

REPUBLIC OF KENYA
COUNTY ASSEMBLY OF MACHAKOS
OFFICIAL REPORT

Wednesday, 14th August, 2024

The House met at 11.10 a.m.

[The Deputy Speaker (Hon. Stephen Mwanthi) in the Chair]

PRAYERS

STATEMENT

Hon. Deputy Speaker: Under this one we have Hon. Dominic Maitha, I am informed that the Member is not around and also the Member who sought the statement is still not around and so we may just proceed.

MOTION

**BUDGET IMPLEMENTATION FOR THE DEPARTMENT OF
HEALTH FOR THE 1ST AND 2ND QUARTERS OF 2023/24**

Hon. Deputy Speaker: This one I think it is for Hon. Vincent Mutie, chairperson Health and Emergency Services committee, maybe you may give Members some highlights before we continue with the debate.

Hon. Vincent Mutie (Upper Kaewa/Iveti, WDM/K): Thank you Hon. Speaker, I am rising to present to the House the implementation status of the first and second quarters of the financial years 2023/24 according to the department of Health. Hon. Speaker, I do not intend to read the preliminary pages of the report and with your permission I would proceed to the committee observations pg. 5 but perhaps to indicate the subject is the overall budget for the financial year 2023/24.

Hon. Speaker, the County Assembly approved the health department total budget of Ksh. 5,310,183,576.00 comprising of Ksh. 4,345,380,767.00 as the recurrent budget and Ksh. 964,802,809.00 as the development budget. These amounts are based on the revision of the budget through a supplementary budget appropriation Act with the latest being done on the 16th of April, 2024. The committee observations are as follows:

Implementation Status

Hon. Speaker, according to the status report presented by the Chief Officer dated 16th February, 2024 and referenced as such which is annexure No. 1, the absorption rate for the departments and the programs for the 1st and 2nd quarters for the financial year 2023/24 is as follows:

The table is outlined below.

S/NO	PROGRAMME	Absorption rate as at 31 st December, 2023 (%)	
		Recurrent	Development
P01	General Administration and Support Services	60.7	14.6
P02	Machakos Level 5	74.4	0
P03	Kangundo Level 4	68.4	0
P04	Matuu Level 4	58.5	14.2
P05	Kathiani Level 4	52.8	0
P06	Mwala Level 4	67.0	0
P07	Kimiti Level 4	67.7	0
P08	Masinga Level 4	87.5	0
P09	Athi River Level 4	58.8	0
P10	Mutituni Level 4	52.5	0
P11	Ndithini Level 4	56.5	0
P12	Kalama Level 4	66.3	0
P13	Public Health	49.1	39.6
	TOTALS	61.0	16.5

Hon. Speaker, the Committee discussed the budget implementation report for the first and second quarters of the FY 2023/2024 from the Department and made the following observations:

The recurrent budget under general administration and support services includes monies for basic salaries, allowances, electricity bills, water and sewerage charges and fueling and maintenance of office vehicles for the Department.

That the recurrent budget under the various hospital programs and the public health program is used for medical drugs, dressings, non-pharmaceuticals medical items, chemical and industrial gases, laboratory materials, supplies and small equipment, food and rations, other fuels including wood, charcoal and cooking gas, payment of contracted guards and cleaning services

As at 31st December, 2023 the absorption rate of votes for purchase of medical drugs for most of the hospitals was between 43 per cent to 50 per cent except for Machakos Level 5 and Masinga Level 4 whose expenditure was 98.7 per cent and 97.2 per cent respectively.

Expenditure for dressings and other non-pharmaceutical medical items in Machakos Level 5, Kangundo, Kathiani, Mwala Level 4 Hospitals was zero while in Masinga, Athi River, Mutituni, Ndithini and Kalama Level 4 Hospitals the expenditure was 47.5 per cent.

The absorption rate for chemicals and industrial gases for all the hospitals as at 31st December, 2023 was above 95 per cent.

The absorption rate for laboratory materials, supplies and small equipment was at 0 per cent and stated to be at procurement stage except that of Machakos Level 5 which was at 45.8 per cent

The budget expenditure for foods and rations was above 95 per cent for all the hospitals according to the report of the Department of Health

The Committee also observed that the absorption rate for other fuels that is wood, charcoal and cooking gas for all the hospitals was at 0 per cent and stated to be at procurement stage.

The Committee noted that the absorption rate of votes on contracted guards and cleaning services was above 90 per cent for all the hospitals as at 31st December, 2023.

The Committee observed that the absorption rate of the recurrent budget according to the Department's report was 61 per cent.

The Committee observed that the following capital projects were captured to have been done and paid as at 31st December, 2023:

- a. Maintenance of CT Scan at Ksh. 1,480,000
- b. Purchase of software for Health Management Information System at Ksh. 79,907,879
- c. Capital transfer of Danida funds to Level 2 and 3 hospitals at Ksh. 15,285,875
- d. Construction of Masii Level 4 Hospital at Ksh. 17,638,140
- e. Construction of CT scan building and casualty wing at Matuu Level 4 Hospital at Ksh. 5,686,977
- f. Phased construction of level 2s and Level 3s facilities at Ksh. 61,118,022

The Committee observed that the absorption rate of the development budget according to the Department's report was 16.5 per cent.

Implementation Status for the first and Second quarter of the FY 2023/2024 according to the Controller of Budget

Mr. Speaker, the first comparison was as per the report from the department and this one is as per the Controller of Budget. The office of the Controller of Budget is established under Article 228(4) of the Constitution of Kenya, 2010 as an independent office. The functions of the Controller of Budget shall be to oversee the implementation of the budgets of the national and county governments. A report on the performance of the Department for the first and second quarters of the FY 2023/2024 was received from the Controller of Budget. This is in line with provisions of Article 228(6) of the Constitution of Kenya, 2010 which provides that "every four months, the Controller shall submit to each House of Parliament a report on the implementation of the budgets of the national and county governments."

Hon. Speaker, this Committee also considered the report of the Controller of Budget and compared it with the Departmental performance for the first and second quarters of the FY 2023/2024. The report of the Controller of Budget is as follows:

Department	Budget Allocation (Ksh. Million)		Exchequer Issues (Ksh. Millions)		Expenditure (Ksh. Million)		Expenditure to Exchequer Issues (%)		Absorption rate (%)	
	Rec	Dev	Rec	Dev	Rec	Dev	Rec	Dev	Rec	Dev
Health and Emergency Services	4,277	1,095.25	1,775.93	0	1,970.95	0	110.0	0	46.1	0

Mr. Speaker, there is a report on the execution of the budget which is outlined in Table 3 and unless it is of much importance I would wish to skip that Table.

Hon. Speaker, the committee discussed the budget implementation reports for the first and second quarters of the FY 2023/2024 from the Controller of Budget and made the following observations:

The absorption rate of the recurrent budget of the Department of Health as at 31st December, 2023 was 46.1 per cent

The absorption rate of the development budget of the Department of Health as at 31st December, 2023 was 0 per cent.

Response from the County Executive Committee Member on the Budget Implementation Report of the First and Second quarters of the FY 2023/2024

The Committee requested for information regarding the 1st and 2nd Quarters report for the FY 2023/2024 from the County Executive Committee member for the Department of Health through a letter Reference No. MKSCA/ PCS/CMM/HES/VOL.4/32 dated 28th March, 2024. (Annexure 2)

The County Executive Committee member for the Department Health responded through a letter referenced CGM/DH/Vol.1/18 dated 23rd May, 2024 (Annexure-3) and stated the following:

Regarding the Expenditure of the vote for purchase of medical drugs in Machakos Level 5 and Masinga level 4 Hospitals being 98.7 per cent and 97.2 per cent respectively yet the Financial year had six more months to be covered, the CECM responded that the initial budget allocated was not sufficient and a supplementary budget had been approved by the County Assembly on 16th April, 2024 to replenish the votes.

On expenditure of the Vote on chemicals and industrial gases for all the hospitals as at 31st December, 2023 being 95 per cent the CECM also stated that the initial budget allocated was not sufficient and a supplementary budget had been approved by the County Assembly on 16th April, 2024 to replenish the votes.

On why the absorption rate for laboratory materials, supplies and small equipment was at 0 per cent as at 31st December, 2023 yet the supplies of the same commodities in the hospitals was wanting during the time of consideration, the CECM in his response dated 23rd May, 2024 highlighted that the Department had since utilized the monies to a tune of Ksh. 7,956,719 against a budget of Ksh. 8,000,000 equivalent to an absorption rate of 99.45 per cent.

Regarding the budget expenditure of votes on food rations for all hospitals as at 31st December, 2023 being 95 per cent for all the hospitals, the CECM specified that the initial budget allocated was not sufficient and a supplementary budget had been approved by the County Assembly on 16th April, 2024 to replenish the votes.

On why the absorption rate for other fuels that is wood, charcoal and cooking gas for all the hospitals was at 0 per cent as at 31st December, 2023 and stated to be at procurement stage the CECM in his response dated 23rd May, 2024 responded that the Department had concluded the procurement process. The suppliers were currently fulfilling their delivery obligation.

Concerning the absorption rate of the votes on contracted guards and cleaning services being 90 per cent for most of the hospitals, the CECM stated that the initial budget allocated was not sufficient and a supplementary budget had been approved by the County Assembly on 16th April, 2024 to replenish the votes.

COMMITTEE FINDINGS

Hon. Speaker, based on the above observations, the Committee made the following findings:

Sufficient budgets were not apportioned for key recurrent vote lines in the Department such as purchase of medical drugs, chemicals and industrial gases, food rations and services like contracted guards and cleaning. That is why the budget appears to be overused in the initial periods of the financial year.

The Department delayed procurement process for all the capital projects because as at 31st December, 2023 the absorption rate of development budget was 0 per cent according to the Controller of Budget report of the first half of the FY 2023/2024. This means that most of the capital projects in the Department had not commenced as at 31st December, 2023.

According to the Departmental report, absorption rate is payments processed up to the Level of Internet Banking while absorption rate according to the Controller of Budget is actual payments hence the discrepancy of reporting. According to the Department's report, absorption rate for Development budget is 16.5 per cent and 61 per cent for recurrent whereas the CoB reports the absorption rate for Development and recurrent as 0 per cent and 46.1 per cent respectively.

Mr. Speaker, this means that once the department has processed payment despite whether that money has been released from the CoB, the department marked that as a consumption of the development budget that is why you find at the department they are pointing out they had a development consumption of 16.5 whereas the CoB is saying it was at 0 per cent. So, they had already done the work, finished the procurement, the work had been executed and they had processed the documents for payments. According to them they had finished that bit so they recorded that as work that has already been done and paid.

The Department delayed in responding to requests for information by this Committee. For instance, quarterly reports are supposed to be submitted to the County Assembly on time. However, the Department forwarded the first quarterly report for the current financial year on 16th February, 2024. Response to a letter dated 3rd April, 2024 to issues raised on the report was received by the Committee on 23rd May, 2024. Hon. Speaker, that is more than a month and this of course affected our timelines of finishing of the writing of the report.

COMMITTEE RECOMMENDATIONS

Hon. Speaker, the committee having done the above findings recommends as follows:

The Department should present proposed estimates to the County Assembly that are commensurate with the usage and workload. This enables the County Assembly make appropriate decisions when appropriating funds during the Budget Approval process. For instance, the Department should ensure key vote lines line purchase of medical drugs, laboratory supplies and food rations are adequately budgeted for to avoid shortage of such commodities midway the financial year.

Immediately after approval of the County Budget, the Department should start preparation of the procurement plan so as to ensure that capital projects are initiated in the second quarter of the financial year. In future, this House should consider apportioning Development budgets based on the absorption rates of the previous financial years.

Reporting on absorption rate should be based on the actual payments as indicated in the Controller of Budget Report and not on financial commitments made by the Departments.

Quarterly Reports and any other information requested by the Committee from the Department should be submitted within required timeliness.

CONCLUSION AND ACKNOWLEDGEMENT

Hon. Speaker, allow me to acknowledge the Department of Health for fulfilling their Constitutional mandate by submitting the Departmental performance report for the first and second quarter of the FY 2023/2024 according to Article 183(3) of the Constitution of Kenya, 2010.

I wish to appreciate the Health and Emergency Services Committee Members for their dedication during committee sittings and compiling of this report. Hon. Speaker, the Committee expresses gratitude to the Office of the Speaker and that of the Clerk to the County Assembly for the continuous and relentless support received as it discharged its oversight mandate. It is therefore my duty, on behalf of the Health and Emergency Services Committee to table this report and recommend it to this honorable house for consideration and adoption. Thank you, Hon. Speaker.

Hon. Deputy Speaker: Thank you, Hon. Vincent. I now invite Members to debate the motion. Hon. Majority Leader.

Hon. Nicholas Nzioka (Machakos Central, WDM-K): Thank you, Mr. Speaker. First, I want to thank the Chairman for the Committee of Health because of a well-articulated report. The department of health as we know it consumes much of our budget of the County Executive because they offer various essential services.

From the report, I have taken two things. One, that there seems to be a low intake on the development expenditure of every other vote. That is worrying because it means we are not expanding the health sector infrastructure but relying on what is there. If you look at the recurrent expenditure of Machakos Level V as opposed to the other Level IV facilities, it can tell you where the bulk of the service is being offered and that is why as the area MCA, I keep saying that we need to empower. The recurrent expenditure for Level V is more than 97 per cent and it means most of the services are offered here and that is why I am an advocate of supporting the regional hospitals like the ones in Matuu, Mwala, Kangundo, Kathiani and Athi River so that we decongest the Level V facility.

Secondly, I have heard the Chairman read about absorption being low on some essentials recurrent like drugs and that is why we are hearing people say they are going to the hospital and they are not finding drugs. So, we will urge the department of health to ensure they absorb much of the budget because it is the largest in the County. Thank you, Mr. Speaker.

Hon. Deputy Speaker: Thank you, Hon. Majority Leader. Minority Leader.

Hon. Mbili Ndawa (Matuu, M CCP): Thank you, Mr. Speaker. I will start by applauding our most able Chairman together with the committee for coming up with this brief and self-explanatory report. They have done a wonderful job.

Coming to the issues that I want to raise, the first one is the issue of drugs. As we try our level best to ensure that services are given to wananchi, we have some challenges especially on requisition. Hon. Speaker, I understand that requisitions are done quarterly and what is given to the facility is either one-third of what has been requisitioned or two-thirds. So, that means there is a balance which is not delivered to the facility.

I would request the department to ensure that whatever comes from the facility because the person requesting for those supplies is the one who knows the situation at that facility. The issue of requesting for three months then we get something that is going to take the facility one month means the other two months we are going to run without drugs and that is why we have a lot of noise in this County. This is an area that I feel we should stamp authority to ensure the facilities get what they request for.

On the issue of the contracted services especially cleaning services, I want to cite an example of Matuu Level IV where a contractor was given the tender and by last week, the employees who are not employees of the County but of the contractor had not been paid for a period of five months. Hon. Speaker it is very unfair.

I personally went to Matuu Level IV hospital and I found a lady with two kids sleeping outside the latrines. I asked why and I was told that the house they had rented in Matuu was closed because the husband had not received salary for five months. So Hon. Speaker, I would request the concerned department again that once they give a contract to somebody, they should also make a follow up to ensure that that particular person does not use other people without paying what is supposed to be paid. Hon. Speaker, we are forced by circumstances to organize ourselves and organize how that lady that lady together and the two kids can go back to their house.

So Hon. Speaker, the noise we are getting from the residents, some of them are genuine. Another time we had noise coming from Kangundo Level IV hospital where patients were going without food and that comes to the issue of supplies. This is the highest decision-making organ of the County and the residents of Machakos County expect a lot from this. I very sure that H.E the Governor may not be aware of what is happening but we must be clear that in the law of agency, we recognize two parties. We have the principal and we have the agent and there comes the issue of delegating.

Hon. Speaker, delegating is transfer of duties and powers or authority from a senior manager to a junior manager so Hon. Speaker, once somebody has been assigned to do something maybe that particular person, because H.E the Governor assigned the CECM and the Chief Officer in that department and now the Chief Officer and the CECM are now delegating to another person who is the contractor to go and do that job. The issue of supervision must be there; you delegate and supervise otherwise people may do what they were not sent to do.

Hon. Speaker, we are not going to joke with issues of health department. Anyone here I am, sure once you are not well you go to those facilities. We have our parents and children who go to those facilities so I am calling upon the Chief Officer department of health to ensure that we minimize all the noise that we are getting from our health facilities.

Again Hon. Speaker, we have a challenge with the issue of fueling our ambulances and one thing I am worried about Hon. Speaker is whenever I get a call from a patient or their relative that we have been referred to Machakos Level V hospital and we have been asked to fuel the ambulance which coming to Machakos is Ksh. 4,000, going to Nairobi is about Ksh. 6,000. One thing that I do not understand Hon. Speaker, the patient is referred and is told to fuel and once they call me I call the facility and fuel is available. So Hon. Speaker, this is something we must check.

If in the morning you had no fuel and I am receiving my call that you have fuel what does that mean? It means that many people suffer in the hands of those manning the facilities so I would request the committee to make further scrutiny to unearth what is happening in our facilities. H.E the Governor is on record requesting us to assist her deliver to the electorate and

the only why we can assist H. E the Governor is to ensure that we do proper oversight on what is happening.

Hon. Speaker, I support the report and request the committee to also visit Matuu Level IV hospital and see what is happening because there are so many things lacking in fact Matuu is the only Level IV hospital in Eastern Central Africa without a morgue but I believe H.E the Governor has good plans to have that facility in place so I do support the report. Thank you.

Hon. Deputy Speaker: Thank you, Hon. Ndawa. I was trying to imagine what the source of that information that it is the only facility in Eastern Central Africa. Thank you, Hon. Member. Hon. Constance Mbula.

Hon. Constance Mbula (Nominated, MCCC): Thank you, Hon. Speaker. I want to congratulate the committee on the report well-presented. However, we have a lot of issues in that health department. Apart from having no medication there are so many other things and I will give an example, Hon. Speaker. Today morning one of my staff woke up very sick; in fact he could not walk and I directed that he be taken to Level IV hospital and he said "no mama, I would rather be here and give me Panadol."

I asked him why and he said "because last month and many months ago I have been there, I have taken my family also but the waiting in the queue, the services and the staff have just relaxed. They will pass you there even if you are dying they will look at you and pass." I do not know this committee whether you have visited the facility and saw what is going on every day. You pay for the card and sit there like forever for that matter I directed that he be taken to a Level II in our place that is called Kaseve. In Kaseve there is always one very good doctor and there is no queue and we appreciate.

Another time, this committee should take time and visit all the facilities; there is another one in Mutituni also I understand it is also treating people well but in Machakos kindly check what is happening first to the staff because somebody has a wound and it needs to be dressed sincerely you have to buy gloves at Ksh. 20. We need to ask ourselves what we are doing here if my mother will go there and be asked to pay for Ksh. 20 for gloves. Have we gone that low as a facility? Has our facility collapsed? Apart from that food is also essential, life is very essential because if you have no life then you are not living. We visit these facilities because we are unwell.

Ask me, I am one of those people who were very sick a few days ago and I saw myself going but thank God where you go and insurance pays they are active and they look after you. Please, committee look at those things and make sure our facilities are working well because we must take care of our people and without us I do not know who else will talk for them. Thank you, Hon. Speaker, and I wish the committee well. Go and visit other hospitals and know what is happening. Thank you.

Hon. Deputy Speaker: Thank you, Hon. Constance Mbula. You thought you were going. Where were you going, Hon. Mbula.

Hon. Constance Mbula (Nominated, MCCC): I was going to heaven.

Hon. Deputy Speaker: Oh!

Hon. Constance Mbula (Nominated, MCCC): At least not hell.

Hon. Deputy Speaker: Sorry for that.

Hon. Constance Mbula (Nominated, MCCC): Thank you very much and I think people should take examples. If you have visited hospitals when you are.....and I think Hon. Dee is one of us, you know what it means. You go there asking God to help you but before God helps you those people with medicine must come to you. Here in our County, they don't care nor bother. Please find out what is happening. Thank you.

Hon. Deputy Speaker: Thank you, Hon. Mbula. Hon. Kavyu.

Hon. Francis Kavyu (Kinanie, MCCC): Thank you, Mr. Speaker. Thank you, to the committee on health for the comprehensive report. I have picked a few items and Mr. Speaker, it appears that a report received from the Controller of Budget and what was shared by the department, there seems to be some discrepancies. I think what needs to happen is to ensure that the two committees mirror each other is to ensure that because if the department is reporting on accrual basis and the Controller of Budget is giving reports based on the actuals then there will always be that discrepancy and that is why every now and then you are seeing members of public questioning how come internally we are saying we are spending a lot but when it comes to the Controller of Budget reports the picture is normally different.

We need to agree on a standard way of reporting to ensure that whatever we feed to the public and the point when the Controller of Budget is giving the same report mirrors what is actual. If you have allocated money and you have not spent then those funds are not assisting anyone. We will also like to ask the committee to make a follow up because I do not know the department keeps insisting that they are purchasing medicine on a timely basis yet they are spending so much on it but there is no single day you will walk into a facility and get express services.

Every now and then if you go today either there are no essentials or there are no drugs so we want the committee to go and check and present a report to this House because unless I am informed otherwise, procurement for drugs normally happens on quietly basis. So, if you purchase drugs that are only supposed to serve for a month or two then definitely the other part of the quarter will expect to have shortage in terms of drugs so the people responsible need to make sure that at the point of procurement, they get it correct. These hospitals are only important and valuable to the community if citizens and people of Machakos can walk in and get the services that they are going for.

Mr. Speaker, if you also look at the report, there are a lot of resources that are being spent on CT scans and maintenance but most of the time when our constituents, come to Machakos Level V hospital, in a day, as an Hon. Member if you are lucky enough not to receive two or three calls from them, asking for a top-up to go to Doctors' Plaza or the German Center for CT scans and X-rays, if you go a day without getting such a call Mr. Speaker, you count yourself lucky. So the question that we are asking is this CT-scan machines that are being maintained, who do they serve? If we have machines that are being serviced, we expect them to render services to our people but every time you go there, a very simple thing like an X-ray, you are being referred to Doctors' Plaza.

So, are there cartels or people who are colluding with those ventures to make sure that they make referrals to those places? That is something that we need to establish. The guard services, if they are not paid on time that is why we end up having them colluding, trying to escape patients from the wards. So, we need to ensure that our hospitals are run in the most professional way and the committee has been on the forefront. So, what we need is to support them, hear our voices because when there is food in the hospital, you cannot hear people complaining but when people complain, the people who are tasked with the responsibility of ensuring that there is food, instead of addressing the issue, you saw last time, instead of addressing the issue, they took our able and hardworking Governor to go and take her around and give her misrepresentation to Her Excellency, that all is well but the actual thing is that there is no food. So, we need people who are genuine and who are dedicated to serve the people of Machakos.

There is something you cannot hide. If you go to a hospital and there is no medicine there is no food, you might want to hide but you cannot run away from it because that is normally a direct feedback that you will get. If the CT Scan machines are working, I will not receive call from Kinanie asking for money because they have been referred to Doctors' Plaza and the same case to Ndalani who will not receive call from the constituents or any other Member because this is something you cannot hide.

It is either working or not so we need to emphasize and even if it means sacrificing or foregoing some expenditure in some non-essential services to make sure this are working then we need to take that route because health and water those are two critical departments that need to be addressed well and to ensure that the health of our people is guaranteed. What we have at Level V hospital is just a structure and this is a hospital that has a reputation and capacity even to serve beyond the people of Machakos County if things are done in a proper and correct manner.

What we should ensure is to ensure that the regional hospitals especially the Level IV hospitals have them equipped and we want to congratulate Her Excellency and the Department of Health for seeing it fit to make sure Matuu Level IV hospital is equipped with those machines. That is also another way of decongesting Level V hospital. We want to see the same happening in Mavoko in Athi River Level IV hospital and Kangundo and probably in Mwala. This will ensure that the commotion that comes here is reduced if the only pressure will be coming from people from outside Machakos then we can have a model where if you are not resident of Machakos then you pay a different rate because you are coming for referral services but that can happen if you have an efficient and functional system that ensures that things are working.

Finally maybe from the committee, I know this was not a part of the report but Mr. Speaker, we also want to request the committee to fast track and give a report on when the facilities that were done in the FY 2023/2024 there were dispensaries and health facilities that were constructed across almost all the 40 wards and one year down the line they are still not operational. That is money that is lying there so we need to have those facilities up and running so that they can start serving and addressing the health gaps that were identified before they were closed.

Like a place in Kwa Mboo in Kinanie Ward, we are eagerly waiting the dispensary once it is operational it is going to be a game changer but if it is delayed for a long time then we might lack an opportunity to enjoy it optimally so we request the committee to engage and probably give us a report on exactly when we expect to have them running but so far so good but in terms of health, there is a lot of room for improvement and I believe it is possible for us to serve and provide better health care for our people. Thank you.

Hon. Deputy Speaker: Thank you, Hon. Kavyu. Hon. Dee.

Hon. Dee Kivuva (Nominated, WDM-K): Thank you, Mr. Speaker. You have correctly mentioned. Once upon a time I was a Member of that committee and I meant good for this County. I have heard what Minority Leader said that the Governor had instructed us to help improve our health department. I remember one day me and the chairman and Mheshimiwa PK went to a dingy hotel in Athi River to meet one of the transferred senior health workers who had raised the same issues. I stand here vindicated.

I remember in the Bible when Saint Paul was arrested and was to be taken to Rome for trial when they went near the sea, he advised the captors that the sea is not calm. "Let us wait for three weeks then you will take me." He was told and I quote; a prisoner has no moral authority so they went into the sea they stayed there for three months when they eventually landed in Rome he told them *ta keka ni ku mbiwa*¹---

Hon. Deputy Speaker: Hon. Dee, are you really in order?

Hon. Dee Kivuva (Nominated, WDM-K): I am in order; I am coming. I am it is only that I am taking a longer route but I want to tell you---

Hon. Deputy Speaker: Can you take a shorter route?

Hon. Dee Kivuva (Nominated, WDM-K): No, my predecessor the person who left the podium spoke for 10 minutes and me also too a longer route what I want to say is this----...

Hon. Deputy Speaker: What I want to say is just stick to the motion.

Hon. Dee Kivuva (Nominated, WDM-K): I am sticking to the motion, Mr. Speaker, Sir. It is true there are problems in the department of health and most of the problems originate from this House. You will not believe me but most of the problems are connected to Members in this House; they don't want to help the Governor but they want to help themselves. We have suppliers, we have.....everybody is connected from this House. It is less than five Members including myself who do not have people---

Hon. Deputy Speaker: Hon. Dee, you are out of order. Kindly stick to the day's motion.

Hon. Dee Kivuva (Nominated, WDM-K): Lastly, I want to say this; I know you don't want to hear but that is the truth. If we improve our health facilities---

Hon. Deputy Speaker: You can come up with a motion over the same.

Hon. Dee Kivuva (Nominated, WDM-K): If we improve services at our health facilities, we will have helped the Governor deliver a mandate and now that the CECM and the CO are not there, I think the committee together with the Chairman from today, they will have more gusto to help the Governor deliver because I remember previously when they had issues they would be

¹ Had you heeded my advice.

called to the party headquarters to go slow but I think now the Chair of health committee will have our support to help the Governor deliver.

Currently, I will bring a motion to the effect that when a CECM resigns or is sacked, the Chair of that relevant committee acts as a CECM. Thank you and God bless you. I support the motion.

Hon. Deputy Speaker: Thank you although all through, you have not told us anything about the report. Hon. Kitaka.

Hon. Francis Kitaka (Ndalani, WDM-K): Hon. Speaker, thank you. I arise to support this report and I would want to make some few observations that are coming out clearly as to why our facilities are not performing to the levels that are required. Mr. Speaker, you realize that we have a situation whereby our inventories are not well kept when it comes to the supplies and the most basic items that are required in every facility that we are running as a County Government.

It is worrying that in the first half year report, we are having institutions that are utilizing over 98 per cent of their already estimated requirements for the whole year hence, necessitating for a supplementary budget to be allocated. We need people who are accountable, who can be progressive and taking their job very serious. If you are head of an institution you are able to know the consumption of that particular facility. When you are making a requisition for budgeting, it is important that you also do a plus a percentage that will also take care of any increment that comes during the running of your facility.

It is important that our officers who are also running these institutions that they give the right quantities and requirements of their facilities so that each and every facility runs smoothly without any problem.

Hon. Speaker, when it comes to development, this is one of the departments that this Assembly assigns the biggest chunk of development money. For the first half year, you will see that in some of the facilities, it was recording zero. It is important that we also engage our officers to make sure that they do timely procurement so that we can utilize the monies assigned for development.

Hon. Speaker, when it comes to development I want to give an example of Ndalani where I represent. The department of health was good enough to assign some few developments in our area. We have a facility at Kivingoni dispensary that was given out and the contractor has been there for a while now. Unfortunately, the project is stalling; the contractor is nowhere to be seen. The same case applies to a facility that was given ablution block at Kiwanza dispensary where it is very unfortunate that Mr. Speaker the dispensary is already closed for the last three months because it does not have a toilet and it cannot operate.

Since the contractor took over the job, it is now three months; doing a toilet for three months. I have made efforts to reach the department and unfortunately the Waziri has resigned but I know there is no vacuum. It is important that when we give tasks to be performed, let the people who are taking over these tasks understand that they are dealing with the most delicate department. Health department is very key to our people and it is the immediate department whereby we give our picture and point our abilities because our people everyday visits those facilities.

In terms of drugs and other necessities, it is important that we also check on our inventories very well. We gave money to this department for automation so we shall be seeking

the same information from our Chair so that maybe the Committee can check with the department whether the system that was deployed is a system that gives real time consumption of the items that are required in that facility and all our facilities that are running across our County. So that, at least, the concerned officers while seated in Machakos at Machakos Level V can easily tell the quantities and the consumption of these necessities while seated without visiting.

If we are using a system it is important that we note it should be able to give us real time answers and also replenish our stocks in a timely manner so that our people may not suffer. They do not walk in facilities and they are not served.

Hon. Speaker, we have a very competent Chair of this Committee. It is important that this House supports this Committee so that at least we help our Governor to achieve and deliver to the people of Machakos. It is important that all the budgets that are given out from this House are spent in a manner that is targeting our people and in a manner to ensure that we deliver services to the people successfully. I hereby support the report and urge the House to support the Committee. Thank you, Mr. Speaker.

Hon. Deputy Speaker: Thank you, Hon. Francis. Before I call the Chair to reply, I would request the Committee to move around on that issue of ambulance and get to know what the problem with the ambulances is. Sometimes you may find that they are in good looking condition but they are not been used until a time when we are called by the residents or patients is when you will see the ambulances working. It is an area that we need to work on the issue of ambulances as I also appreciate that we are getting a Level IV in Matuu. I know it will decongest Level V in Machakos. That probably will have Machakos Level V being decongested. It is a facility that covers a very big area. These are some of the issues that are expected.

There is a problem with our clinical officers and staff who works in those facilities. Drugs are being stolen from those facilities; recently one of my facilities was stolen drugs worth Ksh. 475,000. Some weeks ago Level III in Kitangani also had the same, Kivaa and Kaewa. I am very sure some of the surrounding chemists are the ones that buy those drugs. I do not know how we shall work on that, you know our Hon. Deputy President tried to put some traps at State House only to realize that Baba had gotten in the State House.

For us I do not know what we are going to do to make sure that drugs are only used in our facilities. If we can manage that our health sector could be doing well. Hon. Chair, come forward and reply.

Hon. Vincent Mutie (Upper Kaewa/Iveti, WDM-K): Thank you, Hon. Speaker. I would like to do a quick response. I wanted to demystify the discussion of the ambulances. Hon. Speaker, it is also prudent for the Members to note that the management of ambulances for referral was moved from the health department to Decentralized Units. That is part that we are not able to address ourselves very much because the Chief Officer whom this Section is under is much aligned to the Decentralized Units Committee.

Hon. Deputy Speaker: I hope we have Members here from that same Committee maybe they are best placed to deal with that.

Hon. Vincent Mutie (Upper Kaewa/Iveti, WDM-K): There seems not to be an aligning to the extent that emergency services and firefighting ceased to be part of the Health and Emergency Services Department at the Executive. Much of those responses can be provided by

the Decentralized Units (DU) Committee. It is important to know that the patients become the responsibility of the hospital the moment they are handed over to the hospital. The transit is much out of the hospital system.

In regard to the equipping and operationalization of dispensaries, we did enquire from the department and they said that they have done procurement for the equipment and they are waiting for placement of staff. There was an advert of about 327 health services workers and I believe that they are waiting for that so that they can place both the staff and the equipment. The equipment has been already purchased.

Concerning the CT scan that the Hon. Francis indicated, the committee in our report we pointed out about a construction of a CT scan building and casualty wing at Matuu Level IV Hospital. The maintenance that is mentioned at a cost of Ksh. 1,400,000 is for the existing machine not a new purchase.

We heard a Member raise an issue about the discrepancy between the departmental report and the Controller of Budget (COB) report on matters of absorption. It is important Hon. Speaker, for Members to know that the department does not have end-to-end procurement right so there is a stage where now the department does not know what is happening beyond that point. They can only report what is within their table. So when they say they have already done the procurement, work has been done, we have done all the documentation, they might not be in a position now to know whether that money has been paid.

After they are through with the documentation it becomes now the responsibility of finance to carry out the remaining activities. Since now the department does not have those end-to-end rights perhaps that can be another subject of discussion on how we can realign the procurement process so that now the department can have individual responsibilities to respond on some of those issues. When they say that we have already absorbed at 16.5 per cent and the Controller of Budget says no, it is zero, the money that we have approved for payment is this much so they are basing on that. The Department on their defense they are saying; we have worked it is only that finance has not paid; it is not our work to pay. So we have to be careful not to bash the department so much as though it is an end-to-end responsibility for them.

In regard to the Matuu Level IV facility, the Hon. Minority Leader has developed a character of comparing everything with the external world not because we are not aware of that but simply because we cannot confirm. I do not know whether he did a study to compare Matuu Level IV and other facilities regionally to come out with that conclusion. We believe that yes a Level IV of that age as Matuu should have some essential services. I think the department is working to fast track and to improve that facility at least I am informed that there is construction going on in Matuu Level IV and a lot of improvement and face lifting is happening to help the people of that area and the entire Yatta and Masinga area which are served by Matuu Level IV.

In regard to the Hon. Constance, who had pointed out the issue about the services at Level V compared to Kaseve dispensary, it is also critical to note that if Kaseve seems to work well, it implores me for the Assembly Members to encourage our people that instead of rushing to Level V you can first use the facilities that are available locally so that we can try to decongest.

Also from the Department we are trying to implore on the need to equip lower levels so that minor ailments do not have to find their way to Level V. When you come to Level V, the congestion is at the outpatient and most of the people are treated and go home meaning that they are cases which can be handled at Level IV, Level III and can be handled at Level II. We have done several recommendations to the Department so that they can look at the whole sector with

intent of localizing treatment of basic ailments so that we can leave Machakos Level V to be the apex of the referral system and to address more critical and serious issues.

Finally, Hon. Speaker, I would like to encourage all of us that as we do our work, the health sector being a service sector covers the ordinary citizen; that person who cannot afford to pay insurance bill so that they can be covered in a more expensive facility. The intent of our---

Hon. Deputy Speaker: Chair, I would want you to be a little bit brief because we did not extend time and I can see we still have another Motion so just try to be brief.

Hon. Vincent Mutie (Upper Kaewa/Iveti, WDM-K): I am finishing actually. The health service is a service sector which addresses problems with the common person and the common person is the person who elected us both at the County Assembly and the Executive. I think it will be prudent that we help the government by doing the right oversight. I call it a collaborative oversight whereby we point out the mistakes and challenges but we also propose solutions to the challenges that we could be having. Otherwise, I thank you and the Hon. Members who contributed. Thank you, Hon. Speaker.

Hon. Deputy Speaker: Thank you, Hon. Chair.

(Question put and agreed to)

(Applause)

ALTERATION OF THE CALENDAR AND ADJOURNMENT OF THE HOUSE

Hon. Deputy Speaker: This one I call Hon. Majority Leader Nicholas Nzioka, MCA Machakos Central Ward.

Hon. Nicholas Nzioka (Machakos Central, WDM-K): Thank you, Mr. Speaker. Hon. Speaker, I wish to move the Motion that, notwithstanding the resolutions of the Assembly made on 20th February, 2024 (Approval of Assembly Calendar), 21st February, 15th May, 18th June, 9th July and 6th August, 2024 (alternation of the Calendar) and pursuant to Standing Orders 25(4) and 27(3)(c), the Assembly resolves that; the Calendar (Regular Sessions) for the Third Session of the Third Assembly be altered to adjourn its sittings from today Wednesday 14th August, 2024 after the morning sitting and resume its regular sittings on Tuesday, 27th August, 2024 at 10.00 a.m.; and that the Assembly Calendar (Regular Sessions) for the Third Session be altered accordingly. I call upon Hon. Minority Leader to second.

Hon. Mbili Ndawa (Matuu, MCCP) seconded.

Hon. Deputy Speaker: Thank you, Majority Leader and Minority Leader.

(Question proposed)

I now invite Members to debate this Motion. I call the mover to reply.

Hon. Nicholas Nzioka (Machakos Central, WDM-K): Thank you, Mr. Speaker. I think it is important that I expound why we sought the adjournment is basically for the Members to be trained on generation of business for the House among other things. Thank you, Mr. Speaker.

Hon. Deputy Speaker: Thank you, Hon. Majority Leader.

(Question put and agreed to)

ADJOURNMENT

Hon. Deputy Speaker: Thank you, Hon. Members. The House adjourns to Tuesday, 27th August, 2024 at 10.00 a.m.

The House rose at 12.30 p.m.