity building for the Committee	**ed at a later date**		training sessions/seminars for Committee members on healthcare governance and oversight					Secretariat	
7.	Facilitate the Committee for a study tour to cancer centers in Nairobi City	**Texas, HCG CCK and Nairobi Radiotherapy**	Approved report	1					Committee Members & Secretariat	**Kshs.2 200 000** (Being facilitation to Nairobi for 5 days.)
8.	Review and provide feedback on the annual health budget	**Assembly precincts**	Approved report	1					Committee Members & Secretariat	**NILL**
9.	Consideration of legislative proposa	**To be decided at a later date**	Approved reports	4 (1 per quarter)					Committee Members & Secretariat	

	ls (Bills and/or policies) pursuant to Standing Orders No. 193(5)(g).									
10	Analyze and provide recommendations on emerging health issues	**Assembly precinct**	Approved reports	Analyze and provide recommendations on at least 2 emerging health issues					Committee Members & Secretariat	**NILL**
11	Prepare half-yearly reports highlighting the Committee's achievements and recommendations.	**To be decided at a later date**	Reports submitted to the Liaison Committee	2					Committee Members & Secretariat	
12	Organize public hearings on	**Assembly precinct**	Public hearing conducted	2					Committee Members	**NILL**

	health-related issues.	**or radio station**								
13	Evaluate impact of health programs on the community pursuant to Standing Orders No. 193(5)(b).	**Assembly precinct**		At least 3 programs					Committee Members & Secretariat	**NILL**
TOTAL BUDGET ESTIMATE										

The Clerk informed the meeting that the estimates will be calculated on;

1. **The highest rate of Kshs. 15000 for DSA.**
2. **Costed on a total of 20 persons (15 Hon Members and 5 Secretariat).**
3. **The highest rate of transport at Kshs. 20 000 per person**
4. **The highest rate of conference for Nairobi at Kshs. 4000 per person.**

After deliberations, the meeting tasked the Clerk to include costs for the report wiring that were left blank using the rate of Nairobi.

The workplan was thereafter adopted upon being proposed by Hon. Seth Okumu and seconded by Hon Joachim Oketch.

MIN NO. 12/CAK.HH&SC/JUNE/2023 DELIBERATION ON THE FIRST PHASE PROGRAM FOR SURVEILLANCE EXERCISE ON THE STATE OF HEALTH FACILITIES WITHIN THE COUNTY

The Vice Chairperson once again moved the agenda and informed Members that the Committee is planning to carry out some site visits to establish the status of health facilities within the county during the oncoming recess period, and also in line with the workplan that has just been adopted. She informed them that the Clerk had drafted a program for the same, which were in their files.

Members affirmed that this was indeed a noble idea and unanimously adopted the program as bellow;

	CATEGORY	**SITE**	**DATE**
PHASE 1	Referral Hospitals	Jaramogi Oginga Odinga Teaching and Referral Hospital	Monday 3rd July, 2023
		Kisumu County Referral Hospital	
PHASE 2	County and Sub County Hospitals	Chulaimbo County Hosp.	Friday 7th July, 2023
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		Miranga Sub County Hospital	
		Muhoroni County Hospital	Monday 25th July 2023

		Sub County Hospital	
		Ahero County Hospital	Thursday 27th July, 2023
		Nyang'ande Sub County Hospital	

MIN NO.13/CAK/HH&SC/JUNE/2023 ADJOURNMENT AND DATE OF NEXT MEETING

There being no any other business for consideration, the meeting adjourned at 12:10 a.m.

Minutes approved by;

_____ _____

Hon Vincent Jagongo,
Committee Chairperson.

Angelyne A. Obonyo,
Committee

ANNEX 4: STAFF LISTS

OJOLA SUB COUNTY HOSPITAL

	Name	**Cadre**	**PF No.**
1.	Enock Moseti Ouko - Facility in Charge	Clinical Officer	2007030284
2.	Nelson Mandela Opole		20140100280
3.	George Onyango Ngoje - Nursing Officer In Charge	Nursing Officer	2007055135
4.	Anne Auma Seda		20170141009
1.	Maureen Achieng Odhiambo		20200198724
2.	Sarah Adhiambo Ouma		20190637254
3.	Mercy Pamela Ooro		20200131942
4.	Caren Akello Ondiek		20200467301
5.	Caren Atieno Rabuogi		1998006529
6.	Joseph Nyandika	Health Administrator	1990051790
7.	Audrey Aluoch Otwal	HRIO	20220202543
8.	George Oloo Achola	Lab Tech	2009090654
9.	Daniel Moi Okello	Pharm Tech	20150099899
10.	Starmily Akinyi Otieno	Public Health Officer	20150067548
11.	Syprose Achieng Aoya	Support staff	19980016386
12.	Collins Ochieng Obiya	Casual	ID No. 28977196
13.	Aloice Oginga		ID No. 6166723
14.	Silvia Omollo		ID No. 7561174

15.	Elizabeth Akinyi Jakoyo		ID No. 33901921
16.	Peres Auma Waga		ID No. 30711614

MIRANGA SUB COUNTY HOSPITAL STAFF LIST

	Name	**Cadre**	**PF No.**	**ID No.**
5.	Samwel Otieno Ongwech	Clinical Officer	20150099577	23536428
6.	Edwin Otieno Oduor	Clinical Officer	2013024930	25090166
7.	Victoria Abutiaka	Nursing Officer	20099071985	20754017
8.	Michael Oyaa	Nursing Officer	20150066578	13384321
9.	Job Okello	Nursing Officer	1990107143	7578545
10.	Eunice Mbola	Nursing Officer	2013111592	25003449
11.	Winnie Akinyi	Nursing Officer	20200467432	31382391
12.	Enock Omari	Nursing Officer	20150066621	24059284
13.	Robert Atito	Laboratory Officer	20220202226	28681757
14.	Dorothy Bole	Health Records Officer	2019063624	28782154

NYANG'ANDE SUB COUNTY HOSPITAL STAFF LIST

Name	**Cadre**	**P/No PF Number**
1. Richard Ouma Adede	Nursing	2010045353
2. Nicholas Okiri Odondo	Nursing	20170140397
3. Betty Omare	Nursing	20150099022
4. Emily Kemunto Nyakambi	Nursing	20170141394

5. Judith Akinyi Odongo	Nursing	
6. Rahab Mania Otieno	Nursing	20190638721
7. Beryl Akoth Mugunde	Nursing	20200476732
8. Jeff	Nursing	2441
9. Berline Amonde	Clinical	20150067379
10. Trizer Adero Opiyo	Clinical	2247
11. Nicodemus Mbugi	Clinical	
12. Sharon Akinyi Nyaoro	Clinical	20200197948
13. Steve Mbori	Clinical	
14. Dennis Odhiambo Ochieng	Hrio	20200198025
15. Sharon Achieng Ombuya	Hrio	1019
16. Vidah Shelmegeshi Olawo	Data	1016
17. Hillary Awili	Lab Tech	20150099479
18. Melissa Otindo	Lab Tech	1698
19. Julia Anyango	Pharm Tech	20150099755
20. Sospeter Ouko Odhiambo	Pharmtech	2442
21. Charles Okoth	Nutrition	20200197972
22. Jenipher Rapoko	Cha	20200197914
23. Susan Ogada	Cha	
24. Judith Atieno Odera	Hts	
25. Seline Yamo	Hts	1199
26. Esther Achieng Ombul	Hts	1642
27. Monica Awuor Mbuya	Ssd	2154

28. William Nyamulo	Ssd	2111
29. George Digo	Peer Educator	904
30. Stellah Akinyi Ongele	Peer Educator	1818
31. Washington Odeny	Peer Educator	1823
32. Pamela Akinyi	Cleaner	
33. Damaris Olago	Cleaner	
34. Caren Sirawa	Cleaner	
35. Susan Ondu	Cleaner	
36. Dorothy	Mentor Mother	
37. Millicent Owaa	Mentor Mother	2064
38. Joshua Otieno	Security	
39. Leonard Opiyo	Security	
40. Raphael Teka Omia	Driver	2026424

QUOTATION FOR FENCING OJOLA SUB COUNTY HOSPITAL

MATERIALS REQUIRED

1. Concrete posts total 250 @3000 each; 750,000
2. Cement 100 bags 720 each; 72000
3. Chain link 28 rolls 26500 each;182,000
4. Barbed wire 10 rolls @4,500 each; 45,000
5. Ballast 28 tons 2,000 per ton: 36,000
6. Sand 28 tons @ 20,000
7. Digging of holes 50 per hole time 200; 10,000
8. Binding wire 25kgs @3,500
9. Transport and offloading of concrete posts 20,000
10. Clearance Trench;20,000 PLUS CHAIN
11. Transport of cement-25,000

12. New gate 80,000, transport 5,000, gate pillars; D12 6 pieces @1400 each 8,400, D8 3 pieces @900 each 2,700.
150 blocks @80 each 12,000

Total labour charges :401,130
Total cost of materials kh.1,337,100.

NYANG'OMA SUB-COUNTY HOSPITAL STAFF LIST

SRL No.	Name	P/NO	Designation
1	Dickens Owiti	**20150100253**	mlt 2
2	Everlyne Anyango Nyangani	20220202551	HRIO
3	JOSEPHINE ADHIAMBO ODHIANG	1993040439	CRN
4	SHEILA ADHIAMBO ODHIAMBO	20160001310	KRCHN3
5	KENNEDY ONYANGO ODHIAMBO	19950570383	CRN
6	DAN OWINO ONGOLA	1989082411	CHIEF MEDICAL LAB TECHNOLOGIST
7	SALLY JEPKOECH KIMOSOP	2010149644	KRCHN 1
8	IRINE APONDI OKELLO	20200198350	NUTRITIONIST
9	GORDON MUMA	20200198431	PHARM TECH 3
11	GEOFFREY ANDITI	20220302953	KECN 3
12	EVANS MOMANYI	2012050372	KRCHN 2
13	TOPISITA OCHANDA	2013110073	KRCHN 2
15	DENIS OUMA AKELO	20200276310	RCO 3

16	CEDRIC OMONDI OGOLA	2015009965	RCO 2
17	MAUREEN AKINYI ODIERO	20150099808	RCO 3
18	SHARON ACHIENG OUMA	29192272	RCO 3
20	STEVEN OLUOCH ANYUL	201302441	CLERICAL OFFICER
21	Beryl Adhiambo Ouya	FPDPHS1689	HTS Counselor
22	Sabina Nyaera Morang'a	FPDPHS1428	Registered Clinical Officer
23	Grace Dama Okea	FPDPHS2113	Community Health Assistant
24	Samwel Onyango Odoyo	FPDPHS2119	Community Health Assistant
25	Peter Ondoro Ondoro	FPDPHS1531	Data clerk
26	Easter Achieng Odhiambo	FPDPHS1332	Health Records Technicians
27	Teresa Auma Onyango	FPDPHS1397	HTS Counselor
28	Judith Adhiambo Nyawanda	FPDPHS1471	HTS Counselor
29	Rachel Mudola Mudola	FPDPHS1677	HTS Counselor
30	Michael Odhiambo Ochieng	FPDPHS1314	Lab Tech /Viral Load RTCQI Champion
31	Mary Achieng Olwochi	FPDPHS996	Lab. Tech. / RTK Logistician
32	Morgan Otieno	FPDPHS2402	Laboratory Technologist
33	Jemymer Awuor Omolo	FPDPHS1848	Mentor Mother
34	Maureen Malesi Kisato	FPDPHS119	Nursing Officer

35	Richard Ochieng Abalah	FPDPHS1821	Peer Educator
36	Dolrose Atieno Odera	FPDPHS1838	Peer Educator
37	Gilo Ivy Akinyi	FPDPHS2081	Peer Educator
38	Penelope Nyakerario Achoki	FPDPHS1448	Pharmaceutical Technologist
39	Millicent Nanjala Walucho	FPDPHS2203	Registered Clinical Officer
40	Job Onunga Otieno	20190638771	Medical Lab Tech

ANNEX 5: PICTORIALS

The Committee at Ojola Sub County Hospital

Committee posing for a photo at Miranga Sub County Hospital

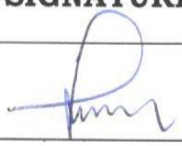
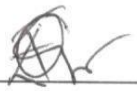
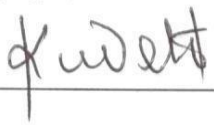
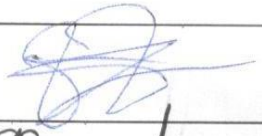
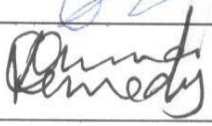
The Committee at Gita Sub County Hospital.

The In-charge of Sondu Sub County Hospital, Dr. Lucas Odero, taking the Committee through the status of the facility.

The Committee at Nyang'ande Sub County Hospital.

ANNEX 6: ADOPTION SCHEDULE

We, the members of Medical Services, Public Health and Sanitation Committee do here below declare that this report correctly captures the proceedings and recommendations of our deliberations as regards this subject matter and in witness thereof, we hereby append our signatures to adopt this report.

SRL NO.	NAME	POSITION	SIGNATURE
1.	**Hon Vincent Jagongo**	**Chairperson**	
2.	**Hon Emily Oginga**	**Vice Chairperson**	
3.	Hon Seth Okumu	Member	
4.	Hon Nereah Okombo	Member	
5.	Hon Joachim Oketch	Member	
6.	Hon Kennedy Ooko	Member	
7.	Hon Lumumba Owade	Member	