

MACHAKOS COUNTY ASSEMBLY

OFFICIAL REPORT

Wednesday 3rd August 2016

The House met at 10.12 a.m.

[The Speaker (Hon. Mung'ata) in the Chair]

Hon. Speaker: Good morning Hon. Members. Let us proceed clerk.

PAPERS LAID

BENCHMARKING VISIT TO KISUMU COUNTY ASSEMBLY

Hon. Speaker: Hon. Leonard Katela.

Hon. Katela: Thank you, Mr. Speaker, Sir. Mr. Speaker, Sir, I beg to lay the following paper on the floor of the House today Wednesday 3rd August, 2016, that of Labour, Public Service and ICT committee report on benchmarking to Kisumu County Assembly.

Hon. Speaker: Thank you. Paper is laid, proceed.

BENCHMARKING VISIT TO THIKA LEVEL V HOSPITAL

Hon. (Ms.) Sereka: Thank you, Mr. Speaker. Mr. Speaker, Sir, I beg to lay the following paper on the floor of the House today Wednesday 3rd August, 2016. The Health and Emergency Services Committee report on benchmarking with the Thika Hospital in Kiambu County. Thank you, Mr. Speaker.

Hon. Speaker: Thank you. Again paper is laid. Proceed.

NOTICES OF MOTIONS

BENCHMARKING TO KISUMU COUNTY ASSEMBLY

Hon. Katela: I want to give a notice of motion that aware that Labour, Public Service and ICT committee is mandated under Standing Order, Mr. Speaker, Sir, I wish to give a notice of the motion that this Hon. House discusses and approves the Labour, Public Service and ICT committee report on the benchmarking study visit with the Kisumu County Assembly as laid today Wednesday 3rd August, 2016.

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Hon. Speaker: Thank you, notice issues proceed.

BENCHMARKING VISIT TO THIKA LEVEL V HOSPITAL

Hon. (Ms.) Sereka: Mr. Speaker, Sir, I wish to give notice of the following motion that this House discusses and approves the Health and Emergency Service committee on benchmarking visit to Thika Hospital in Kiambu County as laid on the floor of the House today Wednesday 3rd August, 2016. Thank you Mr. Speaker.

Hon. Speaker: Thank you, notice issues proceed.

MOTIONS

BENCHMARKING TO KISUMU COUNTY ASSEMBLY

Hon. Katela: Thank you Mr. Speaker, Sir, again aware that the Labour Public Service and ICT committee is mandated under Standing Order 190 to deal with all matters relating to Labour, trade union relations, manpower or human resource planning information, communication and technology. Further aware that the ballooning wage bill has been a great hindering factor in the growth of our economy as a county noting that the committee benchmarked with Kisumu County Assembly to address key issues such as the statutory deductions, wage bill performance contracting and staff audits, Mr. Speaker, Sir, I wish to move the motion that this Hon. House discusses and approves the Labour, Public Service and ICT committee report on the benchmarking study visit with the Kisumu County Assembly. I call upon Hon. Renson Muthiani to second my motion.

Hon. Muthiani: Thank you, Mr. Speaker and the House at large. I hereby stand to second the motion that this Hon. House discusses and approves the Labour, Public Service and ICT committee report on benchmarking visit to Kisumu County Assembly. Thank you Mr. Speaker, Sir.

Hon. Speaker: Thank you, the motion is properly laid. We will hear the report.

Hon. Katela: Mr. Speaker, Sir, the Labour, Public Service and ICT committee has had many agendas to dispense, most of which have been crucial, for instance the ballooning wage bill that has posed a negative effect to the growth of the economy as a County. It is from this background that the committee decided to benchmark with Kisumu County on 11th to 12th March, 2016 in order to analyze the challenges and accomplishments of Kisumu County's Labour committee.

Mr. Speaker, Sir, the committee on Labour, Public Service and ICT was established pursuant to Standing Order 190 and the Second Schedule of the Standing Orders defines its

mandate as follows; all matters relating to Labour, trade union relations, manpower or human resource planning, information, communication and technology is under that committee

Mr. Speaker, Sir, the committee has thirteen Members as stipulated in that list. Kisumu County is one of the new-devolved counties of Kenya. Its borders follow those of the original Kisumu District, one of the former administrative districts of the former Nyanza Province in western Kenya. Its headquarters is Kisumu City. It has a population of 968,909 according to the 2009 National Census. The land area of Kisumu County totals 2085.9 km².

Kisumu County's neighbors are Siaya County to the West, Vihiga County to the North, Nandi County to the North East and Kericho County to the East. Its neighbor to the South is Nyamira County and Homa Bay County is to the South West. The county has a shoreline on Lake Victoria, occupying northern, western and a part of the southern shores of the Winam Gulf.

Mr. Speaker Sir, the committee benchmarked on the following key issues:-

- *Statutory deductions.
- *Wage bill.
- *Performance contracts.
- *Staff audit
- *Petitions.
- *Staff grievances.

On the statutory deductions, the committee observed that Kisumu County Assembly did not have a constituted service board hence their staffs were usually deployed from the Executive. It was noted that the statutory deductions applicable to the Members of the County Assembly such as Pension which is LapFund are deducted and remitted to the respective body and after the payroll is concluded, they follow up on the same. They informed the members that they get quarterly reports from the pension, Lap Fund. Further, it was observed that gratuity payable was also sent to the same provident fund.

On the performance contracts, it was observed that Kisumu County Assembly did not have performance contracts since their strategic plan which is a vital document that guides the performance contracts was not ready.

The committee observed that in Kisumu County there were no problems related to employees, appointment letters and pay slips. The County Government had managed to conduct a staff audit following a directive from the National Government but still there was a great challenge with their wage bill. The committee had put measures in place to audit the payroll system following many complaints from employees who had not been paid their dues.

On the petitions, the members observed that the residents of Kisumu County did not present their petitions to the Assembly majorly because they were not aware of how to go about it. The committees agreed that an awareness campaign on the functions and powers of the County Assembly would be beneficial to the public.

Mr. Speaker Sir, after much discussion the committee made the following recommendations:-

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- That the management of the statutory deductions including gratuity should be handled with utmost attention with key focus on the remittance of the deductions to the respective statutory bodies.
- That quarterly reports from the pension providers LapFund and LapTrust should be provided to the County Assembly and the same to be communicated to the honorable members and staff.
- That the County Public Service Board should fast track issuance of appointment letters and pay slips to its employees.
- That an audit of all personnel working for the County Government should be conducted in an effort to get rid of the ghost workers and also ensure that employees are paid their dues promptly.

Mr. Speaker, Sir, the trip was educative and the committee urges the Assembly to approve the report tabled. Further, we urge the County Government to ensure that a comprehensive staff and payroll audit is conducted in order to tame the wage bill. Thank you Mr. Speaker, Sir.

Hon. Speaker: Thank you very much. Let us hear propositions in support of the report. Any contributions on the report? Can I take it that the report is approved by the entire membership of this assembly?

(Applause)

Hon. Speaker: Let us hear Hon. Chairman, finance committee.

Hon. Nzeki: Thank you, Hon. Speaker. I find the committee went to Kisumu and I find that Kisumu County is not a County to be done any comparison because you find there is no Service Board in the County Assembly of that County. Yes. It is said here ‘on the statutory deductions, the committee observed that Kisumu County Assembly had no constituted service board hence their staff were usually deployed from the executive.’

What I am saying is that the committee should not have gone to a county whereby we are ahead of it. The county is far behind the County Assembly of Machakos because obviously, we cannot benchmark with a county which is below our county. So, it means that county should not be compared with this county of Machakos. Again, on the next page---

Hon. Speaker: Let us hear the point of order.

Hon. Ndeto: Mr. Speaker, what was used to rate the.....(*inaudible*)

(Applause)

Hon. Speaker: I think I will sustain that point of order because the entire House was in agreement.

(Applause)

(Question put and agreed to)

Hon. Speaker: Let us proceed. Chairperson for health committee, Hon. Cecilia.

BENCHMARKING VISIT TO THIKA LEVEL V HOSPITAL

Hon. (Ms.) Sereka: Thank you, Mr. Speaker, Sir, that aware that Health and Emergency Services committee, among other roles, its mandate is to deal with all matters related to County Health service including particular county health facilities and pharmacies, ambulance services, promotion of primary health care and funeral parlours.

Further aware that committee benchmarking visit was to identify and implementing best or better practices. Mr. Speaker, Sir, aware that committee visited Thika Level V hospital on 15th and 16th April, 2016 with the view of benchmarking on service delivery, acknowledging that the development of a County is dependent on the people and that their health is a key factor in development.

Mr. Speaker, Sir, I wish to move the motion that this Hon. House discusses and approves the Health and Emergency Service Committee report on the benchmarking with Thika Level V hospital in Kiambu County. Thank you, Mr. Speaker, Sir. I call Hon. Ndinda second this motion.

Hon. (Ms.) Ndinda: Thank you, Mr. Speaker, Sir. I second that we table the report on the benchmarking of Level V Hospital in Thika. Thank you.

Hon. Speaker: Thank you. The motion is properly laid and seconded. Proceed, take us through the report.

Hon. (Ms.) Sereka: Mr. Speaker, Sir, the committee on Health and Emergency Services visited Thika level V Hospital in Kiambu County for a benchmarking on 15th April, 2016. The committee members had an opportunity to meet the Hospital administrator and managed to discuss widely on the best hospital management practices in comparison to our county hospitals.

Mr. Speaker, Sir, the Health and Emergency Services Committee is established as per Standing Order 190, that underlines the functions of the committee to include all matters related to the county health services, 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, crematories and refuse dumpsites and solid waste disposal, firefighting services and disaster management.

Mr. Speaker, the committee on Health and Emergency Services is comprised of the following members as constituted by this Hon. House.

Hon. (Ms.) Cecilia Sereka	- Chairperson
Hon. (Ms.) Mary Ndinda	- Vice chairperson
Hon. Catherine Nguluku	- member
Hon. (Ms.) Brigid Kitili	- member
Hon. Kyalo Kyuli	-member
Hon. Winston Kanui	-member
Hon. (Ms.) Amina Mutio	- member
Hon. Sammy Nduva	-member
Hon. Edrick Ngunzi	- member
Hon. Stephen Muthuka	-member
Hon. (Ms.) Penina Kaluki	-member
Hon. Thomas Kasoa	-member
Hon. (Ms.) Magdalene Ndawa	-member

Mr. Speaker, Sir, Thika Level V Hospital was relevant in regard to the issues which the committee wanted to study and assess on. These issues include the following:-

- a) Availability and accessibility of drugs to patients
- b) Hospital infrastructure
- c) Staffing
- d) Hospital equipment
- e) FIF regulations
- f) Ambulances
- g) Conditional grants

Mr. Speaker, Sir, the Hospital had a frequent supply of drugs which were accessible to the patients. There were no cases of suspicion on the staff selling hospital drugs to patients since the hospital had developed a mechanism of monitoring any irregularities. In cases of shortage and delay in delivery of drugs to the hospital, patients are advised to purchase from dispensing chemists within Thika town.

Mr. Speaker, Sir, the committee was informed that the medical personnel in the hospital was inadequate and support personnel were employed on contract to bridge the gap. Mr. Speaker, Sir, the hospital has an adequate equipment after it acquired advanced medical equipment from the national government. The main challenge at the hospital was that it lacked trained personnel to handle the equipment received from the national government. Due to this the

hospital had to pay high cost of training the personnel to handle the equipment, an exercise that is still going on.

Mr. Speaker Sir, Thika Level V Hospital collects enough money to cater for its recurrent expenditure. The hospital collects a total of Ksh .20 Million per month, 60 Million per quarter translating to Ksh. 240 Million per year. The hospital has its own account to operate the Facility Improvement Fund (FIF). All the funds deposited are then ploughed back to run the hospital. The Hospital has a Committee which sits and plans on the expenditure against the income.

The Income and Expenditure report is then forwarded to CEC Finance for approval. The hospital budgets and reports are done quarterly. The committee observed that the County Government of Kiambu adheres to FIF regulations strictly.

Mr. Speaker, Sir, the County Government does not allocate funds for recurrent expenditure for the hospital since it collects enough money for most of its programmes through Facility Improvement Funds (FIF) programme. However, the hospital gets conditional grants from donors to support specific programmes. The hospital has a committee which budgets the expenditure in regard to the grants and thereafter forwards to the CEC Finance for approval.

The committee observed that the wards were tidy and clean and plans to improve and extend other wards were underway to enable the hospital to accommodate more patients even from neighboring Counties. The committee noted that the Governor, Kiambu County, was a frequent visitor to Thika hospital.

Mr. Speaker, Sir, the committee observed that unlike our sufficient ambulance services, Kiambu County Government had provided three ambulances for the hospital which were not enough to serve the high population including Thika super highway which by itself is overwhelming. However, proper guidelines on maintenance and fueling of the ambulances were in place to ensure effective and efficient service delivery.

The committee recommends that the hospitals in Machakos County should be allowed to spend their FIF funds at the facility level to avoid diverging of the funds to other projects. The committee recommends that there should be openness in the management of donor funds meant to improve health services, in Machakos County.

The committee recommends that the County Government should ensure that the ambulances are fitted with modern equipment for better services especially in cases whereby patients have to be referred. The government should also purchase ambulances which can access areas with poor roads. Further, proper guidelines should be set in place in regard to the maintenance and fueling of the ambulances.

The committee also recommends that the Governor, Machakos County pays frequent visits to the hospitals. The County Government of Machakos should ensure that the hospitals are well equipped with drugs. Further, the committee recommends that the equipments in all the hospitals within Machakos County be upgraded and the construction of the stalled projects in our dispensaries and health centers be fast tracked.

Mr. Speaker, Sir, the Health and Emergency Services committee is grateful to the office of the Speaker and that of the Clerk of the County Assembly for the support accorded during the

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benchmarking exercise. Mr. Speaker, Sir, it is my privilege on behalf of the Health and Emergency Services Committee to table this report on benchmarking with Thika Level V Hospital, to this Honorable House for approval.

(Applause)

Hon. Speaker: Thank you. The report is with us I will request for contributions. Yes Hon. Nzoka.

Hon. Nzoka: Thank you, Mr. Speaker, and the House at large. I appreciate the committee, what they have said and although they have not touched on the infrastructure in Machakos and in Machakos County hospitals, I think we have better infrastructure here than Thika but the management of Thika is exceptional. Very good and you heard here the ambulances are taken care, they are not many, they are three but they cannot lack fuel. That is something we have to note.

Again about the drugs, even if there is no good infrastructure, what we need in hospitals is drugs hence we should put a lot of measures that our hospitals have some drugs. Again, about the staff we need to care for our staff. We do not hear some cases in Thika about the doctors. We have that problem here. It is the duty of this assembly to know what is happening so to have our people continue with drugs and good management of the hospital. I appreciate the committee thank Hon. Cecilia.

(Applause)

Hon. Kitheka: Thank you, Mr. Speaker, and the House at large. I wish to applaud the committee, chairperson and the members of the committee for a job well done. Mr. Speaker, notwithstanding all that, I wish to point out some issues which are featured very well in their report on the issue of management of the hospital in Thika. Mr. Speaker, I think this report has come at the right time when Machakos is having a lot of problems within the Level V hospital and on the other small dispensaries which are within the County.

Mr. Speaker, as we stand here to deliberate on this report, there is a lot of problems emanating from the mismanagement of the Level V hospital in Machakos. I wish to point out that there is a looming strike which is evident in that facility simply because of mismanagement. Mr. Speaker, I request your protection because I am trying to pass a very serious issue which is within my ward, Mr. Speaker.

Hon. Speaker: Let us hear the point of order. What is the point of order?

Hon. Katela: Thank you Mr. Speaker, Sir. I want to know from the immediate contributor whether we are discussing the report or we are discussing other things he is bringing

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in. He is bringing other things to the report which have not being read. I think we should stick to the report to save time and digest the report. Thank you, Mr. Speaker.

Hon. Kitheka: Mr. Speaker---

Hon. Speaker: Order Hon. Kitheka. I think the advice that the Chair would give you is that if there is a looming strike then you bring the appropriate motion to this House.

(Applause)

Hon. Kitheka: Mr. Speaker, I was just pointing out. I was not deliberating on the issue of a strike.

Hon. Speaker: Proceed.

Hon. Kitheka: Thank you, Mr. Speaker. I think that the issues which have been addressed by the committee in terms of the procurement of the drugs, the management of the staff are key issues which should be addressed within our hospitals and also the issue of infrastructure in the small dispensaries which have been built within the wards. Mr. Speaker, I think within Machakos, with the best management of the facility, we can have the best facility in Kenya simply because we have the right infrastructure we have adequate staff but there is some kind of mismanagement which has to be addressed.

Mr. Speaker, I think the best thing we can do because we have come with a very good report, it has landed in the House received in the best way it can, the best thing we can do is to make sure that this report is adequately implemented within our facilities so that at least we cannot just be going out to benchmark and come to make a good profile of us just going out to benchmark then we make a good profile of what we have done.

I think the best thing we can do now is to fast track the implementation of the report in the best way we can. Thank you, Mr. Speaker.

Hon. Speaker: Thank you, let us hear Hon. Manyolo.

Hon. Manyolo: Thank you, Mr. Speaker, Sir. First, I do congratulate the committee and their efforts of visiting Thika Level V and coming up with a nice report within their recommendations Mr. Speaker, Sir. The whole report is so good and we need to implement whatever the findings the committee has found. Secondly, Mr. Speaker, Sir, we may enhance that we may have goodwill between the executive and the hospitals for us to enhance efficiency and goodwill of the hospitals. Mr. Speaker, Sir, the committee has done well and I applaud and support the document. Thank you, Mr. Speaker, Sir.

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Hon. Speaker: Thank you let me hear Hon. Member for Mavoko.

Hon. M. Mutuku: Thank you, Mr. Speaker, Sir, and the entire House. First and foremost, let me also applaud the chairperson of the committee and also the members for the report which really represents a good picture. Mr. Speaker, Sir, I would like to comment about three recommendations which are very important on the basis of benchmarking. As you are aware the essence of bench marking is to compare what we do as Machakos County in line with the health facility and what Thika does in terms of health.

I would like to forward the recommendation number one about the FIF funds. Mr. Speaker, Sir, I think that is a very critical recommendation because we are realizing if the funds could be ploughed back to the facility, it can really help the prosperity of any particular hospital whether it is a health center or it is a Machakos Level V. Mr. Speaker, Sir, the ploughing back of FIF funds is a support for the sound delivery of the services of any health facility and especially when the committee is given the AIE, the authority to incur expenditure.

The other comment I would like, Mr. Speaker, to make is about the conditional donor funding. In their report they are saying there is a need for transparency and accountability. In other words there is a need, if the money is meant for the hospital, it should not be misdirected to other uses because money directed for other uses there is always chances of misappropriation because it is always not budgeted.

I would also like to comment about the last comment about the stalled projects. As we are aware, there are so many stalled projects especially from the other regime the former municipalities and the former CDF projects. Mr. Speaker, Sir, it is the high time this Hon. House actually recommends completion of such projects and nurses, doctors or clinical officers be posted there because as of now they look like white elephants.

For example in Athi River, we have Mavoko Level IV which is incomplete three years down the line and it was initiated using the CDF funds. We also have so many dispensaries and health centers within Machakos County. In view of that, I wish to applaud the committee for the work well done. Thank you Mr. Speaker, Sir.

Hon. Speaker: Thank you. Let us hear Hon. Kamitu and then Hon. Nduva.

Hon. Kamitu: Thank you very much, Mr. Speaker, Sir. First I stand to applaud a well done job by the committee. They did a practical and realistic benchmarking in Thika Hospital. Thika happens to border Matungulu and in some areas we sometimes take our patients to Thika where the facilities are really available and my emphasis on this report, Mr. Speaker, Sir, is in regard to the recommendations.

They did an observation, when you come to the observations, these are the recommendations that Machakos executive should undertake because in most regard Mr.

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Speaker, Sir, you are aware, when we talk about services that are supposed to be given to our level four hospital in the sub-counties like Kangundo and Matuu, the services required to the tax payers are the practical type of services that are lifesaving.

So what am I saying, Mr. Speaker? Sincerely, the recommendations that our committee saw are the shortfalls that are being observed or are being experienced by the patients in our hospitals. So, when you come to those services in regard to the auditing of the drugs when you go to the hospitals either in Kangundo or Matuu, you find that in most of these hospitals there is a big shortage of drugs.

My humble request, Mr. Speaker, Sir, is also the continuity of our health committees. They should also be moving out, check the drug registers because here you can see that they had also recommended for the Governor should be paying frequent visits. It is also the recommendation of this House, through your guidance, Mr. Speaker, Sir, that the committees should be availed time also to be making some frequent visits to these hospitals so that in regard to auditing they should also be checking that services required are given to the taxpayers. Otherwise, it is a job done well by the committee and I wish to say thank you to the committee. You did a good job. Thank you, Mr. Speaker, Sir.

(Applause)

Hon. Speaker: Thank you. Yes we are waiting for Hon. Nduva.

Hon. Nduva: Thank you, Mr. Speaker. I stand to applaud the committee, chairperson and the members including myself. Mr. Speaker, health facilities are key in our government and what we have learned from the Thika facility translates to us, as a government to put more efforts because if you look at our institution especially the level 5, the infrastructure you cannot compare with Thika. But Thika having few or inadequate employees, their services are commendable. Mr. Speaker, Kiambu County borders my ward and many of my electorate are treated in that facility.

So, Mr. Speaker, this is a benchmarking trip that is recommended and we need to do more and more because if our health facilities are not taken care, even if we put so many projects, I think we will be losing direction because if now our people perish by diseases, then the projects will be of no use. If you visit all our health institutions, Mr. Speaker, you find that so many people are in pain because of illness and as we have recommended in this report, Mr. Speaker, we should put more effort and allow the health facilities to have sufficient drugs and funds to run these institutions, Mr. Speaker.

Finally, I want to urge the chairperson in the committee to concentrate much in making visits to several institutions in this country so that we can see where we are not doing fine so as to serve our people better. Mr. Speaker, I stand and support this report.

(Applause)

Hon. Speaker: Thank you. Let us hear Hon. Muthuka there.

Hon. Muthuka: Thank you Mr. Speaker, Sir, and the rest of the House. Mr. Speaker, I am happy to have this report land in this House and Mr. Speaker, having many reports that we have been going for benchmarking our worry is one because our reports are never implemented. You remember last year, Mr. Speaker, we went to Coast General hospital and we gave recommendations on how we can improve our health sector. Mr. Speaker, we do not know where that report has been stashed. Again, Mr. Speaker, we went to Level 5 Machakos and other level 4 hospitals in Machakos County.

We gave a report that was approved and adopted by this House but still, Mr. Speaker, we are crying because that report has never being implemented up to date. Mr. Speaker, it is disheartening, whereby employees work under suspicion. If you look at our findings Mr. Speaker, in Thika, frequent supply of drugs which were accessible to the patients, there were no cases of suspicion on the staff selling hospital drugs to patients since the hospital had developed a mechanism of monitoring any irregularities.

Mr. Speaker, that is a major challenge in Machakos County because Mr. Speaker, the people who are supposed to put the monitoring system, I think they are leading in stealing from us and I think that is one of the major issues that contribute to the selling of the drugs and also diverting health services funds to personal use. Mr. Speaker, we know, it is in public domain that already the CEC finance Machakos County has written to the Chief Officer, health department demanding explanation of more than Ksh. 60 million which cannot be traced and this is money that should help improve infrastructure in Machakos County Level 5. This is the money that also can be used to improve the services in that hospital.

Mr. Speaker, as we deliberate on this report, we would request for your intervention because by the end of the day this is not a research institute whereby we go and do some research and then we keep the report for other students to come and read. This is a serious business that we need to change the lives of our people. So if you intervene, we need to know what is happening in our health sector and if possible, Mr. Speaker, we can have a full House committee to discuss health services in Machakos and deal with these emanating issues. Thank you.

Hon. Speaker: Thank you. Next let us hear Hon. Kalunde.

Hon. Kalunde: Mr. Speaker, Sir, I stand to applaud the committee of health for their visit to Thika level four hospital. Mr. Speaker, the reasons of the benchmarking is that we go to benchmark to see what the other hospital is doing. Whether is better than ours or whether it is behind our hospital. Mr. Speaker, we have had several problems with our hospitals but a level five hospital like Thika seems to be doing better than our hospital.

Mr. Speaker, Thika hospital, according to this report collects over Ksh. 20 million every month and I think that our hospital in Machakos is bigger than Thika hospital and it serves many areas even outside our own county. It even serves Kajiado County. So, for sure we must be collecting more than Ksh. 20 million per month. This amount of money would serve a lot especially improving our infrastructure and also improve in the areas of cleanliness and buying medicine, if it is necessary.

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So, Mr. Speaker, this report should be handed to the CEC, Health in our County and also this Assembly, if it is possible, the committee and other Members can visit the hospital and see what is going on because we cannot sit here and after every four months, we hear that there is a strike in our hospital and remember our broadcasters, our media speak bad things about this County Assembly and also our hospital. So, Mr. Speaker, I stand to support it and also congratulate the committee for that visit. Thank you, Mr. Speaker.

Hon. Speaker: Let us hear the information.

Majority Leader (Hon. Mwonga): Mr. Speaker, the Hon. Member for Mutituni, that is Hon. Kalunde, has said that the media men do broadcast bad gospel of our County Assembly and the Executive but I want to inform him, Mr. Speaker, we are lucky that the only media that is doing that is one of the three vernacular stations which we have and the presenters have moved to other stations if he is not aware. So, I think we are safe on that. Thank you.

Hon. Speaker: Hon. Members, as we proceed with this discussion, it is still within the committee mandate to visit the hospital anytime, discuss the issues emerging and present a report. We do not need to talk about something that the committee has a standing mandate. Let us hear Hon. Mary Ndinda.

Hon. (Ms.) Ndinda: Thank you, Mr. Speaker, Sir. I just want to add on our visit to level V hospital and recommend on something special. When we went to Level V Thika hospital, we were just comparing our level V with Thika and I can also recommend and say, in fact on the issues of infrastructure, the standards, the equipment, Machakos Level V is a little bit ahead and for that one, we have to recommend comparing to Thika Level V.

On the issues of ambulances, we have more ambulances than Thika because we discovered they have three and they are equipped and at least I can say we are also getting there because we have our ambulances which are equipped although we need to add more equipment in the ambulances. There is something which I also want to recommend on drugs.

When we visited, I can say that Thika serves Ndithini Ward, that is the nearest Level V hospital within Ndithini Ward and as we were talking to them they said at least they admit most of the patients coming from Ndithini Ward, most of them with issues of malaria because of Masinga dam and, in fact, according to the recommendation, they were saying although they were using generic medicinal drugs, if Machakos County can use the original drugs you can encounter the issue of clearing malaria in Machakos County because according to statistics, we have discovered that malaria now has come back again because of use of generic drugs.

Not because Machakos is providing that alone but because we are also getting treatment from other hospitals. So, to upgrade our hospitals maybe you can also raise the standard of getting more original drugs so that we can get better. So, what I can say, I recommend that---

Hon. Speaker: Order! Hon. Matheka, I think I like the contribution. Proceed.

(Applause)

Hon. (Ms.) Ndinda: Thank you, Mr. Speaker, Sir. So, whatever I am saying is that, in fact, whatever we are doing here, we are on the right track and when we went there, we were going to compare ourselves with what they were doing so that we can also come up and pull up our socks to be far much ahead. So, I can say we are ahead of that County and at least you agreed with them that we organize they pay a visit and see what we are getting on and Hon. Members and Mr. Speaker, Sir, I can recommend that we take this report and we also implement it so that we can be number one. Thank you, Mr. Speaker, Sir.

(Applause)

Hon. Speaker: Let me hear the point of concern.

Hon. Kitheka: Mr. Speaker, the just immediate speaker has pointed out that malaria in Machakos County is not being depleted simply because we are using fake or generic medicine.

Hon. Member: Point of order

Hon. Kitheka: Is it true? It is what she has said. It is not an issue of debate. It is just a matter of concern. I wish to hear from the Hon. Member because she has said that, as compared to the hospital they were in, they were told that to deplete malaria in Machakos, we have to use the original medicine not the generic, Mr. Speaker.

Hon. Speaker: Another point of concern. Yes.

Hon. Nzoka: Thank you, Mr. Speaker. The immediate speaker, I wonder, he said in Thika they have---

(Loud consultations)

No, I am on. I am just expressing a point here.

Hon. Speaker: What is the point of order?

Majority Leader (Hon. Mwonga): Mr. Speaker, the point of order is, who is the immediate speaker in this scenario, Mr. Speaker?

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(Applause)

Because we had Hon. Kitheka, Member for Machakos Central contributing, who contributed after the Vice-Chairperson of the Health committee?

Hon. Nzoka: I apologize. Thank you, so much. Yes, the Vice Chairperson who contributed said that, yes we have ambulances but when you went there, you find how an ambulance is equipped. We need equipment in our ambulances. Again, I think Members have heard of---

Hon. Speaker: Hon. Nzoka, I find that you are not in order. Have your seat. Let us hear Hon. Mary Ndinda on the matter that was raised by Hon. Kitheka.

Hon. (Ms.) Ndinda: Thank you, Mr. Speaker, Sir. I want to make a point of correction to those who did not hear what I said. I think I have given an example of Ndithini Ward which is near Thika Level V hospital and they have been going for treatment at Thika level V not Machakos and I said that Thika level V is the nearest hospital from Ndithini Ward and Hon. Member, Joseph Muli is here to bare me witness of that and that is where they have been taking medication. Where I am saying they did not tell us that we have got generic drugs but out of that hospital, we discovered they have generic drugs. Thank you, Mr. Speaker, Sir.

(Applause)

Hon. Speaker: Thank you. I think that point is settled. Let us hear Hon. for Muthesya ward.

Hon. Nzioki: Thank you, Mr. Speaker. I first congratulate the committee and the Chairperson, Health for visiting Thika Hospital. Mr. Speaker, it is true that Thika Hospital has good services. I would say not better services than Machakos but I would say good services because I am a frequent visitor in Thika. Mr. Speaker, I also border Thika and most of our patients even the ones transferred by our ambulances are taken to Thika. There are vital recommendations, Mr. Speaker, on what the committee recommended for consideration in our institution that is Machakos Level V hospital.

Mr. Speaker, the only big difference in Machakos and Thika is that, the money collected in Thika Hospital is used directly to improve the services in that hospital. Mr. Speaker that is the only thing that I find differing and if Machakos Level V hospital, if we can use the money that we collect and that money is not diverted to other uses, Mr. Speaker, we would be very much ahead of other institutions. Thank you, Mr. Speaker.

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Hon. Speaker: Thank you, let us hear Hon. Matheka.

Hon. Matheka: Thank you, Mr. Speaker, Sir. Mr. Speaker, Sir, I first applaud the committee for a job well done. Mr. Speaker, Sir, on the committee findings, bullet number four on third paragraph, there emanates some pertinent questions which need to be looked at and probably the committee Chairperson and the rest of the Members can follow on that then maybe we can come up with answers of what is holding our institutions.

First, Mr. Speaker, Sir, there is a question of Thika collects enough money to cater for its recurrent expenditure. The question is our level V or level IV hospitals collecting enough money to cater for their expenditure? And if not, what can be done to alleviate that problem to make sure that we have enough money which can cater for the recurrent expenditure.

Mr. Speaker, Sir, you will note that in the former dispensation, the hospitals were running their recurrent expenditures from what they were collecting within and if that one can be adhered to, Mr. Speaker, Sir, we will never hear of hospitals lacking non-pharmaceuticals and maybe other recurrent expenditures. Mr. Speaker, Sir, there is also the question of FIF facility. If my memory serves me well, Mr. Speaker, Sir, there was a bill or regulations in this House to regulate on FIF facility in our hospitals. What happened to that mMada Chairperson? You can do a follow up on that and I think our hospitals will have the best FIF facility, and then we will have them running up and well.

The other question Mr. Speaker, is, is the money collected having an account managed by the hospital staff or the money is put into the treasury account? Mr. Speaker, Sir, out of that question, we can know exactly what happens to our money. If it is put in a hospital account, sure enough it will be ploughed back and it will do well to our people. If not, why not work towards that direction to have the money put in an hospital account and it is ploughed back. And the final question is Mr. Speaker, Sir, is our facility run by a committee? Yes or No. If it is no, why can we not move on that direction? We have committees which can run the hospitals and then the money is put in good use.

In our case, Mr. Speaker, Sir, I think our hospitals are run by the CEC and the Chief Officer, that is the preserve of our hospitals in Machakos and it is not the best practice. So, I think if we can follow that and if the committee can be keen on that, we can have the best facilities for our people because we are here for our people. On the hospital also, I would like to point it out to the Chair, I came with a statement for Kangundo hospital and nothing came up. It was not responded to. I was taken round in circles. I am still waiting for the answer because the hospital is going down rather than improving. Thank you, Mr. Speaker, Sir.

Hon. Speaker: Thank you, I think we should hear the mover, unless, I think there is a plea from the finance committee Chairman. Let us hear him.

Hon. Nzeki: Thank you, Hon. Speaker. I applaud the committee for what they did and I happen to be one of the Members who went to visit Thika. When we went there, we found the place is very clean, although it is not cleaner than our hospital.

(Applause)

It is said that, cleanliness is next to Godliness. Mr. Speaker, Sir, when we went there we were told that all the equipment which most of the Level Vs all the Counties were refusing was taken to Machakos. They were very happy because they have taken their people to be trained on such equipment. So, Mr. Speaker, Sir, in Machakos I think we can emulate that and take our people to trainings and they said they still continue taking them for trainings.

On the FIF, they said that they collected Ksh. 20 million and the Ksh. 20 million is not kept by the hospital, it is taken to the County Treasury then it is ploughed back to the hospital to manage the hospital and that is why you find in Machakos there is problem in the hospital. Otherwise, in Machakos, the money is controlled by the finance department and the CEC health has no mandate of that account.

You find that the hospital is crowded, we have Nairobi County, we have Machakos County, Murang'a County, Embu County, they are all of them crowding the hospital and that is why we found they head a board of management in that hospital to manage the hospital because it has so many patients and many are either referred to Kenyatta hospital and we found that they have problems with the patients and that is why their money which is collected by the revenue clerks in the hospital is returned back to them.

We found that the grants which are brought to the County through the hospital are budgeted by the CEC finance and the CO of finance and the board of Management. So, in Machakos I find there is something tricky happening there because all the findings, all the grants we get from outside has never gone back to the hospital and that is where we are failing, Mr. Speaker, Sir. So, I congratulate the committee for what they have done and I hope next time the committee will take the whole County Assembly to Thika to see. Thank you, Mr. Speaker, Sir.

Hon. Speaker: Thank you, Chairperson, Finance committee but then as you sit, you said that grants have had problems and you are the Chairman of Finance committee, maybe you can put this House into light on what you have done so far.

(Laughter)

Hon. Nzeki: Thank you, Hon. Speaker. On the grants, we have had problems because when we do this income and expenditure report it is said that the CEC health, has never received such a grant from CEC finance and that is why I think the committee has recommended that the grants either be controlled by the CEC health, Mr. Speaker, Sir.

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Hon. Speaker: As the Chairman, you need to file a report in this House, we deliberate on it and pass resolutions.

Hon. Nzeki: Okay, Sir, I will do that, Mr. Speaker, Sir.

Hon. Speaker: And again on the matter of the FIF, the regulations are in place, why is it not operational?

Hon. Nzeki: Mr. Speaker, Sir, we have been to the hospital and the money which is collected taken to the treasury then after treasury it is transferred to National Treasury then it comes back to our County Treasury and that is where the problems come in and I think the committee of Finance will look into that and talk to the CEC Finance and even we have tea with the CEC for health to look on the way forward on what to do about that. Thank you, Mr. Speaker, Sir.

(Laughter)

Hon. Speaker: Let us hear the mover but I think Chairpersons should take their roles, sometimes implementation lies with us. We need to ensure it is done. We have the ability and power to summon and command implementation. Yes, let us hear.

Hon. (Ms.) Mutune: Thank you, Mr. Speaker, Sir, and the House. I want to appreciate the committee for the good work that they have done. My point is on a recommendation that the Governor, Machakos have frequent visits to the hospital. Mr. Speaker, Sir, going back to the time when Madam Ngilu was the Minister for health, she used to visit hospitals frequently, she used to fire doctors who were lazy, people did not complain but when our Governor visits our hospitals and finds some funny things, he tries to warn the doctors then it becomes political.

I am urging the Members of this Assembly to be supporting the Governor when he does the right thing so that we can improve our hospitals. Thank you.

(Applause)

Hon. Speaker: Let us hear the mover. Thank you.

Hon. (Ms.) Sereka: Thank you, Mr. Speaker, Sir, I want to take this opportunity to thank the Hon. Members for the good participation they have done in the floor of this House and to add on that Mr. Speaker, I think some months ago we passed the regulations for the Facility Improvement Fund (FIF) but nothing has happened, Mr. Speaker. Mr. Speaker, when the

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Government created these funds, it really knew what it was doing because if you look at the fund it was really to facilitate improvement of the hospitals but in our County there has been a problem about the regulations.

Mr. Speaker, up to now the committees for the hospitals have not been even formed. We have really complained, called the Chief Officers and two months ago, I went to seek where the problem is and I had a sitting with both CECs and what I learnt from there is that the CEC finance is not ready to accept the funds. So, Mr. Speaker, I urge this Hon. House to really help the health committee and the people of Machakos to let these funds, the FIF fund to be used in hospitals and to let the CEC finance allow the hospitals to use their money because the money belongs to the hospitals not for other uses.

And again, Mr. Speaker, to add on that, if our hospitals get enough money, there will be no problem of drugs and our people will be happy of our services. Again Mr. Speaker, the fee which Thika Level V hospital charges is a bit higher than ours and I think Hon. Nzeki can testify that because we went to the Administrator with him and there fee is a bit high. So, I urge this Hon. House to sit down and know what to do so that at least those people who can afford can help those who cannot afford, Mr. Speaker.

I want to thank everybody and say thank you, Hon. Members and please try to help the health committee because if you help us, you help the people who elected you. Thank you, Mr. Speaker, Sir.

(Applause)

Hon. Speaker: Thank you. But I am sure you are in a position to re-look at the matter of the fund and file an appropriate report for this House. That is the only way the House can be of help to you.

(Question put and agreed to)

ADJOURNMENT

Hon. Speaker: Clerk, no more business? The House will adjourn until the afternoon.

House rose at 11.23 a.m.