



KENYA NATIONAL ASSEMBLY

TENTH PARLIAMENT
(FOURTH SESSION)

DEPARTMENTAL COMMITTEE ON HEALTH

REPORT ON EXAMINATION OF 2010/2011 ESTIMATES:

MINISTRIES OF MEDICAL SERVICES AND PUBLIC
HEALTH & SANITATION

(VOTES R.11/D.11 & R.49/D.49)

July, 2010

CLERKS CHAMBERS
PARLIAMENT BUILDINGS
NAIROBI

July 2010

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PREFACE

Mr. Speaker,

The Departmental Committee on Health of the National Assembly was constituted on June 17, 2009. Pursuant to provisions of Standing Order 198 the Committee is mandated to:-

198. (1) *There shall be select committees to be designated Departmental Committees which shall be nominated by the House Business Committee and approved by the House at the commencement of every Parliament.*

(2) *Unless the House otherwise directs, the Departmental Committees shall be as set out in the Second Schedule.*

(3) *The functions of a Departmental Committee shall be: -*

(a) *to investigate, inquire into, and report on all matters relating to the mandate, management, activities, administration, operations and estimates of the assigned Ministries and departments;*

(b) *to study the programme and policy objectives of Ministries and departments and the effectiveness of the implementation;*

(c) *to study and review all legislation referred to it;*

(d) *to study, assess and analyse the relative success of the Ministries and departments as measured by the results obtained as compared with their stated objectives;*

(e) *to investigate and inquire into all matters relating to the assigned Ministries and departments as they may deem necessary, and as may be referred to them by the House or a Minister; and*

(f) *to make reports and recommendations to the House as often as possible, including recommendation of proposed legislation.*

Mr. Speaker,

According to Schedule II of the Standing Orders, the subjects under the committee are "Matters related to health, medical care and health insurance". In this regard, the Committee examined the Estimates of the Ministry of Medical Services- R.11 and D.11 and the Ministry of Public Health and Sanitation- R.49 and D.49.

Mr. Speaker,

The Members of the Committee are:-

- (i) Hon. Robert O. Monda, M.P. - Chairperson
- (ii) Hon. (Dr.) Nuh Nassir Abdi, M.P. -Vice-Chairperson
- (iii) Hon. Sheikh Muhammad Dor, M.P.
- (iv) Hon. Cyprian O. Omolo, M.P.
- (v) Hon. Fredrick Outa, M.P.
- (vi) Hon. Joseph O. Magwanga, M.P.
- (vii) Hon. Thomas M. Mwadeghu, M.P.
- (viii) Hon. Victor Kioko Munyaka, M.P.

- (ix) Hon. (Dr.) David Eseli, M.P.
- (x) Hon. (Dr.) Boni Khalwale, M.P.
- (xi) Hon. Joseph Lekuton, M.P.

Mr. Speaker,

The *Committee of Supply* is preceded by examination of the Estimates by Departmental Committees. Pursuant to Standing Order 152, once laid before the House, the Estimates are committed to the Departmental Committee according to their mandates, for examination for twenty one days. The Minister for Finance submitted the Estimates for the year 2009/2010 before this House on June 9, 2010. This was followed by reconstitution of Committees and the said Estimates stood committed to the newly constituted committees. In this regard, the Estimates for the Ministry of Medical Services and those of Ministry of Public Health and Sanitation were committed to the Departmental Committee on Health for examination.

The examination of the Estimates by the Committee was preceded by a comprehensive brief by the National Assembly's Budget office on the crucial areas of the Estimates. Thereafter, the Committee held meetings with the Hon. Ministers for the two Ministries. During the Meetings, the Ministers were accompanied by the Permanent Secretaries and other technical officers in their respective Ministries. The examination mainly dealt with areas with increases in allocations, new projects, deficits, absorption capacities and criteria for allocation in each Head.

The policy and budget documents used included the Vision 2030, the Medium term Plan, the MDGs Status Report, the Budget Speech for 2009, Printed Estimates for FY 2009/10, Budget Outlook Paper for 2010/11-2012/13, the Budget Strategy Paper 2010/11-2012/2013, Economic Survey for 2009 and other relevant documents. The methodology of collecting data and evidence was by way of Meetings with the Ministers for Medical Services and Public Health and Sanitation and written and oral evidence by the Ministers

Mr. Speaker,

The WHO recommended a per capital health spending US\$ 34 to finance an essential package of health services. Further, the 2009/2010 allocation to the entire sector is about 5.43% of the total government budget compared to the Abuja Declaration of 15% and the Economic Recovery Strategy of 12. The Health sub-sector has been allocated Kshs.47.011 billion (25.58% of the Human Resource Development Sector). The Health budget represents about 6-7% of the entire national budget. The implementation of the Ministry of Medical Services' Strategic Plan requires Ksh. 52 billion compared to the allocation of Ksh.32.6 billion for the year 2010/2011.

Under District Budgets, the Committee noted that the continued reduction by 20.3% in 2009/2010 and the 2010/11 reduction by Ksh.1.3 billion. This, the Committee observed, may hamper delivery of services at district levels. The Committee was concerned that since districts have increased in number, district health services will therefore expand, it would have been prudent to increase the allocation on the Head.

Another area of concern is Vote R.11 of Head 355(Kenya Medical Supplies Agency) under the Ministry of Medical Services. The Committee noted that the grant to KEMSA remained constant at Kshs. 344.1. million. This is despite the recommendations to restructure and capitalise KEMSA in order to enhance service delivery. The Committee was also concerned that the government does not seem to be committed to its undertaking of consolidation of all funds for purchase of drugs into one basket.

The Committee was also informed that the hospitals are expected to collect Ksh.2.1 billion during the year from cost sharing revenues up from Ksh.1.8 billion in the previous year, due to improved systems. The Committee recommended that these funds be utilised for in priority areas that are underfunded.

Another area of concern is Head 317 (District Health Services) of the Development Expenditure of the Ministry of Medical Services. The Committee noted the increased gross expenditure mainly on account of construction of buildings. The Committee was informed that the A.in.A would be raised from Grants from international organizations and foreign governments and foreign borrowing. The Committee was also informed that the allocation criteria is based on five variables of *poverty, bed utilization, outpatient cases, accident prone areas and fuel costs*. The Ministry of Public Health and Sanitation also has deficits in several allocation *Items* including; Monitoring and Evaluation; Department of Environmental Health and Sanitation; Division of Child and Adolescent Health; Contraceptives and Ophthalmic Services;

The Committee also noted with concern that the estimates for the Ministry of Medical Services were not based on the Ministry's Strategic Plan, the Medium Term Expenditure Framework (MTEF) nor the Vision 2030.

Mr. Speaker,

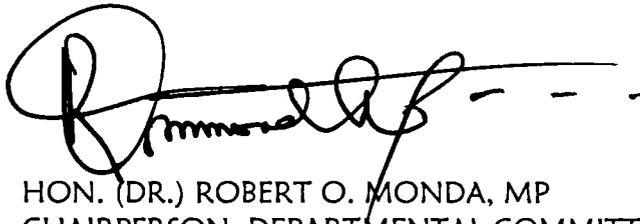
Whilst appreciating the need to shift emphasis to preventive services from curative services, the Committee is of the view that the split of the Ministry of Health is doing more harm than good. This is exemplified in personnel and administration conflicts, constant conflicts on operations and uncoordinated instructions to KEMSA and KMTCC. Further, the Ministries have confirmed that it is difficult to separate implementation of programmes such as HIV, TB and Malaria into curative and preventive. In addition, the administration of the Global Fund has been affected while the overall overheads cost of the sub-sector have increased.

Mr. Speaker,

The Committee wishes to record its appreciation to the Minister for Public Health and Sanitation and the Minister for Medical Services for appearing before it and providing the information contained in the Report. The Committee is also grateful for the information provided by the members of staff of the two Ministries. Further, the Committee is indebted to the staff of the National Assembly, including those in the Budget Office for the services they rendered to the Committee. It is their commitment and dedication to duty that made the work of the Committee and production of this Report possible.

Mr. Speaker,

It is now my pleasant duty, on behalf of the Committee to present and commend this Report to the House.



HON. (DR.) ROBERT O. MONDA, MP
CHAIRPERSON, DEPARTMENTAL COMMITTEE ON HEALTH

²⁰¹⁴
...July....2010

REPORT ON EXAMINATION OF ESTIMATES FOR THE YEAR
2010/2011: MINISTRIES OF MEDICAL SERVICES AND PUBLIC
HEALTH & SANITATION.

CHAPTER I: BACKGROUND

Socio-economic development

1. Good health is a pre-requisite for socio-economic development of the country. Kenya had recorded positive health indicators after independence due to the progress that was made in the provision of health care services. However, the indicators began deteriorating in mid 1990s. Current trends in health indicators are optimistic. Infant mortality has declined from 77 per 1,000 in 2003 to 52 in 2008/09 while in the same period under five mortality rate declined from 115 per 1,000 to 74. The overall HIV prevalence rate among adults 15-49 years has increased from 6.7% in 2003 to 7.4% in 2007. Kenya has had relative success in scaling up access to anti-retroviral treatment.

Top five causes of morbidity.

2. A high disease burden is a barrier to economic growth – Most of sicknesses are caused by preventable conditions. Top five causes (malaria, Disease of the Respiratory System, Disease of the Skin, diarrhea, and accidents) of outpatient morbidity account for about 70% of total causes with malaria contributing about a third of total morbidity.
3. The health sector will play its part in the attainment of the Vision goals. In this regard, the need for a robust health infrastructure; a financing mechanism that allows Kenyans, especially the poor to access affordable and quality services; an increased focus on preventive and promotional healthcare and the delinking of the Ministries of Health from service provision are identified as some of the key interventions that need to be implemented in the medium to long term period.

World Health Organisation (WHO) Requirements

4. The World Health Organisation (WHO) Commission on Macro Economics and Health (WHO 2001) recommended a per capital health spending US\$ 34 to finance an essential package of health services. Kenyan`s spending on health care, like other countries in sub-Saharan Africa region, falls short of the WHO recommendation. This is a clear indication of scarcity of resources to finance efficiency in health care. The challenge is therefore to address the resources gaps, continue to improve efficiency in resources allocation and use, and maintain the relatively high level of domestic resources invested in health.
5. Considering the relative contributions of financial sources to the total health expenditure in the country, households are the largest contributors of health expenditures (36%), followed by the government (29%) and donors (31%) (National Health Accounts, 2005/06). Poverty and high cost of medical care in

the country remains a major hindrance to accessible quality health services of acceptable standards. Evidence shows about 40% of Kenyans who fall sick do not seek medical care due to cost of care and other access constraints, an issue which requires government to examine ways of protecting the poor and other vulnerable groups to ensure that they access medical services when in need.

Abuja Declaration of 2001

6. Kenya has ratified the Abuja Declaration of 2001 which states in part, that: “We commit ourselves to take all necessary measures to ensure that the needed resources are made available from all sources, and that they are efficiently and effectively utilized. We pledge to set a target of allocating at least 15 per cent of our annual budget to the improvement of the health sector. We undertake to mobilize all the human, material and financial resources required to provide care and support and quality treatment to our populations infected with HIV/AIDS, tuberculosis and other related infections. We resolve to enact and utilize appropriate legislation and international trade regulations to ensure the availability of drugs at affordable prices and technologies for treatment, care and prevention of HIV/AIDS, TB and other infectious diseases. We commit ourselves to support the development of an affordable, accessible HIV vaccine relevant to Africa.”

The Maputo Plan of Action

7. Further, Kenya signed the Maputo Plan of Action (of September 22, 2006). The plan recommends a number of measures, including integrating HIV/AIDS services into sexual and reproductive health and rights; promoting family planning as a crucial factor in attaining the Millennium Development Goals; supporting the sexual and reproductive health needs of adolescents and young people as a key SRH component; addressing unsafe abortion through family planning; delivering quality and affordable health services to promote safe motherhood, child survival, and maternal, newborn and child health; and adopting strategies that would ensure reproductive health commodity security.

The Millennium Development Goals

8. In addition, the government has pledged to achieve the Millennium Development Goals 4 (Reduce child mortality), 5 (Improve maternal health) and 6 (Combat HIV/AIDS, malaria and other diseases). Despite all these, research has shown that two in three Kenyans have no access to essential services, such as family planning, maternal health care, and HIV prevention and treatment. As a result, many women die each day from complications of pregnancy and childbirth.

Financing of the Health Sector in Kenya

9. The importance of Health Sector in Kenya cannot be overemphasized. A healthy population is critical for promoting economic development while a high disease burden is a barrier to economic growth. It is against this background that the Government prioritized health in the Economic Recovery Strategy (ERS) and now it is being touted as a critical pillar to the attainment of Vision 2030. The sector is also critical in the realization of the Millennium

Development Goals (MDGs) which Kenya is a signatory to. Three of the eight goals particularly relate to health namely; Goal 4: *Reduce child mortality*, Goal 5: *Improve maternal health* and Goal 6: *Combat HIV/AIDS, malaria and other diseases*.

10. The Health and social work sector's contribution to the GDP has been declining over the last five years. It accounted for 2.6% in 2004 before declining to 2.5% in 2006 and further declining to 2.4% in 2008. Whereas the objectives of the health sector have been to increase equitable access to health services, improve the quality and responsiveness of services in the sector, improve the efficiency and effectiveness of service delivery, and to enhance the regulatory capacity many challenges have hindered the realization of these objectives.
11. Health sector financing system in Kenya is characterized by a number of challenges such as wide inequality in access to services, major gaps in infrastructure, shortages and inequitable distribution of medical human resources, low levels of predictability of donor funds, poorly coordinated investment and interventions, limited level of protection provided by the National Hospital Insurance Fund (NHIF) (focuses only on hospitalization), health sector allocation accounts for 6.7% of total government expenditure compared to the 15% recommended in Abuja Declaration. Efforts to make health services accessible have been attempted but with very little positive impact.

National health targets Statistics

12. Currently, results from the Kenya AIDS Indicator Survey 2007 (KAIS) and the Kenya Demographic and Health Survey 2008-09 (KDHS) show mixed progress against national health targets and health-related MDGs. The KDHS notes remarkable declines in under-5 and infant mortality rates since 2003, from 115 to 74 and from 77 to 52 per 1,000 live births respectively. The proportion of children fully immunized increased from 64% in 2005/06 to 77% in 2008/09. These gains are believed to be due to improved curative service delivery, intensified immunization campaigns and widespread distribution of insecticide-treated bed nets. If these gains can be sustained, Kenya could be on track of reach the under-5 and infant mortality MDGs. The overall HIV prevalence rate among adults 15-49 years had increased from 6.7% in 2003 to 7.4% in 2007 (Kenya Aids Indicator Survey). However, the recent Kenya Demographic and Health Survey 2008/09 showed that the prevalence has declined to 6.3%. Kenya has had relative success in scaling up access to anti-retroviral treatment. Reproductive and maternal health indicators are less positive. Contraceptive prevalence increased from 39% in 2003 to 46% but is still far below the MDG target of 70%. Use of antenatal care services remains steady at 91.5% but skilled attendance at birth remains low (44%) and well below the target of 90%.

Developing the Social Health Protection Policy

13. High household out-of-pocket spending remains a major barrier to health care access (households are estimated to contribute 36% of total health

expenditure, mainly through out of pocket spending). To curb this, the Committee was informed that the government has developed a Financing Strategy to ensure all Kenyans belong to a health plan and Government takes care of the poor; to establish a Health Benefits and Regulatory Authority and to strengthening NHIF to play a greater role. In this regard, the NHIF's coverage of the informal sector has reached about 500,000 against a target of 7 million. Further, the NHIF is piloting on the Outpatient coverage in Nairobi and Mumias. The NHIF is preparing to roll out to all members once the contributions have been revised

However, the Committee insists that the government can do even better by restructuring and undertaking an institutional review of NHIF to strengthen its role in social health insurance and protection.

Improvement of infrastructure

14. The government ought to give priority to improvement of health infrastructure. In this regard, the Committee heard that in the current financial year 2009/10, the Ministry of Medical Services is implementing 39 large/Medium scale projects with partner support. Some of these projects stretches from 2009 to 2014, including 23 Dutch, Kisii and Kericho (Japanese funded) and Kayole Hospital. In addition, more than 40 Construction and renovation projects wholly funded by GOK are being undertaken. However, there lacks commensurate efforts to strength the referral strategy and communication across all levels of the healthcare delivery system – i.e. from dispensaries to the national referral hospitals. The result is over-burdened referral hospitals and poor referral system.
15. The health development budget is characterized by heavily donor support through grants. This scenario has been a trend which, depending on how one looks at it, could be a bit dangerous. Heavy reliance on donors to this extent in our health sector may be of concern since donor funds cannot be 100% certain. It means that should the donor funds fail to materialize then the sector could collapse. There is need to commit more of local resources in developing health sector.
16. Another issue of concern is the resource pilferage. Studies of public expenditure have shown that only about 45% of resources/funds supposed to be for the lower level facilities actually get there. If well managed these leakages can adequately be used to employ new personnel and equip health centers. Regulation issues also remain a challenge leading to many untrained personnel running pharmacies in the rural areas and even in towns. The Ministry should step up the surveillance to root out quarks from the health services.

Analysis of FY 2010/11 budget allocation to Health sector (kshs Billion)

Ministry	Gross recurrent	Gross development	Gross total
Vote 11: Medical Services	21.212	6,953,874,170	27.539
Vote 49: Public Health & Sanitation	6.972	12.500	19.472
Total	28.1844	18.827	47.011

(Source: KNA Budget Office)

Challenges in the Health Sector

17. The challenges facing the health sector in Kenya include: Poverty (estimated at 46 per cent) remains a major factor affecting ability to maintain health, or seek health services. Also, inadequate human resources: Inadequate physical infrastructure: Weak management systems in health facilities (hospitals): Policies and regulatory frameworks that are in need of review: Increase in non-communicable disease, e.g. cancer, diabetes; gross under-funding of drugs and other medical commodities the HIV/AIDS pandemic. Further, many Health Centres have been upgraded to Sub-District Hospitals without corresponding provision in funding. As a result, most lack basic facilities for a hospital such as theatres, wards, kitchen, staff units and utilities. The facilities are not able to cope with the demand for services of their level. Another challenge in this sector include the heavy burden of pending bills at facilities and the excessive dependence on development partners especially on HIV/AIDS pandemic: Currently 90% of the ministry's budget towards ARVs is donor driven. The Government contribution is only 10% which is not even forthcoming.

CHAPTER II: MINISTRY OF MEDICAL SERVICES

Highlights of the Year's Allocations

18. The total resource requirements for the year, based on the Human Resource Sector Working Group is Ksh. 52,275 million, follows:-
- | | |
|-----------|---------------------|
| a) R.11 : | Ksh. 36,777 million |
| b) D.11 : | Ksh. 15,498 million |
| c) Total: | Ksh. 52,275 million |
19. Out of the expected Ksh. 15,498 of Development Expenditure, the GoK was expected to contribute Ksh. 11,498 million with Development partners expected to contribute Ksh.4 billion.
20. The total allocation is about Ksh. 32,583 million a follows:-
- | | |
|----------------------------------|-----------------------|
| a) R. 11 | Ksh. 25,629.9 million |
| b) D.11 (GoK and Dev. Partners): | Ksh. 6,953.9 million |
21. Out of the Ksh. 6,953.9 allocated to the Development vote, Ksh. 5,017.9 million will be contributed by development partners while only Ksh. 1,936 has been allocated from the government.
22. The total deficit in the Ministry is Ksh. 19,691 million compared to last year's deficit of Ksh. 23.7 billion. This represents about 37% of the total resource requirement.
23. The major deficit areas are as follows:-
- Purchase of ambulances: Ksh. 320 million
 - Purchase of pharmaceuticals: Ksh. 750 million
 - Purchase of non pharmaceuticals: Ksh. 1.21 billion
 - Purchase of equipments : Ksh.605 million
 - Construction of health facilities: Ksh. 2.2 billion
 - Construction and rehabilitation of MTCs: 350 million
 - Pending Bills at health facilities: Ksh. 800 million
 - Furnishing & Equipping of Kayole District Hospital: Ksh.250 million
 - KNH: Ksh. 150 million
 - KEMSA: Ksh. 1.2 billion (including Ksh.800 million for capitalization)
 - Moi Teaching & Referral Hospital : 180 million
24. A comparison with previous year's allocation revealed a slight increase in allocation by 4.3%. However, the Recurrent vote was reduced by 6% (Ksh.1.3 billion) to an allocation of Ksh. 21.8 billion down from Ksh. 23.1 billion in the previous year. It is also worth noting that, even though the Development vote increased from Ksh. 4.5 billion in previous year to Ksh. 6.95 billion, the Development partners are contributing about 72% of the development allocation.

25. The Ministry's absorption capacity was 98% for recurrent while the development vote stood at 69%. The lower rates for the latter were attributed to delays in releasing funds by the exchequer and development partners and procurement regulations.
26. Under the Development Vote, the resource requirement is Kshs.11.5 billion for 2010/11. However, the allocation for the financial year 2010/11 is Kshs.1.9 indicating a financial gap of Kshs.9.6 billion. The Projects that will be given priority in the 2010/11 budget are. Construction and rehabilitating of Hospitals; Purchase of medical equipment; Grants to Parastatals and Procurement of laboratory supplies. The Ministry has, budgeted all funds to health facilities under one line item; Grants to heal facilities amounting to Kshs.8798 million. The Ministry required Kshs.1.3 billion being the allocation to facilities during the 2009/10, but Treasury reduced by Kshs.421 million in 2010/11. The Committee was informed that, due to this shortage, the facilities will, no doubt, be constrained in the provision of efficient health care service delivery.

Distribution of donor

27. The distribution of the proposed funding will be as follows:

PROJECT NAME	SOURCE	2009/10 (Ksh.M)	2010/11 (Ksh.M.)
Construction of Paediatric Clinic	USA	-	200.0
Rehabilitation and Strengthening of 23 Hospitals	NETHERLANDS	118.0	1,100.0
Construction of Kayole Hospital	CHINA	544.0	85.6
Nutrition and Care for HIV/AIDS affected people	WFP	278.3	278.3
Public Private Partnership	ITALY	-	250.0
Rehabilitation of Tharaka District Hospital	ITALY	-	17.1
Rehabilitation of Ahero District Hospital	ITALY	-	18.0
Training of Health Personnel	ITALY	-	6.0
Construction of Adm. Block (Tharaka)-Kituru	ITALY	-	17.0
Construction of Suba DH	ITALY	7.0	-
Rehabilitation of Embu Provincial General Hospital	BADEA	150.0	250.0
Wajir District Hospital	KUWAIT	10.0	450.0
Upgrading of Kenyatta National Hospital	SPAIN	-	302.4
Kenyatta National Hospital	SAUDI FUND	5.0	300.0
Kenyatta National Hospital	BADEA	15.0	200.0
Kenyatta National Hospital	OPEC	0.5	250.0
Avian Flu (Health)	ADB	16.0	4.0

Improvement of facilities in Kisii and Kericho District Hospital	JAPAN	970.4	23.0
Blood Safety Project	JAPAN	62.6	-
Upgrading of Othaya Sub-District Hospital (CPF)	JAPAN	100.0	310.0
Strengthen obstetric fistula management	UNFPA	4.5	7.5
Health sector support programme	DANIDA	108.5	88.5
Development of Health SWAP	KFW-GER	250.0	860.6
TOTAL		2,639.9	5,017.9

- 28. Austerity Measures and previous year's allocations**
- From mid of the financial year 2009/10, the Treasury reduced allocations to all ministries. Consequently, the Ministry of Medical Services operational costs under recurrent vote were reduced by Kshs.100 million while development vote was reduced by Kshs.350 million. The reduction affected the implementation of ongoing projects since some commitments had to be cancelled. (See annexure on affected projects)

RECURRENT EXPENDITURE (R.11)

- 29. Total amount requested for Vote R.11: Twenty one billion, eight hundred and six million Kenya Shillings (Ksh. 21,806,000,000) summarised as follows:**

Sub-Vote	Net Approved Expenditure 2008/2009 (Ksh.)	Estimates 2009/2010		
		Gross Expenditure (Ksh.)	Appropriations in Aid (A.in.A) (Ksh.)	Net Expenditure (Ksh.)
110. Gen. Admin. & Planning	886,013,931	2,708,746,598	24,137,033	2,684,609,505
111. Curative Health	15,836,097,501	12,541,359,565	2,080	12,541,357,485
112. Preventive Medicine & Promotive Health	58,600,593	54,791,884	-	54,791,884
114. Health Training & Research	1,078,719,091	2,294,419,091	1,068,700,000	1,225,719,091
116. Medical Supplies Coordination Units	441,771,691	439,459,282	41,600	439,417,682
117. Kenyatta	3,543,808,818	5,483,808,818	1,900,000,000	3,383,808,818

National Hospital				
118. Moi Referral and T. Hospital	1,276,295,475	2,107,295,475	831,000,000	1,276,295,475
Total	23,121,307,100	25,629,880,713	3,823,880,713	21,806,000,000

(Source: 2010/2011 Estimates)

EXAMINATION OF HEADS (R.11)

Head 310: Headquarter Administrative and Technical Services

Proposed Net Expenditure: Ksh. 601,212,006.00

Appropriations-in-Aid: Ksh. 3,614,001.00

30. From the Estimates, the Committee noted that:-

- (i) various Items under Head 310 would be underfunded. These include a deficit of about Ksh. 1,781,000,000 for Personal emoluments for common cadre upgrading;
- (ii) the allocation for the Head represented a reduction from the 2009/2010 approved expenditure of Ksh. 620.2 million.

The Committee was informed that the reduction was mainly on Fuel Oil Lubricants and Routine Maintenance of Vehicles due to the austerity measures taken by the government in the previous year. The Committee was also informed that the Ministry expects to raise Ksh. 3,614,001.00 as *A.in.A* from sale of inventories, stocks and commodities. Part of the *A.in.A* is payable to the Exchequer.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 601,212,006.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 310 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 3,614,001.00 to finance its operations.

Head 311: Headquarter Administrative and Professional Services

Proposed Net Expenditure: Ksh.220,153,607

Appropriations-in-Aid: Ksh. 2,523,032.00

31. The Committee noted that there is an increase in allocation compared to last year's allocation of Ks. 176.9 million. This was attributed to creation of a new sub-head titled, Gender and Education (006). The Committee was also informed that the *A.in.A* will be realised from sale of inventories, stocks and commodities.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 220,153.607 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 311 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 2,523,032.00 to finance its operations.

Head 314: Health Finance Secretariat

Proposed Net Expenditure: 00.00

32. The Committee noted that no funds had been allocated for this Head which had been allocated Ksh.16.6 million in the previous year.

Head 349: Planning and Feasibility studies

Proposed Net Expenditure: Ksh.15,912,434

33. The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 15,912,434 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 349.

Head 454: National Aids Control Programme.

Proposed Net Expenditure: Ksh.933,347,612.00

34. Whilst appreciating the huge increase in funding by over 900 million, attributable to the proposed increase in allocation for specialised materials and supplies (Item No.2211000), the Committee observed that there is need to harmonise the activities of the National Aids Control Council and those of the Ministry to avoid duplication and to enhance clarity and efficiency in the control of HIV/AIDS.

Nevertheless, the Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 933,347,612.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 454.

Head 456: National Quality Control Laboratories.

Proposed Net Expenditure: 14,842,245.00

Appropriations-in-Aid: Ksh. 18,000,000.00

35. The Committee noted the decrease in gross allocation from the previous year's 15.1 million attributable to decrease in communication supplies and other costs. The Committee also noted that the Minister proposes to raise Ksh. 18 million as A.in.A from sale of stocks and commodities.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 14,842,245.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 456 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 18 million to finance its operations.

Head 555: Nursing Services

Proposed Net Expenditure: Ksh.7,956,844.00

36. The Committee noted that the allocation is almost constant from the previous year, despite requests by the Ministry for additional funds to cater for increased expenditure. The Committee also noted that the Minister for Finance proposes to increase the allocation by only Ksh. 700,000 in the next financial year.

The Committee recommends that the Minister considers increasing the allocation in the next financial year to Ksh. 35,000,000 caters for increased expenditure.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 7,956,844.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 555.

Head 617: Health Standards and Regulatory Services

Proposed Net Expenditure: Ksh. 12,672,520.00

37. The Committee was informed that this is a new Head created for the with the objective of raising the standards of health services and providing for regulatory services.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 12,672,520.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 617.

Head 294: Procurement of Medical Spare Parts Units

Proposed Net Expenditure: Ksh. 00.00

38. The Committee noted that the Minister proposes not to allocate any funds for the items under this Head. It was explained that this is one of the items for which the Ministry would be grossly underfunded.

The Committee recommends that the Minister for Finance considers providing the funds requested by the Minister of Medical services under this Head, in the Supplementary Estimates.

Head 316: Provincial Health Services

Proposed Net Expenditure: Ksh.4,271,814,782

39. The Committee noted the slight increase from the previous year' allocation of Ksh. 4.1 million. The Minister also explained that most of the "non-essential" items under the Head would not be funded.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 4,271,814,782 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 316.

Head 317: District Health Services

Proposed Net Expenditure: Ksh.7,918,258,743.00

40. The Committee noted that there is a reduction of 37% from Kshs.11.987 million in the previous year. The Committee was informed that this was due to reductions in *Personnel costs* and *Specialized materials and supplies, purchase of office and general supplies and printing and advertising services*. The Committee was concerned that since districts have increased in number, district health services will therefore expand; it would have been prudent to increase the allocation on the Head.

The Committee also expressed concern that the Minister has proposed to reduce allocation on *specialised materials and supplies* while a visit by the previous Committee to various hospitals revealed that the facilities were lacking in specialised supplies. The Committee was also of the view that the newly created sub-head on *Monitoring and Evaluation* needs to be harmonised with that created to avoid duplication of services.

The Committee recommends that the Minister considers increasing the allocation on the Head in the next financial year.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 7,918,258,743.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 317.

Head 318: Mental Health Services

Proposed Net Expenditure: Ksh.239,050,978.00

41. Whilst noting that there is a decrease in allocation to Ksh. 239 million from Kshs.289.9 million in 2009/10 mainly on account of utilities, domestic travel, communication supplies services and office and general supplies, the Committee expressed concern that the continued underfunding of the Mental Health Services would lead to deterioration of services at the Mathari Hospital. It is recommend that the Minister considers increasing the funding of the Mental Health Services during the 2010/2011 supplementary estimates.

The Committee is however agreeable to the proposal by the Minister that a sum not exceeding Ksh.239,050,978.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 318.

Head 320: Spinal Injury Hospital

Proposed Net Expenditure: Ksh.59,857,666.00

Appropriations-in-Aid: Ksh. 2,080.00

42. The Committee noted that since 2006, the Minister has been allocating an almost constant figure of Ks, 70 million to the Spinal Injury Hospital. However, in the 2010/2011 Estimates, the Minister has proposed to reduce this amount, notwithstanding the fact that it the previous allocation has always been said to be inadequate. In this regard, it is recommend that the Minister considers increasing the funding of the Hospital during the 2010/2011 supplementary estimates

The Committee also observed that the A.in.A of a. two thousand collected by the Hospital may not add any value to the many needs of this Head.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh.59,857,666.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 320 456 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 2,080.00

Head 321: Biomedical/Hospital Engineering

Proposed Net Expenditure: Ksh.17,989,975.00

43. The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 17,989,975.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 321.

Head 351: Health Services

Proposed Net Expenditure: Ksh.25,555,341.00

44. The Committee was concerned that there is need for fair distribution of personnel to all health services across the country. The Ministry should also put in place incentives to encourage staff to work in hardship areas.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 25,555,341.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 351.

Head 618: Health Services

Proposed Net Expenditure: Ksh.8,830,000.00

45. The Committee was informed that this is a new Head created for with the aim of enhancing the delivery of curative and clinical services at the Ministry. The Committee welcomed the creation of the head but cautioned that the Ministry should not spend most of the funds on the Head on administrative, personnel, and travel costs.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. Ksh.8,830,000.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 617.

Head 322: Division of Mental Health

Proposed Net Expenditure: Ksh.8,758,447.00

46. The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 8,758,447.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 322.

Head 346: Radiology Services

Proposed Net Expenditure: Ksh.46,033,437.00

47. The Committee noted with concern the reduction in allocation of Kshs.47.0 million from Kshs.63.3 million in 2008/09. The reduction was on account of nil allocation to the item 'routine maintenance – other assets'. The item had been allocated Ksh. 18.02 million in 2008/09. The concern is on maintenance of the items the radiology services unit given that the budget has been reduced to zero and still projected to be zero for the next three years. The Committee also noted that the Minister had allocated Ksh.47.5 million on this item in the previous year and project to allocate Ksh.52.0 million and 57.7 million in the next two years.

The Committee recommends that the Minister considers allocating sufficient funds to the items of this Head in the next financial year.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 46,033,437.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 346.

Head 340: Kenya Medical Training College

Proposed Net Expenditure: Ksh.1,078,719,091.00

Appropriations-in-Aid: Ksh. 1,225,719,091.00

48. The Committee noted that the grant to KMTTC had increased from the previous years allocation of Kshs. 931.72 million as in the previous year. The Committee also noted the increased A.in.A attributable to contribution due to student enrolment and development partners. Owing to previous audit qualifications by the Controller and Auditor General on the past Accounts of the College, especially on procurement, the Committee recommends that the Ministry and the Chief Executive ensured that the funds and those collected under *A.in .A* are used in accordance with these estimates and government regulations.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. Ksh.1,078,719,091.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 340 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 1,225,719,091.00 million to finance its operations.

Head 355: Kenya Medical Supplies Agency

Proposed Net Expenditure: Ksh.344,100,000.00

49. The Committee noted that the grant to KEMSA remained constant at Kshs. 344.1.Million. This is despite the recommendations to restructure and capitalise KEMSA in order to enhance service delivery. Capitalization of KemsA will enable it operate as a non-profit self sustain organization that will procure, warehouse, and distribute medical commodities to public health facilities in an efficient and responsive manner. The Committee noted that the Capitalization of the Agency which was due from July, 2009 needed about Ksh.800 million. It was to involve the transfer of all commodities procured by government and held in KEMSA warehouse by the end of 2009. In this regard, the government was required to provide additional funding of Ksh.800 million to cater for infrastructure development and supply chain system. The Committee was concerned that the government does not seem to be committed to the endeavour since the funds are not even in the projected estimates for the next three years.

The Committee was also concerned that the government does not seem to be committed to its undertaking of consolidation of all funds for purchase of drugs into one basket. This is also contained in a paper developed by the Ministry of Medical Services and a Hospital Service Fund (HSF) gazette notice which has been forwarded to the Ministry of Finance for gazette. The focus will be to streamline financing flow to medical services and transform hospitals into procurement units. In this regard, it is recommend that the

Minister considers increasing the funding of KEMSA during the 2010/2011 supplementary estimates.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh.344,100,000.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 355.

Head 356: Pharmacy Service

Proposed Net Expenditure: Ksh.95,317,682.00

Appropriations-in-Aid: Ksh. 41,600

50. The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 95,317,682.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 356 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 41,600.00 to finance its operations.

Head 315: Kenyatta National Hospital

Proposed Net Expenditure: Ksh.3,583,808,818.00

Appropriations-in-Aid: Ksh. 1,900,000,000.00

51. The Committee was also concerned that the Kenyatta National Hospital continues to draw huge allocations from the exchequer at the expense of basic medical healthcare. The institution should be encouraged to be self reliant and reduce its reliance on the exchequer. Moreover the government should develop a comprehensive health insurance policy that will enable all Kenyans to access quality and affordable medical care. This will reduce pressure from KNH and other referral hospitals. The Committee also noted the considerably huge amount of A.in.A expected to be raised by the Hospital during the year, but hastened to add that the Hospital should put in place measures to curb the reported losses of funds collectable from patients.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 3,415,808,818.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 315 that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 1,900,000,000.00 finance its operations.

Head 623: Moi Teaching and Referral Hospital

Proposed Net Expenditure: Ksh.1,276,295,475.00

Appropriations-in-Aid: Ksh. 831,000,000.00

52. The Committee noted that the allocation was constant as that of the previous three years. The institution should be encouraged to be self reliant and reduce reliance on the exchequer.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 1,276,295,475.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 623 that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 831,000,000.00 finance its operations.

DEVELOPMENT EXPENDITURE (D.11)

53. Total amount requested for Vote D.11: Two billion, three hundred and eleven million, sixty seven thousand, one hundred and seventy Kenya Shillings (Ksh. 2,311,067,170.00) summarised as follows:

Sub-Vote	Net Approved Expenditure 2009/2010 (Ksh.)	Estimates 2010/2011		
		Gross Expenditure (Ksh.)	Appropriations in Aid (A.in.A) (Ksh.)	Net Expenditure (Ksh.)
110. Gen. Admin. & Planning	56,000,000	328,500,000	92,500,000	236,000,000
111. Curative Health	1,674,200,000	5,332,974,170	3,497,907,000	1,835,067,170
114. Health Training and Research	100,000,000	100,000,000	-	100,000,000
116. Medical Supplies Coordination Units	20,000,000	20,000,000	-	20,000,000
117. Kenyatta National Hospital	50,000,000	1,102,400,000	1,052,400,000	50,000,000
118. Moi Referral and T. Hospital	70,000,000	70,000,000	-	70,000,000
Total	1,970,200,000	6,953,874,170	4,642,807,000	2,311,067,170

Source: 2010/2011 Estimates)

EXAMINATION OF HEADS (D.11)

Head 310: Headquarter Administrative and Technical Services

Proposed Net Expenditure: Ksh.174,000,000.00

Appropriations-in-Aid: Ksh. 68,500,000.00

54. The Committee noted the increased allocation to Kshs. 174 million from Kshs.24 million in 2008/09 mainly on account of '*other operating expenses*' and *refurbishment of buildings*. The Minister also proposes to inject Ksh.150 million on Construction of Buildings. The head is particularly financed by grants from development partner, DANIDA and other international organizations as A.in.A

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 174,000,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 310 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 68,500,000 to finance its operations.

Head 311: Headquarter Administrative and Professional Services

Appropriations-in-Aid: Ksh. 4,000,000.00

55. The Committee noted the reduced allocation from of Ksh.4 million from Ksh. 16 million in 2009/2010 all of which is grant (direct payment) from foreign government for purchase of specialized equipment and materials. This was attributable to the end of the grant from a development partner, ADF of Ka. 16 million.

The Committee is agreeable to the proposal by the Minister that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 4,000,000 to finance *Headquarter Administrative and Professional Services* under Head 311.

Head 456: National Quality Control Laboratories

Proposed Net Expenditure: Ksh.62,000,000.00

56. The Committee was noted that, as per its recommendations in its previous report, the Minister has proposed to increase allocation to the National Quality Control Laboratories in the year 2010/2011 and also in the medium term. The NQCL had been allocated a total of Ksh.32 million in the previous year. The increase in expenditure on specialised materials and supplies and on purchase of specialised plant and machinery would go along way in enhancing the capacity of the NQCL to control quality of medical services.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 62,000,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 456.

Head 316: Provincial Health Services

Proposed Net Expenditure: Ksh.215,000,000.00

Appropriations-in-Aid: Ksh.250,300,000.00

57. The Committee noted the huge gross increase in proposed expenditure of Kshs.445.3 million from 200 million in the previous year on account of construction of building and purchase of specialized plant. The funds for construction of building (Ksh.250,000,000) are from BADEA as direct payment and the beneficiary is Embu District Hospital. The Committee was however concerned that the project at Embu Dist.Hospital has since stalled and reportedly, the Ministry of Public Works has contributed to the delay in completion of the building. This was ascertained during the Committee's visit to the facility in May, 2010.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 215,300,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 316 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 250,000,000 to finance its operations.

Head 317: District Health Services.

Proposed Net Expenditure: Ksh.1,619,767,170.00

Appropriations-in-Aid: Ksh. 3,247,907,000.00

58. The Committee noted the increased gross expenditure of Kshs.5,089.5 million from Ksh. 2,245.4 million in 2008/09 mainly on account of construction of buildings. The Committee was informed that the A.in.A would be raised from Grants from international organizations and foreign governments and foreign borrowing.

The Committee was taken through the list of district hospitals facilities to benefit from the Kshs 3.0 billion for this construction. It is worth noting that some forty nine constituencies do not have district hospital and would therefore not benefit from the funds. The Committee was also informed that the allocation criteria is based on five variables of *poverty, bed utilization, out-patient cases, accident prone areas and fuel costs.*

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 1,619,767,170.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 317 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 3,247,907,000.00 to finance its operations.

Head 340: Kenya Medical Training Centre

Proposed Net Expenditure: Ksh.100,000,000

Appropriations-in-Aid: Ksh.1,548,152.00

59. The Committee was noted the proposed constant gross expenditure proposed for KMTC. The Committee was informed that the Centre would also receive grants from international organizations amounting to Ksh.1.45 million.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 100,000,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 340 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to 1,548,152 to finance its operations.

Head 355: Kenya Medical Supplies Agency

Proposed Net expenditure: Ksh.20,000,000

60. The Committee noted the reduction of allocation to KEMSA from 68.3 million in the previous year 2008/2009 despite recommendations for capitalization of the Agency.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 20,000,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 355

Head 315: Kenyatta National Hospital

Proposed Net Expenditure: Ksh.50,000,000

Appropriations-in-Aid: Ksh.1,052,400,000.00

61. The Committee noted the increased in A.in.A for the Hospital from the previous year's figure of Ksh. 20,500,000.00 and the allocation of Ksh.

50,000,000 (GoK) for installation of lifts in the Hospital. While appreciating the need to install new lifts at KNH, the Committee was concerned that, in the past, funds meant for installation or refurbishment of lifts have been misused.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 50,000,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 315 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 1,052,400,000.00 to finance its operations.

Head 623: Moi Teaching and Referral Hospital

Proposed Net Expenditure: Ksh.70,000,000

62. The Committee noted the constant allocation for the hospital of Ksh.70 million intended for purchase of a water treatment plant for the Mother-Baby Hospital at MT&TH.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 70,000,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 623.

CHAPTER III: MINISTRY OF PUBLIC HEALTH AND SANITATION

63. The total resource requirements for the year 2010/11 was Ksh. 21 billion excluding funds for the economic stimulus program compared to the allocation of Ksh.19.47 billion for the year 2009/2010.
64. The total allocation is Ksh. 22,571,753,181 the breakdown is as follows; Recurrent Budget was Ksh. 9,594,280,100 while Development Budget Ksh. 12,977,473,078;
65. A slight improvement in the Ministry's budget for FY 2010/11 of Ksh. 1,495,700,829 in comparison to its total resource requirement;
66. The total allocation for FY 2009/10 was Ksh. 19.1 billion compared to Ksh. 22.5 Billion for FY 2010/11. Resulting in an increase of 3,412,341,687 or 17.8%;
67. The increase was as a result of the Economic Stimulus Program and the Personnel Emolument figures to cater for the cost of transferring staff from the Ministry of Medical Services payroll;
68. The Government funded projects under development vote was reduced by Ksh. 1,622,499,957. This reduction of 31.6% is on the Economic Stimulus Programme from the FY 2009/10 allocation of 5.1 billion to Ksh. 3.6 billion;
69. There is an increase of 3.9 billion on Expenditure provision for PE for FY 2010/11. These is to cover the PE for health workers currently in the Ministry of Medical Services payroll to move to Ministry of Public Health and Sanitation;
70. The Ministry's absorption capacity was 96% in 2009/2010 for Recurrent Expenditure. The Development budget recorded an average performance with an overall absorption capacity of 52% in the year 2009/2010. This was explained by delays in the implementation of the Economic Stimulus Program, GAVI funds reflected in the budget for FY 2009/10 was not remitted, and finally reporting by development partners especially in A-IN-A was slow;
71. Major deficit areas are in; Personal Emoluments (Ksh. 506 million to cater for promotions of staff, Ksh. 334 million for creation of additional positions for health workers, Ksh. 234,948,000 for recruitment of the third batch of 750 health workers, and 64,669,740 for absorption of staff.), Health Sector Service Fund, Drugs, Non- Pharmaceuticals, KEMRI, Government Chemist, Radiation Protection Board, Emergency Relief, Community Health Strategy, Disease Surveillance and Response, Malaria Control, National Public Health Laboratory, Contraceptives Commodities, Reproduction Health, Distribution of Contraceptives commodities and Vaccines;

72. The allocation for MOPHS for new projects is Ksh. 651 million the breakdown is as follows: Ksh. 51m from the International Development Agency for the National Public Health Laboratory and Ksh. 600m for the Health Sector Services Fund from Danida;
73. The projected resource requirement for FY 2010/11 for the Ministry's Strategic Plan was Ksh. 53 billion compared to the allocation of Ksh.22.5 billion for the year 2010/11 or 42% of the total resource outlay required to put the Ministry on track with regard to implementation of the Strategic Plan.

RECURRENT EXPENDITURE (R.49)

74. Total amount under Vote R.49: Nine billion, five hundred and thirty five million, two hundred and two thousand, eight hundred shillings. (Ksh. 9,535,202,800) summarised as follows:

Sub-Vote	Net Approved Expenditure 2009/2010 (Ksh.)	Estimates 2010/2011		
		Gross Expenditure (Ksh.)	Appropriations in Aid (A.in.A) (Ksh.)	Net Expenditure (Ksh.)
490. Gen. Admin. & Planning	1,367,727,110	1,530,974,178	-	1,530,974,178
491. Preventive Medicine & Promotive Health	3,215,527,732	3,259,031,403	20,004,240	3,239,027,163
492. Disease Control Services	117,734,651	122,782,897	6,169,860	116,613,037
494. Primary Health Services	2,576,437,986	4,634,299,126	-	4,634,299,126
495. Technical Support Services	19,572,521	47,192,496	32,903,200	14,289,296
Total	7,297,000,000	9,594,280,100	59,077,300	9,535,202,800

Source: 2009/2010 Estimates)

EXAMINATION OF HEADS (R.49)

Head 114: Headquarter Administrative and Technical Services

Proposed Net Expenditure: Ksh.330,974,178

75. The Committee noted the decreased allocation of Kshs. 330.9 million from Kshs. 342.7 million in 2009/10. Significant reduction in net expenditure was

on account of Preventive Health Management. Reduction in estimates for 95% of the line items with a corresponding increase in the Medium Term to Kshs 385.2 million and Kshs 406 million. Purchase of office furniture has been reduced 447%, however is set to increase in the MT to the same amount. The planning and research unit has a net allocation Kshs.3.7m from no allocation last FY.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 330,974,178 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 114.

Head 643: Kenya Medical Research Institute

Proposed Net Expenditure: Ksh.1,200,000,000

76. The Committee noted the increased allocation of Ksh. 1,200,000,000 from Ksh.1, 025,000,000 to KEMRI.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh.1,200,000,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 643.

Head 323: Environmental Health Services

Proposed Net Expenditure:Ksh.2,278,758,485

Appropriations-in-Aid: Ksh. 600,000

77. The Committee noted the decreased allocation. Worth noting is the reduction in expenditure on specialized materials and supplies on environmental health from Kshs105.7million to Kshs51million and sanitation services by 55.6%.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 2,278,758,485 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 323 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 600,000 to finance its operations.

Head 325: Communicable Disease Control

Proposed Net Expenditure:Ksh.115,348,964

78. The Committee noted the increased allocation of Ksh. 115,348,964 from Ksh. 69,852,177. Basic salaries and allowances for the vote head have gone up to Kshs59.5million from Kshs 26.8million in the previous year.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 115,348,964 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 325.

Head 326: Port Health Control

Proposed Net Expenditure:Ksh.51,893,047

Appropriations-in-Aid: Ksh. 2,184,000

79. The Committee noted a general increase in net expenditure from Kshs.49.3million to Kshs.51.8million with the substantial amount allocated to salaries.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 51,893,047 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 326 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 2,184,000 to finance its operations.

Head 327: Nutrition

Proposed Net Expenditure:Ksh.207,660,424

80. The Committee noted the increase from kshs. 207.6 million in 2010/11 from Kshs187.7million with much of the increment allocated to salaries.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 207,660,424 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 327.

Head 328: Family Planning, Maternal and Child Health

Proposed Net expenditure:Ksh.104,113,760

81. The Committee observed that there was increase from 97.7 million in the previous year's allocation to Ksh. 104.1 million which is attributed to increment in budget allocation on basic salaries

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 104,113,760 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 328.

Head 330: Health Education

Proposed Net Expenditure:Ksh.90,848,417

Appropriations-in-Aid: Ksh. 272,400

82. The Committee noted the significant decrease toKsh. 90.84 million from 117.8 million in 2009/2010.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 90,848,417 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 330 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 272,400 to finance its operations.

Head 331: National Public Health Laboratory

Proposed Net Expenditure: Ksh. 84,705,389

Appropriations-in-Aid: Ksh. 2,080,000

83. The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 84,705,389 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 331.

Head 347: Health Information Systems

Proposed Net Expenditure: Ksh. 13,734,315

84. The Committee noted that there was a decrease in allocation of Ksh. 13.7 million from 14.3 million.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 13,734,315 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 347.

Head 509: Control of Malaria

85. The Committee noted that this is a newly introduced Head with budget of Kshs.7.1 million, an increment of 41% in the MT.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 7,107,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 509.

Head 510: Kenya Expanded Programme on Immunization

Proposed Net Expenditure: Ksh. 119,896,500

86. Whilst noting the slight decline to 119 million from 125 million in the previous year, the Committee observed that the very crucial budget lines that include advertising, information supplies, and specialized materials and supplies have an allocation of Kshs.33 million and Kshs.67 million.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 119,896,500 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 510.

Head 518: Food Control Administrative Services

Proposed Net Expenditure: Ksh. 18,978,304

Appropriations-in-Aid: Ksh. 14,867,840

87. The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 18,978,304 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 518 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 14,867,840 to finance its operations.

Head 622: National Leprosy and Tuberculosis Control

Proposed Net Expenditure: Ksh. 129,796,020

88. The Committee noted the slight decrease of Ksh.129.7 million from Ksh. 130.2 million in 2009/10. An allocation of Ksh.120 million to specialized materials and supplies with an increment of Ksh.30 million in the Medium Term

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 129,796,020 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 622.

Head 720: Vector Borne Disease Control

89. The Committee noted that this is a newly introduced Head with budget of Kshs. 8.8 million.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 8,837,500 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 720

Head 778: Special Global Fund

Proposed Net Expenditure: Ksh.2,889,038

90. The Committee noted a major decrease of Ksh. 2.8 million from 7.4 million in 2009/10.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 2,889,038 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 778.

Head 780: Special Global Fund-Malaria

Proposed Net Expenditure: Ksh.4,460,000

91. The Committee observed a decrease of Ksh. 4.4 million from Ksh. 7.1 million in the FY 2009/10. Reduced expenditure on specialised materials from Kshs4 million to Kshs 2.7million

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 4,460,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 780.

Head 113: Government Chemist

Proposed Net Expenditure: Ksh.116,613,037

Appropriations-in-Aid: Ksh. 122,782,897

92. The Committee noted the reduction in the Kshs.116.6 million from 117.7 million in 2009/10 on account of specialised materials and supplies has increased by Kshs 3 million and is expected to increase even further in the MT to Kshs 19 million.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 116,613,037 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 113 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 122,782,897 to finance its operations.

Head 312: Provincial Administration and Planning

Proposed Net Expenditure: Ksh.570,496,710

93. The Committee noted the increased allocation to 570.4 million from 232.9 million mainly on account of basic salaries have increased to Kshs 283 million from Ksh. 150.6 million.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 570,496,710 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 312.

Head 335: Rural Health Centres and Dispensaries

Proposed Net Expenditure: Ksh. 3,955,746,259

94. The Committee noted that expenditure on rural health centres has also increased to Ksh.3.95 Billion from Ksh.2.23 Billion, with much of the allocations going to basic salaries and specialised materials at Kshs1.6 Billion from Ksh.447.2 million. Much as expenditure on specialised materials and supplies reduced substantially from Ksh.1.1 million to Ksh.1.0 million it's expected to increase to Kshs. 1.1 in the Medium term.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 3,955,746,259 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 335.

Head 336: Rural Health Training and Demonstration Centres

Proposed Net Expenditure: Ksh.108,056,157

95. The Committee noted an increase of Ksh. 108,056,157 from Ksh. 106,650,209.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 108,056,157 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 336.

Head 334: Radiation Protection Board

Proposed Net Expenditure: Ksh.14,289,296

Appropriations-in-Aid: Ksh. 32,903,200

96. The Committee noted the increase in allocation of Ksh.14.2 million from 19. 5 million in 2009/10.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 18,454,241.00 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 334 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 32,903,200 to finance its operations.

DEVELOPMENT EXPENDITURE (D.49)

97. Total amount under Vote D.49: Seven billion, eight hundred and forty eight million, eight hundred and ninety two thousand, five hundred and forty shillings. (Ksh. 7,848,892,540) summarised as follows:

Sub-Vote	Net Approved Expenditure 2008/2009 (Ksh.)	Estimates 2009/2010		
		Gross Expenditure (Ksh.)	Appropriations in Aid (A.in.A) (Ksh.)	Net Expenditure (Ksh.)
490. Gen. Admin. & Planning	75,000,000	3,785,000,000	-	3,785,000,000
491. Preventive Medicine & Promotive Health	1,879,086,475	4,876,047,510	2,139,464,000	2,736,583,510
492. Disease Control Services	10,300,000	27,200,000	-	27,200,000
494. Primary Health Services	6,337,719,790	4,189,225,571	2,989,116,541	1,200,109,030
495. Technical Support Services	134,970,935	100,000,000	-	100,000,000
Total	8,437,077,200	12,977,473,081	5,128,580,541	7,848,892,540

(Source: 2010/2011 Estimates)

EXAMINATION OF HEADS (D.49)

Head 114: Headquarter and Administrative Services

98. The Committee noted that this is a newly introduced Head with budget of Kshs.3,636,000,000.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 3,636,000,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 114

Head 643: Kenya Medical Research Institute

Propose Net Expenditure: Ksh.149,000,000

99. The Committee noted the increase of Ksh. 149,000,000 from Ksh. 75,000,000 in the FY 2009/2010 .

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 149,000,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 643.

Head 323: Environmental Health Services

Proposed Net Expenditure: Ksh. 1,335,244,000

Appropriations-in-Aid: Ksh. 1,221,464,000

100. The Committee noted the increase from 730,198,928 in 2009/10 to Ksh. 1,335,244,000 with much of the difference attributed to printing, advertising and information supplies allocated Kshs 536.7million up from 60.8million.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 1,335,244,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 323 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 1,221,464,000 to finance its operations.

Head 327: Nutrition

Appropriations-in-Aid: Ksh.69,260,973

101. The Committee noted a decrease in allocation of Ksh. 69,260,973 from Ksh. 134,929,000 in the previous year.

The Committee is agreeable to the proposal that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 69,260,973 to finance its operations.

Head 328: Family Planning, Maternal and Child Health

Proposed Net Expenditure: Ksh. 1,115,095,000

Appropriations-in-Aid: Ksh. 493,000,000

102. The Committee noted the decrease in gross allocation to Kshs.1.115 million from Ksh. 1.28 million in 2009/10 due to cuts in specialised materials and supplies by Kshs 166million.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 1,115,095,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 328 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 493,000,000 to finance its operations.

Head 331: National Public Health Laboratory Services

103. The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 51,000,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 331.

Head 347: Health Information System

Proposed Net Expenditure: Ksh. 15,000,000

104. The Committee is agreeable to the proposal that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 15,000,000 to finance its operations.

Head 510: Kenya Expanded Programme Immunization

Proposed Net Expenditure: Ksh. 691,564,000

105. The Committee noted that the Net expenditure increased from Kshs 506 million to Kshs 691.5million. Ksh.107 million is to be spent on capital grants and transfers. Specialised material was allocated Kshs 231.6 million, same amount as FY2009/10

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 691,564,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 510.

Head 778: Special Global Fund

Proposed Net Expenditure: Ksh. 32,752,200

106. The Committee noted the decreased allocation to kshs.32.7 million from 47.4 million in 2009/10.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 36,230,640 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 778.

Head 779: Special Global Fund-TB

Proposed Net Expenditure: 199,628,953

107. The Committee noted the increase to 199.6 m from 92m in 2009/10. Kshs 42.9million allocated to transfer grants and subsidies. Hospitality supplies and services increased by Kshs 18million while specialised materials cut by Kshs 5million to Kshs 15million.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 199,628,953 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 779.

Head 780: Special Global Fund-Malaria

Propose Net Expenditure: Ksh. 2,736,583,510

Wrist noting was the considerable increase in allocation from the previous year's Ksh. 1.8 billion with specialised supplies and materials expected to receive Kshs 454.8million up from Kshs 35million.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 2,736,583,510 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 780.

Head 133: Government Chemist

Proposed Net Expenditure: 27,200,000

108. The Committee noted the increase to Ksh 27m from 10m in the previous year. particularly for refurbishment of the buildings.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 27,200,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 133.

Head 335: Rural Health Centres and Dispensaries

Proposed Net Expenditure: Ksh. 4.189,225,571

Appropriations-in-Aid: Ksh.2,989,116,541

109. The Committee noted that Gross expenditure reduced to Kshs 4.1 billion up from Kshs 7.5billion.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 4.189,225,571 be approved for allocation to the Ministry for

the expenditure proposed on the items under Head 335 and that the Ministry be allowed to raise Appropriations-in-Aid amounting to Ksh. 2,989,116,541 to finance its operations.

Head 334: Radiation Protection Board

Net Expenditure: 100,000,000

110. The Committee noted that the allocation of Kshs 100million is earmarked for construction of building.

The Committee is agreeable to the proposal by the Minister that a sum not exceeding Ksh. 100,000,000 be approved for allocation to the Ministry for the expenditure proposed on the items under Head 334.

Other issues of concern in the Health Sector

111. Vision 2030 needs the budget to be realigned to preventive and promotive care but this has not happened.
112. Few resources are allocated to rural areas yet most of country's population live there. Currently most of the sector budget is consumed in the urban areas (70%) leaving a paltry 30% for the rural areas where 80% of the population live;
113. Some rural health facilities have been built using CDF but are lying idle. More long-term strategies needed so that the country does not build more facilities while existing ones are not operational. Coordinated development of health facilities needs to be streamlined to equip and staff health facilities constructed under by communities and CDF;
114. About 70% of sick people visit hospitals suffering from preventable illnesses. The budget should be shifted so that preventive measures get more resources. There is need for more effective regulatory framework in health. The Minister should fund the rural areas adequately and also, improve all Hospitals so as to reduce pressure on the referral and Provincial Hospitals;
115. Declining health budget against Abuja Declaration commitment that health should get 15% of the national budget. Ministry of Health should carry out a study to determine the actual expenditure in health sector in Kenya taking into account funds not passing through government machinery;
116. During the Meetings, the the Committee was also informed that the immediate requirements budget for the control and monitoring of the spread of the H1N1 Virus (Swine Flu) requires Ksh.57 million, which may not have been budgeted for as an specific Item in the 2009/2010 Estimates.

CHAPTER IV: RECOMMENDATIONS

SPECIFIC RECOMMENDATIONS:

117. The Committee recommends:-

Vote:R.11

- (i) That, the proposal by the Minister to withdraw from the Consolidated Fund a sum of Twenty one billion, eight hundred and six million Kenya Shillings (Ksh. 21,806,000,000) for Recurrent Expenditure under the Ministry of Medical Services, be approved and that the Ministry be allowed to raise Three billion, eight hundred and twenty three million, eight hundred and eighty thousand, seven hundred and thirteen Kenya Shillings (Ksh.3,823,880,713) as Appropriations-in-Aid to finance its operations.

Vote:D.11

- (ii) That, the proposal by the Minister to withdraw from the Consolidated Fund a sum of Two billion, three hundred and eleven million, sixty seven thousand, one hundred and seventy Kenya Shillings (Ksh. 2,311,067,170) for Development Expenditure under the Ministry of Medical Services, be approved and that the Ministry be allowed to raise Four billion, six hundred and forty two million, eighty hundred and seven thousand Kenya Shillings (Ksh. 4,642,807,000) as Appropriations-in-Aid to finance its operations;

Vote:R.49

- (iii) That, the proposal by the Minister to withdraw from the Consolidated Fund a sum of Nine billion, five hundred and thirty five million, two hundred and two thousand, eight hundred Kenya Shillings (Ksh. 9,535,202,800) for Recurrent Expenditure under the Ministry of Public Health and Sanitation be approved and that the Ministry be allowed to raise Fifty nine million, seventy seven thousand, three hundred Kenya Shillings (Ksh. 59,077,300) as Appropriations-in-Aid to finance its operations.

Vote:D.49

- (iv) That, the proposal by the Minister to withdraw from the Consolidated Fund a sum of seven billion, eight hundred and forty eight million, eight hundred and ninety two thousand, five hundred and forty only Kenya Shillings (Ksh. 7,848,892,540) for

Development Expenditure under the Ministry of Public Health and Sanitation be approved and that the Ministry be allowed to raise Five billion, one hundred and twenty eight million, five hundred and eighty thousand, five hundred and forty one Kenya Shillings (Ksh. 5,128,580,540) as Appropriations-in-Aid to finance its operations.

GENERAL RECOMMENDATIONS.

118. The Committee also recommends:-

(i) Affordable health/medical insurance

The Government should, through the National Hospital Insurance Fund, introduce an affordable medical insurance policy for all.

(ii) Increased funding to facilities

Adequate allocation to the health sector as a proportion of total expenditure by the government should be initiated in order that the quality of service should be improved. This allocation should not only be used to support every day running of the facilities, but should also be tailored to support specialised services in order to ease the pressure on the Kenyatta National Hospital. For instance, the Committee noted that if a functioning renal unit was in place in every provincial general hospital, patients from afar would save on travelling expenses to the capital this would greatly improve the quality of their lives. ICU facilities should also be devolved to the District and Provinces in order to ease pressure on referrals hospital.

(iii) The Abuja Declaration

The Government should fully implement the Abuja Declaration and commit to allocating at least 15 per cent of the annual national budget to the improvement of the health sector.

(iv) Medical Supplies

There is need to streamline delivery of supplies by KEMSA by setting up a distribution structure with the capacity to reach all public Hospitals, Rural Health Centres and Dispensaries throughout the country.

(v) The Maputo plan of Action

The Government should implement fully the Maputo Plan of Action which aims at : integrating HIV/AIDS services into sexual and reproductive health and rights; promoting family planning as a crucial factor in attaining the Millennium

Development Goals; supporting the sexual and reproductive health needs of adolescents and young people as a key SRH component; addressing unsafe abortion through family planning; delivering quality and affordable health services to promote safe motherhood, child survival, and maternal, newborn and child health; and adopting strategies that would ensure reproductive health commodity security.

(vi) The MDGs on Health

The Government should recommit itself to the implementation of the Millennium Development Goals 4 (Reducing child mortality), 5 (Improving maternal health) and 6 (Combating HIV/AIDS, malaria and other diseases).

(vii) Vision 2030, MTEF and Strategic Plans

The Committee also recommend that future allocations to the sub-sector be based the Ministries Strategic Plans, the Medium Term Expenditure Framework (MTEF) and the Vision 2030.

_____end_____

ANNEXURES

PUBLIC HEALTH AND SANITATION

**MINISTRY OF PUBLIC HEALTH & SANITATION
MODEL HEALTH CENTRES FOR EACH CONSTITUENCY**

1. CENTRAL PROVINCE	
CONSTITUENCY	NAME OF THE MODEL HEALTH FACILITY
NDARAGWA	Subuku Disp
OLKALOU	Gatimu Disp
KIPIPIRI	Ndemi Disp
KINANGOP	Bamboo Disp
KIENI	Mweiga HC
MATHIRA	Kiamabara Disp
MUNICIPALITY	Karia H/C
TETU	Ihururu Disp.
OTHAYA	Kamoko H/C
MUKURWEINI	Mukurweini H/C
LARI	Karatina Disp
KIKUYU	Thigio Disp
LIMURU	Limuru H/C
KIAMBAA	Gathanga Disp.
GITHUNGURI	Githunguri H/C
MWEA	Thiba Disp.
KIRINYAGA CENTRAL	Kangaita Disp
NDIA	Kibirigwi Disp
GICHUGU	Kiamutugu Disp
JUJA	Gachororo Disp
GATANGA	Mukurwe Disp
GATUNDU NORTH	Gakoe Disp
GATUNDU SOUTH	Kiganjo H/C
KIHARU	Kambirwa Disp
KANGEMA	Gikui Disp
MATHIOYA	Nyangiti Disp
MARAGUA	Kaharo H/C
KANDARA	Kandara H/C
KIGUMO	Kigumo H/C

2. COAST PROVINCE	
TAVETA	Rekeke CDF H/C
KINANGO	Mnyenzi Disp
MSAMBWENI	Lunga Lunga H/C
MVITA	Kingorani Disp
KISAUNI	Maweni H/C
GANZE	Ganze H/C
GALOLE	Wenje Disp
KALOLENI	Gotani Disp
LAMU WEST	Wito H/C
LAMU EAST	Kizingitini Disp
LIKONI	Mrima H/C
CHANGAMWE	Changamwe H/C
MATUGA	Matuga H/C
WUNDANYI	Mgange-Dawida Disp
VOI	Maungu Disp.
MWATATE	Bangale Disp.
BURA	Bura H/C
GARSEN	Semikaro Disp.
MAGARINI	Gongoni Disp.
MALINDI	Baolala Disp.
BAHARI	Matsangoni Disp.

3. EASTERN PROVINCE

TIGANIA WEST	Mwerokanga Disp.
TIGANIA EAST	Karama Disp
THARAKA	Gatunga H/c
ISIOLO NORTH	Gafarsa Disp
NORTH HERR	Kalacha H/C
LAISAMIS	Laisamis Shopping Centre
MOYALE	Godoma H/C
NITHI	Kieni H/C
IMENTI CENTRAL	Kaongo H/C
IMENTI SOUTH	Kionyo H/C
MARSABIT(SAKU)	Boru Haro
ISIOLO NORTH	Kipsing Disp
IMENTI NORTH	Kibuline Disp
IGEMBE SOUTH	Kathiari Disp
IGEMBE NORTH	Laare H/Centre
MWINGI NORTH	Ngomeni H/C
MWINGI SOUTH	Ukasi Disp.
KANGUNDO	Kisukioni H/C
MBOONI	Kalawa H/C
SIKAKAGO	Kamumu H/C
GACHOKA	Makima Disp.
RUNYENJES	Kigumo Disp
MANYATTA	Rukira Disp
KILOME	Kasikeu Disp
MAKUENI (NZAVI)	Emali Disp
KAITI	Mukuyuni H/C
KATHIANI	Athi River H/C
KIBWEZI	Masongaleni
MASINGA	Masinga H/C
MTITO	Nthagathini Disp.
MWALA	Makutano Disp.
RUNYENJES	Kigumo Disp
MANYATTA	Rukira (Kithimu) Disp.
YATTA	Kithimani H/C
KITUI SOUTH	Mutomo Disp
KITUI CENTRAL	Miambani Disp.
KITUI WEST	Nthongoni H/C

4. NYANZA PROVINCE	
ALEGO	Rwambwa Health Centre
GEM	Rera H/C
UGENYA	Simenya Disp
RANGWE	Wiga Disp
KURIA	Mogori-Komasimo Disp
WEST MUGIRANGO	Bosiango Disp
NORTH MUGIRANGO	Kineni Disp
RARIENDA	Ndori H/C
MIGORI	Godkwer H/C
BONCHARI	Nyamagundo
RONGO	Dede Disp
URIRI	Uriri H/C
BONDO	Usigu Disp.
NYARIBARI CHACHE	Kiogoro H/C
KITUTU CHACHE	Iranda H/C
SOUTH MUGIRANGO	Etago H/C
KITUTU MASABA	Tombe H/C
NYARIBARI MASABA	Emeroka Disp
BAMACHOGE	Isamwera Disp
BOBASI	Kenyerere Disp
MBITA	Sena Disp.
GWASSI	Nyandiwa Disp
KISUMU TOWN WEST	Ojola Disp.
KISUMU TOWN EAST	Gita Disp.
NYANDO	Rabuor H/c
KISUMU RURAL	Manyuanda
KASIPUL KABONDO	Ober H/C
KARACHUONYO	Wague H/C
BORABU	Miriu Disp.
NYATIKE	Lwanda Dispensary
MUHORONI	Nyangoma H/C
NYAKACH	Nyambarimba H/C

5. NORTH EASTERN PROVINCE	
GARISSA	Sankuri Disp
FAFI	Galmagalla Disp
LAGDERA	Benane Disp
WAJIR NORTH	Korondile H/c
WAJIR WEST	Wagalla Disp
WAJIR SOUTH	Sabuli H/c
WAJIR EAST	Mansa Disp
MANDERA CENTRAL	Kutulo Disp
MANDERA WEST	Banisa H/c
IJARA	Sangailu Disp
MANDERA EAST	Fino Disp

6. WESTERN PROVINCE	
LUGARI	Chakolini Disp.
WEBUYE	Webuye H/C
HAMISI	Hamisi H/C
EMUHAYA	Emusire H/C
VIHIGA	Lyanaginga Disp.
SABATIA	Bugina H/C
IKOLOMANI	Savane Disp.
SHINYALU	Shinyalu H/C
LURAMBI	Elwesero disp
MALAVA	Chombeli Disp.
MT. ELGON	Kopsiro H/C
KIMILILI	Tongareni H/C
SIRISIA	Lwandanyi H/C
KANDUYI	Mechimeru Disp.
BUMULA	Siboti Disp.
AMAGORO	Lukolis Disp.
KHWISERO	Eshinutsa Disp.
MATUNGU	Lunganyiro Disp.
BUTERE	Shikunga H/C
MUMIAS	Mumias Disp
NAMBALE	Madende Disp
BUTULA	Ikonzo Disp
FUNYULA	Nambuku Disp
BUNDALANGI	Rukala Disp.

7. RIFT VALLEY PROVINCE	
BOMET	Kembu Disp
CHEPALUNGU	Olbutyo H/c
BARINGO CENTRAL	Kisonei Disp
BURETI	Sosit H/C
KONOIN	Koiwa H/C
KAJIADO CENTRAL	Ndungu DHAO
KAJIADO NORTH	Ewaso Kedong Disp
KIPKELION	Mtaragon Disp.
KURESOI	kuresoi h/c
MOLO	Lare Disp.
ELDAMA-RAVINE	Equator Disp
MOGOTIO	Olkokwe Disp
KWANZA	Chepchoina disp
LAIKIPIA EAST	Lamura Disp
LAIKIPIA WEST	Melwa Disp
LAIKIPIA NORTH	Ilpolei Disp
KAJIADO SOUTH	Immurtot disp
SAMBURU WEST	Kisima Disp
MOSOP	Kabiemit H/C
NAROK NORTH	Nkareta Disp
SAMBURU EAST	Archer's Post Disp
TRANSMARA	Oldanyati H/C
TRANS NZOIA	Kachibora Disp
TURKANA NORTH	Makutano Disp
NAKURU TOWN	Langa Langa Disp
RONGAI	Mboigoine Disp
ELDORET NORTH	Moi's Bridge H/C
ELDORET SOUTH	Chepkigen Disp
ELDORET EAST	Moiben H/c
MARAKWET EAST	Cheptongei Disp
MARAKWET WEST	Kapyego Disp
ALDAI	Serem Disp
TINDERET	Kabunyaeria disp
TRANSNZOIA WEST	Weonia disp
KEIYO NORTH	Kibendo Disp
KEIYO SOUTH	Biretwo Disp
NAIVASHA	Maela H/c
NAROK SOUTH	Morijo Loita Disp.
ELDORET SOUTH	Chepkigen Disp

TURKANA SOUTH	Elelea Disp
AINAMOI	Manyoror Disp.
BARINGO EAST	Kolowa Disp.
BELGUT	Kabianga H/C
CHERANGANY	Kachibora H/C
EMEGWEN	Kapsiywa H/C
KACHELIBA	Alale H/C
KAPENGURIA	Tamough H/C
KILGORIS	Oldanyatti H/C
SIGOR	Lomut H/C
SUBUKIA	Kabasi Disp.
ELDORET SOUTH	Chepkigen Disp.
SOTIK	Kiricha Disp

**SUMMARY OF NURSES SUBMITTED
AS AT 28TH JUNE 2010**

NO	COMPLETE	NO RECEIVED	NO. FORWARDED TO PSC	VARIANCE	COMMENTS	INCOMPLETE	NOT RESPONDED
	NYANZA PROVINCE						
1	BOMACHOGE	20	20	0			NIL
2	BOBASI	20	20	0			
3	N. MUGIRANGO/BORABU	20	20	0			
4	WEST MUGIRANGO	20	20	0			
5	NYARIBARI MASABA	20	20	0			
6	BONDO	18	18	2			
7	NDHIWA	18	18	2			
8	RANGWE	20	20	0			
9	KISUMU TOWN EAST	20	20	0			
10	KISUMU TOWN WEST	20	20	0			
11	MIGORI	20	20	0			
12	URIRI	20	20	0			
13	MBITA	17	17	3			
14	SOUTH MUGIRANGO	20	20	0			
15	KITUTU MASABA	20	20	0			
16	ALEGO	17	17	3			
17	GEM	14	14	6			
18	UGENYA	14	14	6			
19	BONCHARI	20	20	0			
20	KURIA	20	20	0			
21	KARACHUONYO	18	15	2	3 N/C NO. MISSING		
22	RONGO	20	17	0	3 N/C NO. MISSING		
23	KITUTU CHACHE	20	20	0			
24	NYATIKE	20	20	0			
25	NYAKACH	14	14	6			
26	MUHORONI	20	20	0			
27	NYANDO	20	20	0			

28	RARIEDA	15	15	5				
29	KISUMU RURAL	19	19	1				
30	NYARIBARI CHACHE	20	20	0				
31	KASIPUL KABONDO	20	20	0				
32	GWASSI	11	11	9				
	TOTAL	595	589	45				
	EASTERN PROVINCE							
	NO. COMPLETE	NO. RECEIVED	NO. FORWARDED TO PSC	VARIANCE	INCOMPLETE	NOT RESPONDED		
1	ISIOLO NORTH	20	20	0	NIL	NIL		
2	KITUI CENTRAL	20	20	0				
3	MUTITO	20	20	0				
4	KATHIANI	20	20	0				
5	YATTA	20	20	0				
6	KAITI	20	20	0				
7	MAKUENI	20	20	0				
8	IMENTI SOUTH	20	20	0				
9	MWINGI NORTH	20	20	0				
10	SAKU	20	20	0				
11	LAISAMIS	20	20	0				
12	MACHAKOS TOWN	20	20	0				
13	MANYATTA	20	20	0				
14	RUNYENJES	20	20	0				
15	KITUI WEST	20	20	0				
16	MWALA	20	20	0				
17	KILOME	20	20	0				
18	KIBWEZI	20	20	0				
19	MBOONI	20	20	0				
20	NITHI	20	20	0				
21	KANGUNDO	20	20	0				
22	MWINGI SOUTH	20	20	0				
23	ISIOLO SOUTH	20	20	0				
24	KITUI SOUTH	20	20	0				

25	IMENTI NORTH	20	20	0				
26	MASINGA	20	20	0				
27	TIGANIA WEST	20	20	0				
28	NORTH HORN	20	20	0				
29	MOYALE	20	20	0				
30	NTONYIRI/IGEMBE NORTH	20	19	0	1 N/C MISSING			
31	CENTRAL IMENTI	20	20	0				
32	TIGANIA EAST	20	20	0				
33	THARAKA	20	20	0				
34	IGEMBE SOUTH	20	20	0				
35	GACHOKA	20	20	0				
36	SIKAGO	20	20	0				
	TOTAL	720	719	0				
	RIFT VALLEY PROVINCE							
NO.	COMPLETE	NO. RECEIVED	NO. FORWARDED TO PSC	VARIANCE	INCOMPLETE	NOT RESPONDED		
1	NAROK NORTH	20	20	0	NIL	NIL		
2	SAMBURU EAST	20	20	0				
3	KAJIADO NORTH	20	20	0				
4	KAJIADO SOUTH	20	20	0				
5	KILGORIS	20	20	0				
6	ELDAMA RAVINE	20	20	0				
7	MOGOTIO	20	20	0				
8	SAMBURU WEST	20	20	0				
9	KIPKELION	20	20	0				
10	BARINGO NORTH	20	20	0				
11	BARINGO CENTRAL	20	20	0				
12	LAIKIPIA WEST	20	20	0				
13	KEIYO NORTH	20	20	0				
14	KEIYO SOUTH	20	20	0				
15	NAROK SOUTH	20	20	0				
16	MARAKWET EAST	20	20	0				
17	MARAKWET WEST	20	20	0				

18	ALDAI	20	20	0			
19	TINDERET	20	20	0			
20	MOSOP	20	20	0			
21	KAJIADO CENTRAL	20	20	0			
22	ELDORET NORTH	20	20	0			
23	ELDORET SOUTH	20	19	0	1 N/C MISSING		
24	ELDORET EAST	20	20	0			
25	TURKANA CENTRAL	20	20	0			
26	TURKANA SOUTH	20	20	0			
27	KWANZA	20	20	0			
28	SABOTI	20	20	0			
29	CHERENGANY	20	20	0			
30	LAIKIPIA EAST	20	20	0			
31	BELGUT	20	20	0			
32	KURESOI	20	20	0			
33	SUBUKIA	20	20	0			
34	NAKURU TOWN	20	20	0			
35	MOLO	20	20	0			
36	CHEPALUNGU	20	18	0	2 N/C NO MISSING		
37	SOTIK	20	20	0			
38	BURETI	20	20	0			
39	KONOIN	20	20	0			
40	BOMET	20	19	0	1 N/C MISSING		
41	AINAMOI	20	20	0			
42	BARINGO EAST	20	19	0	1 N/C MISSING		
43	SIGOR	20	19	0	1 N/C MISSING		
44	KAPENGURIA	20	20	0			
45	NAIVASHA	20	20	0			
46	EMGWEN	20	20	0			
47	TURKANA NORTH	20	20	0			
48	KACHELIBA	13	13	7			
49	RONGAI	20	20	0			

TOTAL	973	967	7			
CENTRAL PROVINCE						
NO. COMPLETE	NO. RECEIVED	NO. FORWARDED TO PSC	VARIANCE	INCOMPLETE	NOT RESPONDED	
1 .NYERI TOWN	20	20	0	NIL	NIL	
2 .TETU	20	20	0			
3 .OTHAYA	20	20	0			
4 .MUKERWEINI	20	20	0			
5 .JUJA	20	20	0			
6 .GATUNDU NORTH	20	20	0			
7 .GATUNDU SOUTH	20	20	0			
8 .GATANGA	20	20	0			
9 .MWEA	20	20	0			
10 .KERUGOYA/KUTUS	20	20	0			
11 .GICHUNGU	20	20	0			
12 .NDJA	20	20	0			
13 .KIPPIPIRI	20	20	0			
14 .KINANGOP	20	20	0			
15 .LARI	20	20	0			
16 .KIKUYU	20	20	0			
17 .KIGUMO	20	20	0			
18 .KANDARA	20	20	0			
19 .KIHARU	20	20	0			
20 .KANGEMA	20	20	0			
21 .MATHIOYA	20	20	0			
22 .MATHIRA	20	20	0			
23 .NDARAGWA	20	20	0			
24 .GITHUNGURI	20	20	0			
25 .OL.KALAU	20	20	0			
26 .KIAMBAA	20	20	0			
27 .MARAGWA	20	20	0			
28 .LIMURU	20	20	0			
29 .KIENI	20	20	0			

TOTAL		580	580	0			
NORTH EASTERN PROVINCE							
NO.	COMPLETE	NO. RECEIVED	NO. FORWARDED TO PSC	VARIANCE		INCOMPLETE	NOT RESPONDED
1	.MANDERA CENTRAL	7	4	13	N/C NO. MISSING	NIL	NIL
2	.WAJIR EAST	12	12	8			
3	.LAGDERA	13	13	7			
4	.WAJIR NORTH	5	5	15			
5	.WAJIR WEST	11	11	9			
6	.WAJIR SOUTH	16	16	4			
7	.FAFI	20	19	0	1 NO ID NO & NC NO		
8	.DUJIS	20	20	0			
9	.MANDERA EAST	3	3	17			
10	.MANDERA WEST	14	11	6	3 N/C NO. MISSING		
11	.IJARA	14	14	6			
	TOTAL	135	128	85			
WESTERN PROVINCE							
NO.	COMPLETE	NO. RECEIVED	NO. FORWARDED TO PSC	VARIANCE		INCOMPLETE	NOT RESPONDED
1	.MUMIAS	20	20	0		NIL	NIL
2	.KHWISERO	20	20	0			
3	.SABATIA	20	19	0	1 N/C MISSING		
4	.HAMISI	20	20	0			
5	.WEBUYE	20	20	0			
6	.BUMULA	20	20	0			
7	.EMUHAYA	20	20	0			
8	.VIHIGA	20	20	0			
9	.BUTERE	20	20	0			
10	.MALAVA	20	20	0			
11	.IKOLOMANI	20	19	0	1 N/C MISSING		
12	.LURAMBI	20	20	0			
13	.SHINYALU	20	20	0			
14	.SIRISIA	20	18	0	2 N/C NO MISSING		
15	.KIMILILI	20	20	0			

21	GARSEN	3	3	17		
	TOTAL	271	258	149		
	NAIROBI PROVINCE					
	NO. COMPLETE	NO. SUBMITTED	NO. FORWARDED TO PSC	VARIANCE	INCOMPLETE	NOT RESPONDED
1	MAKADARA	20	20	0	NIL	NIL
2	DAGORETTI	20	20	0		
3	WESTLANDS	20	20	0		
4	EMBAKASI	20	20	0		
5	KASARANI	20	20	0		
6	STAREHE	20	20	0		
7	KAMUKUNJI	20	20	0		
8	LANGATA	20	20	0		
	TOTAL	160	160	0		

NO. OF NURSES PUBLISHED: 3866

NO. OF NURSES WITH INCOMPLETE INFORMATION: 48

VARIANCE: 286

16	MT ELGON	20	18	0	2 N/C NO MISSING			
17	BUTULA	20	20	0				
18	MATUNGU	20	20	0				
19	LUGARI	20	16	0	4 N/C NO MISSING			
20	AMAGORO	20	20	0				
21	FUNYULA	20	19	0	1 AGE MISSING			
22	BUDALANGI	20	17	0	3 N/C NO. MISSING			
23	NAMBALE	20	19	0	1 N/C MISSING			
24	KANDUYI	20	20	0				
	TOTAL	480	465	0				
	COAST PROVINCE							
	NO. COMPLETE	NO. SUBMITTED	NO. FORWARDED TO PSC	VARIANCE	INCOMPLETE	NOT RESPONDED		
1	TAVETA	10	10	10	NIL	NIL		
2	WUNDANYI	8	7	12	1 N/C MISSING			
3	MWATATE	7	7	13				
4	VOI	15	15	5				
5	BAHARI	20	19	0	1 N/C MISSING			
6	GANZE	18	17	2	1 N/C MISSING			
7	KALOENI	20	20	0				
8	CHANGAMWE	20	20	0				
9	LAMU WEST	9	9	11				
10	LIKONI	20	13	0	7 N/C MISSING G			
11	LAMU EAST	7	7	13				
12	KISAUNI	19	19	1				
13	MVITA	20	20	0				
14	BURA	3	3	17				
15	GALOLE	4	4	16				
16	KINANGO	16	16	4				
17	MSAMBWENI	13	10	7	3 N/C NO. MISSING			
18	MATUGA	14	14	6				
19	MALINDI	20	20	0				
20	MAGARINI	5	5	15				

MEDICAL SERVICES

Annex 1: ONGOING GOK FINANCED PROJECTS STARTED IN 2009/10 FINANCIAL YEAR

Facility/Province	Project Details	Contract Sum	A/E Released	Deficit	Status
Central Province					
1 Kangema Sub-District Hospital	Completion of twin ward started in 2008/09 financial year with an allocation of Kshs. 5m. The estimate for completion is 16m	20,005,698.95	10,500,000.00	9,505,698.95	At roofing level - 75% complete
2 Kiomyaga Sub-District Hospital	Construction of a theatre	8,000,000.00	4,000,000.00	4,000,000.00	At roofing level - 75% complete
4 Kiambu District Hospital	Construction of a maternity unit with a theatre	57,000,000.00	8,500,000.00	48,500,000.00	Ongoing - Foundation stage
5 Igegania Sub-District Hospital	Construction of an OPD block	37,000,000.00	7,000,000.00	30,000,000.00	Ongoing - Foundation stage
6 Mukurweini District Hospital	Provision of coldroom and hood for patients' kitchen	3,500,000.00	1,750,000.00	1,750,000.00	Completed - Pending bill
Provincial Total		125,505,698.95	31,750,000.00	93,755,698.95	

Annex 1: ONGOING GOK FINANCED PROJECTS STARTED IN 2009/10 FINANCIAL YEAR

Facility/Province	Project Details	Contract Sum	A/E Released	Deficit	Status
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Coast Province						
1	Coast Province General Hospital	Repair of leaking roofs,	14,000,000.00	5,000,000.00	9,000,000.00	Ongoing - 50% complete
2	Ngao Hospital District	Construction of a maternity unit with a theatre	13,000,000.00	7,000,000.00	6,000,000.00	Ongoing - 50% complete
3	Moi (Voi) Hospital District	Construction of a maternity unit with a theatre	21,684,755.00	11,000,000.00	10,684,755.00	Ongoing - 50% complete
		Improvement of water supply	48,684,755.00	23,000,000.00	25,684,755.00	
		Provincial Total				

Nairobi Province						
1	Mathari Hospital	Completion of x-ray block				
		Plumbing works and storage tank for borehole				
		Expansion of laundry				
		Provision of ablution facilities				
		Rehabilitation of kitchen	31,000,000.00	12,500,000.00	18,500,000.00	Ongoing - 35% complete
3	Mbagathi Hospital District	Mechanical and electrical works for mortuary	31,000,000.00	7,500,000.00	23,500,000.00	Ongoing - 25% complete
		Overhaul of electrical installation	62,000,000.00	20,000,000.00	42,000,000.00	
		Provincial Total				

Annex 1: ONGOING GOK FINANCED PROJECTS STARTED IN 2009/10 FINANCIAL YEAR

Facility/Province	Project Details	Contract Sum	A/E Released	Deficit	Status	
Eastern Province						
1	Tsekkuru District Hospital Sub-District Hospital	Electrical and air conditioning works for theatre				
		Construction of a maternity ward	13,000,000.00	4,500,000.00	8,500,000.00	Ongoing - 30% complete
2	Runyenjes Sub-District Hospital	Construction of a general ward	10,667,752.00	3,500,000.00	7,167,752.00	Ongoing - 30% complete
3	Katulani Sub-District Hospital	Rehabilitation of maternity, wards, and theatre, including provision of ablution block				
		Plumbing and sewerage works	6,549,742.00	3,000,000.00	3,549,742.00	Completed - Pending bill
4	Marsabit District Hospital	Major renovations of hospital buildings - x-ray, ward 1, physiotherapy, conversion of maternity extension to nursery.				
			5,000,000.00	2,500,000.00	2,500,000.00	Ongoing - 50% complete
5	Mithene District Hospital	Completion of stalled projects - theatre, x-ray block and mortuary	9,500,000.00	3,500,000.00	6,000,000.00	Ongoing - 30% complete
6	Machakos District Hospital	Sinking of a borehole				
		Overhaul of electrical wiring Renovation of x-ray block	25,700,000.00	6,200,000.00	19,500,000.00	Ongoing - 25% complete

Annex 1: ONGOING GOK FINANCED PROJECTS STARTED IN 2009/10 FINANCIAL YEAR

Facility/Province	Project Details	Contract Sum	A/E Released	Deficit	Status
7	Makindu District Hospital Upgrading power supply to 3 phase Construction of a surgical ward	6,784,745.00	4,250,000.00	2,534,745.00	Ongoing - 60% complete
8	Moyale District Hospital Completion of stalled maternity ward	800,000.00	400,000.00	400,000.00	Completed - Pending bill
9	Mbooni District Hospital Completion of stalled maternity ward Extension of sewerage system	8,100,000.00	3,850,000.00	4,250,000.00	Completed - Pending bill
11	PDMS Eastern Completion of stalled office block started by European Union	2,500,000.00	2,500,000.00	-	Ongoing - 95% complete
	Provincial Total	88,602,239.00	34,200,000.00	54,402,239.00	

Rift Valley

1	Molo Hospital Completion of Kitchen/laundry block	8,906,960.00	6,000,000.00	2,906,960.00	Ongoing - 95% complete
2	Tambach Sub-District Hospital Construction of a maternity ward Completion of theatre started in 2008/09 with an allocation of 5m - Contract sum was Kshs. 6,813,000,000	17,800,000.00	-	17,800,000.00	To start when funded
3	Marakwet (Chelemtil) District Hospital Completion of stalled projects - Theatre, X-ray, Lab Construction of a twin ward	1,813,000.00	906,500.00	906,500.00	Completed - Pending bill
		6,000,000.00	6,000,000.00	-	Completed
		9,188,975.00	500,000.00	8,688,975.00	Foundation

Annex 1: ONGOING GOK FINANCED PROJECTS STARTED IN 2009/10 FINANCIAL YEAR

Facility/Province	Project Details	Contract Sum	A/E Released	Deficit	Status
4	Tot Health Centre - Pending upgrading to an SDH	15,614,000.00	7,000,000.00	8,614,000.00	Ongoing - 45% complete
5	Lopding Sub-District Hospital	5,000,000.00	2,500,000.00	2,500,000.00	ongoing - 50% complete
6	Lodwar Hospital	10,000,000.00	4,000,000.00	6,000,000.00	Ongoing - 40% complete
7	Loitoktok Hospital	11,000,000.00	5,000,000.00	6,000,000.00	Ongoing - 45% complete
8	Oloolunga Hospital	250,000.00	250,000.00	-	Completed
9	Doidoi DH	17,914,523.00	7,000,000.00	10,914,523.00	Ongoing - 40% complete
	Fencing of land	3,100,000.00	2,000,000.00	1,100,000.00	Ongoing - 60% complete
10	Maratal Hospital	4,000,000.00	2,000,000.00	2,000,000.00	Ongoing 80% complete
11	Nanyuki Hospital	11,200,000.00	4,850,000.00	6,350,000.00	Ongoing - 50% complete

Annex 1: ONGOING GOK FINANCED PROJECTS STARTED IN 2009/10 FINANCIAL YEAR

Facility/Province	Project Details	Contract Sum	A/E Released	Deficit	Status
	Provincial Total	121,787,458.00	48,006,500.00	73,780,958.00	

North Eastern Province

1	Masalani District Hospital (Iyara)	Completion of stalled projects - lab, x-ray and dental	5,826,151.00	5,600,000.00	226,151.00	Ongoing - 50% complete
2	Takaba Health Centre - Pending upgrading to Mandera West DH	Construction of a twin ward	13,945,808.00	7,000,000.00	6,945,808.00	Ongoing - 50% complete
3	Iftin Sub-District Hospital	Construction of a kitchen	5,000,000.00	2,500,000.00	2,500,000.00	Ongoing - 50% complete
4	Habaswein Sub-District Hospital	Construction of a twin ward	13,100,000.00	7,000,000.00	6,100,000.00	Ongoing - 60% complete
	Provincial Total		37,871,959.00	22,100,000.00	15,771,959.00	

Western Province

1	Teso Hospital	Construction of septic tank for new theatre	1,500,000.00	750,000.00	750,000.00	Completed - Pending Bill
2	Kinlilli Hospital	Completion of stalled projects - theatre and laundry Construction of a general ward	17,000,000.00	4,500,000.00	12,500,000.00	Ongoing - 25% complete

Annex 1: ONGOING GOK FINANCED PROJECTS STARTED IN 2009/10 FINANCIAL YEAR

Facility/Province	Project Details	Contract Sum	A/E Released	Deficit	Status
3 Manyala District Hospital	Construction of a theatre	11,327,366.00	1,700,000.00	9,627,366.00	Ongoing - foundation stage
4 Likuyani District Hospital	Provision of sewerage system				
	Repairs to maternity ward, theatre, pharmacy and lab				
	Construction of covered walkways to connect wards to theatre and OPD	1,500,000.00	750,000.00	750,000.00	Ongoing - 50% complete
5 Sirisia District Hospital	Construction of laundry - 4m				
	Renovation of theatre - 2m	7,500,000.00		7,500,000.00	To commence when funded
	Renovation of x-ray block - 1.5m	5,760,000.00	3,500,000.00	2,260,000.00	Ongoing - 80% complete
6 Emuhaya D H	Construction of a general ward				
	Provincial Total	44,587,366.00	11,200,000.00	33,387,366.00	

Nyanza Province

1 Bondo Hospital	District	Completion of stalled projects started in 2005/06 F/Y - paediatric ward, laundry (machine available) and water supply works	7,400,000.00	7,000,000.00	400,000.00	Ongoing - 75% complete
3 Kehancha Hospital	District	Electrical works for borehole - 304 meters away	1,200,000.00	600,000.00	600,000.00	Completed - Pending bill

**Annex 1: ONGOING GOK FINANCED PROJECTS STARTED IN
2009/10 FINANCIAL YEAR**

Facility/Province	Project Details	Contract Sum	A/E Released	Deficit	Status
5	Rachunyo District Hospital Completion of stalled 40 bed ward	2,500,000.00	2,500,000.00	-	Ongoing - 75% complete
6	Nyamache District Hospital Construction of a theatre Renovation of mortuary	16,000,000.00	4,000,000.00	12,000,000.00	Ongoing - 25% complete
9	Chulainbo Sub-District Hospital Construction of a ward	6,998,471.00	6,800,000.00	198,471.00	Ongoing - 85% complete
Provincial Total		34,098,471.00	20,900,000.00	13,198,471.00	
Grand Total		563,137,946.95	211,156,500.00	351,981,446.95	

Annex 2: D11 PROPOSALS FOR THE SECOND HALF OF THE 2009/2010 FINANCIAL YEAR

<i>Funding withdrawn during revised estimates</i>				
Province	No.	Facility	Project Details	Estimated budget
Central	3	Nyeri PGH	Equipment for ICU and rehab of NBU	8,000,000.00
	6	Nyathuna SDH	Construction/Renovation of buildings	3,000,000.00
	7	Othaya SDH	Rehabilitation of twin ward, kitchen and OPD	3,000,000.00
	8	Coast PGH	Adaptation of existing building for installation of Renal Dialysis machines	5,000,000.00
	9	Mwambirwa SDH	Construction of a maternity unit with a theatre	25,000,000.00
	10	Jibana SDH	Construction of a theatre	8,000,000.00
	11	Bamba SDH	Construction of a maternity unit	16,000,000.00
			Construction of a theatre	8,000,000.00
	12	Mwatate SDH	Construction of a theatre	8,000,000.00
Coast	13	Likoni SDH	Construction of a maternity unit	16,000,000.00
			Construction of a theatre	8,000,000.00
	14	Tudor DH	Construction of a theatre	8,000,000.00
	15	Kinango DH	Construction of a paediatric ward	8,000,000.00
			Fencing of hospital compound	4,000,000.00
			Rehabilitation of sewerage system	700,000.00
		16	Wesu DH	Fencing of hospital compound
			Renovation of buildings	3,000,000.00
	17	Marakani DH	Construction of maternity unit	16,000,000.00
Eastern	18	Siakago DH	Completion of Theatre	2,400,000.00
			Completion of stalled maternity ward	3,200,000.00
			Renovation of existing buildings	700,000.00

Annex 2: D11 PROPOSALS FOR THE SECOND HALF OF THE 2009/2010 FINANCIAL YEAR

<i>Funding withdrawn during revised estimates</i>				
Province	No.	Facility	Project Details	Estimated budget
	19	Chuka DH	Completion of stalled Maternity	10,600,000.00
		Machakos DH	Renovation of maternity Theatre	500,000.00
	21	Kanyangi SDH		
Western	26	Malava District Hospital	Construction of a twin ward (start-off in current year)	15,000,000.00
			Conversion of old theatre to X-ray block	1,500,000.00
	27	Bungoma DH	Completion of stalled mortuary	7,000,000.00
Nyanza	31	Kisumu District Hospital	Completion of Maternity Unit (80% complete), upgrading of power supply and renovation of buildings	10,000,000.00
	32	Nyamira District Hospital	Re-roofing works, rehabilitation of toilets, repairs to mortuary coldroom, water supply works and general repairs and renovations	10,000,000.00
	33	Nyamache DH	Renovation of the mortuary	2,700,000.00
	34	Migori District Hospital	Completion of stalled kitchen	3,000,000.00
	35	Kehancha District Hospital	Purchase of borehole water pump	200,000.00
Rift Valley			Completion of radiology block	6,000,000.00
			Renovation of existing buildings	2,000,000.00
	36	Kisumu PGH	Electrical works for borehole - started in 1st half	1,200,000.00
	37	Kajiado DH	Renovation of buildings	20,000,000.00
			Drilling of a borehole	5,000,000.00

Annex 2: D11 PROPOSALS FOR THE SECOND HALF OF THE 2009/2010 FINANCIAL YEAR

<i>Funding withdrawn during revised estimates</i>				
Province	No.	Facility	Project Details	Estimated budget
	38	Kabartonjo District Hospital	Repair of roofs and wiring for generator	5,300,000.00
	39	Ololulunga S.D.H	Preparation of a master plan	1,000,000.00
	40	Narok District Hospital	Start construction of casualty, rehabilitation of mortuary, repairs and renovations of wards, rehabilitation of sewerage system and fencing of proposed MTC site.	20,000,000.00
	41	Iten	Sanitation and Plumbing works	1,300,000.00
			Rehabilitation of Kitchen	2,100,000.00
			Completion of stalled Comprehensive care centre	3,000,000.00
		Tambach	Construction of OPD, Kitchen and Laundry blocks (Start-off in current year)	20,000,000.00
	45	Huruma SDH	Fencing and renovations	1,000,000.00
Total				305,400,000.00

Annex 3: Medium Term Expenditure Framework (MTEF) Budget 2010/2011 - Partner Supported Projects (Construction) - Ministry of Medical Services

No	Project Name/Site	Partner	Partner Commitment	GOK Commitment	GOK Requirements 2010/2011
1	Construction of Nairobi East DH at Kayole	China	85,550,000	100,000,000	100,000,000
2	Upgrading of Othaya District Hospital (Phase 1)	Japan	310,000,000	126,000,000	-
3	Upgrading of Wajir District Hospital	Kuwait	450,000,000	20,000,000	-
4	Construction and operations of Paediatric HIV Centre of Excellence at Kisumu Provincial General Hospital	Baylor College of Medicine USA	200,000,000	390,000,000	78,000,000
5	Construction Centre/Outpatient Block at Kombewa District Hospital	Walter Reed	28,000,000	10,000,000	10,000,000
6	GOK Counterpart funds for MOH/SIMED Projects for upgrading 23 hospitals	SIMED	1,100,000,000	-	62,000,000
	Rehabilitation of Ahero and Tharaka District hospitals	ITALY	52,067,170	-	-
		SPAIN, OPEC, SAUDIA			
7	Kenyatt national Hospital (Burns Unit, Equipments)	FUND	1,052,400,000	-	-
8	Upgrading of Embu Provincial General Hospital	BADEA	250,000,000	536,538,260	300,000,000
Total			3,528,017,170	1,182,538,260	550,000,000

Annex 4: DISTRICT ALLOCATION TO HEALTH FACILITIES – RECURRENT VOTE

The amount to be allocated to health facilities under the Hospital management Services Fund is KSh 778.5 million and KSh 100 million for the Management Board and the Secretariat. The proposed distribution of the KSh 778.5 to the facilities awaiting consideration by the Board is as shown below.

PROVINCE	DISTRICT	HOSPITAL	Allocation -KSh
Central	Nyeri South	Nyeri PGH	18,763,116
Eastern	Embu	Embu PGH	18,893,575
Eastern	Machakos	Machakos LV	15,308,407
Coast	Mombasa	Coast PGH	22,324,900
North Eastern	Garissa	Garissa PGH	15,179,383
Nyanza	Kisumu East	Nyanza PGH	25,516,721
Rift/Valley	Nakuru Central	Nakuru PGH	27,890,713
Western	Kakamega Central	Kakamega PGH	19,610,767
Sub total			163,487,582
Central	Kabele	Nyalhuna SDH	1,110,315
Central	Kiambu	Kihara SDH	1,457,409
Central	Kiambu East	Kiambu DH	10,957,716
Central	Kiambu West	Tigoni DH	1,897,025
Central	Kirinyaga Central	Kenyoa DH	9,942,553
Central	Kirinyaga South	Kimbibi SDH	2,025,795
Central	Kirinyaga East	Kiaryaga SDH	1,183,417
Central	Muranga South (Maragua)	(Muranga South) Maragua DH	2,708,496
Central	Muranga East	Muranga DH	8,808,923
Central	Muranga East (Katuro)	Muririas DH	2,300,057

PROVINCE	DISTRICT	HOSPITAL	Allocation -KSh
Central	Muranga West	Kangema SDH	1,149,856
Central	Nyandarua North	Nyahururu DH	5,712,156
Central	Nyandarua Central	OI-Kalou DH	3,697,646
Central	Nyandarua South (Kinangop)	Engineer DH	1,762,471
Central	Nyeri central	Mt Kenya SDH	1,109,809
Central	Nyeri North (Mathira East)	Karatina DH	6,311,604
Central	Nyeri South	Othaya DH	2,514,747
Central	Nyeri South (Mukurweini)	Mukurwe-iri SDH	3,217,629
Central	Thika West	Thika DH (L5)	10,531,570
Central	Ruiru	Ruiru SDH	1,362,320
Central	Gatundu South	Gatundu DH	3,682,788
Central	Gatundu North	Igeganja SDH	1,075,562
Central	Galang'a	Kiwar'a SDH	1,045,195
Coast	Mombasa (Changamwe)	Tudor SDH	2,759,754
Coast	Kilindini (Changamwe)	Port Reitz DH	6,641,959
Coast	Likoni	Likoni SDH	1,495,496
Coast	Kilifi (Bahar)	Kilifi DH	7,398,533
Coast	Kaloleni (kilifi)	Mariakani DH	3,086,254
Coast	Kaloleni	Jibana SDH	1,262,290
Coast	Kwale	Kwale DH	6,579,566
Coast	Ganze (kilifi)	Banba SDH	932,776
Coast	Kinang'o (kwale)	Kinango D.H.	3,024,737
Coast	Msamweni	Msamweni DH	5,739,001
Coast	Lamu East	Lamu DH	2,183,562
Coast	Lamu	TSS SDH (Mpekoni)	1,588,700

PROVINCE	DISTRICT	HOSPITAL	Allocation -KSh
Coast	Lamu East	Faza SDH	682,483
Coast	Malindi	Malindi DH	7,801,793
Coast	Taita	Wesuu DH	2,093,458
Coast	Voi	Moi Voi DH	3,341,485
Coast	Taita	Wundanyi Sub-District Hospital	664,189
Coast	Taita (Mwatate)	Mwatate SDH	974,725
Coast	Mwatate	Mwambirwa Sub-District Hospital	764,675
Coast	Tavela	Tavela DH	3,756,190
Coast	Tana Delta	Ngao DH	2,325,136
Coast	Tana River	Hola DH	4,705,211
Eastern	Embu East	Runyenjes DH	1,650,399
Eastern	Embu west	Kianjokoma SDH	1,442,196
Eastern	Igembe North	Mutuati SDH	1,139,422
Eastern	Igembe South	Nyanbene DH	1,699,987
Eastern	Igembe East	Muthara SDH	955,349
Eastern	Meru central	Githongo SDH	1,490,604
Eastern	Meru Central	Kibirichia SDH	823,867
Eastern	Imeni North	Meru DH	12,163,076
Eastern	Imeni North	Glaki SDH	718,218
Eastern	Buuri (Imeni N)	Timau SDH	1,053,901
Eastern	Imeni South	Kanyakine SDH	1,730,644
Eastern	Imeni South	Mikumubune SDH	810,253
Eastern	Imeni South	Kinoro SDH	881,849
Eastern	Tharaka South	Marimanti DH	1,282,997
Eastern	Tharaka South	Kibung'a SDH	845,268

PROVINCE	DISTRICT	HOSPITAL	Allocation -KSh
Eastern	Tigania West	Mithene DH	1,350,544
Eastern	Tigania East	Mikinduri SDH	1,145,823
Eastern	Tigania West	Mbeu SDH	780,447
Eastern	Isiolo	Isiolo DH	3,868,227
Eastern	Garbatula	Garbatulla DH	967,970
Eastern	Mutitu(Mutumro)	Mutitu SDH	1,067,759
Eastern	Mutumro	Ikanga SDH	1,171,631
Eastern	Kitui Central	Kitui DH	7,317,001
Eastern	Kitui Central	katlani SDH	939,184
Eastern	Kitui West	Kanyangi SDH	1,013,733
Eastern	Kitui West	Kauwi SDH	1,531,960
Eastern	Kathiani	Kathiani SDH	2,128,528
Eastern	Mwala	Mwala SDH	1,785,353
Eastern	Yatta	Matuu SDH	2,398,532
Eastern	Kangundo	Kangundo DH	4,639,458
Eastern	Makueni	Makueni DH	5,427,504
Eastern	Mbooni West	Mbooni DH	1,806,901
Eastern	Mbooni East	Tawa SDH	1,474,708
Eastern	Mbooni East	Kisau Sub-District Hospital	760,967
Eastern	Kilungu (makueni)	Nunguni SDH	1,087,353
Eastern	Kibwezi (Makindu)	Makindu DH	3,312,015
Eastern	kibwezi	Kibwezi SDH	1,210,765
Eastern	Nzau	Matiliku District Hospital	1,340,924
Eastern	Nzau	Sultan Hamud SDH	1,993,929
Eastern	Marsabit	Marsabit DH	3,111,593

PROVINCE	DISTRICT	HOSPITAL	Allocation -KSh
Eastern	Mbeere North	Ishara SDH	2,004,226
Eastern	Mbeere North	Mbeere DH	1,562,805
Eastern	Maara	Magutuni SDH	1,107,780
Eastern	Meru south	Chuka DH	4,219,851
Eastern	Moyale	Moyale DH	2,744,853
Eastern	Mwingi Central	Mwingi DH	3,665,991
Eastern	Mwingi West	Migwani SDH	1,395,015
Eastern	Mwingi East	Nuu SDH	803,946
Eastern	Kyuso	Tseelkuru SDH	1,129,306
Eastern	Kyuso	Kyuso SDH	1,311,381
Nairobi	Nairobi (Dagoretti)	Mbagathi DH	6,582,712
Nairobi	Nairobi East (Embakasi)	Kayole II SDH	2,178,092
Nairobi	Nairobi North (Kasarani)	Mathari Hospital	8,386,022
Nairobi	Dagoretti	Spinal Injury Hospital	2,166,910
Nairobi	Dagoretti (Mutuni)	Dagoretti Sub-District Hospital	929,515
NorthEastern	Garissa	Ifin SDH	1,148,091
NorthEastern	Garissa	Mbalambala SDH	991,530
NorthEastern	Ijara(Masalani)	Masalani DH	2,060,038
NorthEastern	Ijara	Hulugno SDH	1,104,382
NorthEastern	Lagdera	Modogashie DH	1,200,606
NorthEastern	Lagdera	Dadaab SDH	1,078,324
NorthEastern	Mandera East	Mandera DH	4,976,050
NorthEastern	Mandera East	Lafey SDH	1,203,442
NorthEastern	Mandera West	Takaba Sub-District Hospital	828,319
NorthEastern	Mandera Central	Eiwak SDH	1,420,844

PROVINCE	DISTRICT	HOSPITAL	Allocation -KSh
NorthEastern	Mandera West	Rhamu SDH	944,282
NorthEastern	Wajir North	Wajir DH	4,945,085
NorthEastern	Wajir North	Bule SDH	1,287,282
NorthEastern	Wajir North	Buna SDH	1,146,614
NorthEastern	Wajir North	Khorof Harar SDH	1,173,255
NorthEastern	Wajir South	Habasweni DH	1,633,671
Nyanza	Bondo	Bondo DH	2,126,440
Nyanza	Bondo (Rairienda)	Midiary SDH	816,088
Nyanza	Bondo	Gol Agulu Sub-District Hospital	870,185
Nyanza	Gucha (Nyamache)	Nyamache SDH	1,361,715
Nyanza	Gucha South	Nduru SDH	1,269,179
Nyanza	Gucha (Kenyanya)	Kenyanya SDH	1,172,889
Nyanza	Gucha (Nyamache)	Nyachekei SDH	1,134,763
Nyanza	Gucha (S.Kisi)	Gucha (Ogembo) DH	3,431,513
Nyanza	Homa bay	Homa Bay DH	6,888,566
Nyanza	Ndliwa (Homa Bay)	Ndliwa SDH	1,032,650
Nyanza	Ndliwa (Homa Bay)	Rangwe SDH	1,074,358
Nyanza	Kisi central	Kisi DH	12,756,380
Nyanza	Kisi-Central	Gesusu SDH	761,395
Nyanza	Kisi-central	Keunbu SDH	777,283
Nyanza	Marani	Marani Sub-District Hospital	900,333
Nyanza	Kisi Central	Ibemo Sub-District Hospital	740,970
Nyanza	Masaba (N.K)	Keroka SDH	1,375,421
Nyanza	Masaba (N.K)	Masimba SDH	836,728
Nyanza	Masaba (N.K)	Esani SDH	615,090

PROVINCE	DISTRICT	HOSPITAL	Allocation -KSh
Nyanza	Masaba South	Ibacho Sub-District Hospital	702,541
Nyanza	Kisii South	Iyabe SDH	1,382,348
Nyanza	Kisii South	Etango Sub-District Hospital	818,154
Nyanza	Nyamira	Kisii N DH (Nyamira)	7,344,178
Nyanza	Nyamira North	Nyamusi Sub-District Hospital	1,195,667
Nyanza	Nyamira North	Ekerenyo Sub-District Hospital	1,038,275
Nyanza	Borabu	Kijauni Sub-District Hospital	1,163,280
Nyanza	Nyamira (Manga)	Manga SDH	1,122,299
Nyanza	Manga	Nyangena Sub-District Hospital	678,991
Nyanza	Kisumu East	Kisumu DH	6,564,360
Nyanza	Kisumu East	Victoria SDH	1,522,363
Nyanza	Kisumu East	Nyahera SDH	1,134,099
Nyanza	Kisumu West	Kombewa SDH	1,501,472
Nyanza	Kisumu West	Chulainbo SDH	1,846,724
Nyanza	Kisumu West	MIRANGA SDH	1,231,824
Nyanza	Kuria east	Kuria DH(Kehanchia)	1,646,319
Nyanza	Kuria east	Isebania SDH	1,059,163
Nyanza	Kuria West	NitmanusDH	1,179,963
Nyanza	Migori	Migori DH	4,274,818
Nyanza	Migori (Nyatike)	Macalder SDH	1,218,265
Nyanza	Migori (Nyatike)	Karungu SDH	982,445
Nyanza	Nyakach (Nyando)	Pappondit(Nyando) DH	1,749,548
Nyanza	Nyando	Masogo SDH	973,492
Nyanza	Nyando	MuhoronSDH	1,203,501
Nyanza	Nyando	Ahero SDH	1,498,737

PROVINCE	DISTRICT	HOSPITAL	Allocation -KSh
Nyanza	Rachuonyo North	Kendu Bay SDH	1,133,527
Nyanza	Rachuonyo North	Kandige SDH	1,195,267
Nyanza	Rachuonyo South	Kabondo SDH	1,006,382
Nyanza	Rachuonyo South	Rachuonyo DH	2,468,611
Nyanza	Rongo	Rongo SDH	1,209,076
Nyanza	Rongo	Awendu SDH	1,290,366
Nyanza	Rongo (Uriri)	Ohoro SDH	1,050,795
Nyanza	Siaya	Siaya DH	7,765,853
Nyanza	Siaya	Yala SDH	1,592,369
Nyanza	Siaya(Ugenya)	Ambila SDH	964,153
Nyanza	Suba	Kiseji SDH	797,567
Nyanza	Suba	Sindo DH (Suba)	1,315,290
Nyanza	Suba	Ogongo Sub-District Hospital	791,180
Nyanza	Suba (Mbila)	Mbila SDH	858,081
Rift Valley	Baringo Central	Kabamet DH	4,707,537
Rift Valley	Marigat (Baringo)	Marigat SDH	1,031,735
Rift Valley	East Pokot(Baringo)	Chemolingot DH	1,337,237
Rift Valley	Bomet	Longisa(Bomet) DH	3,140,449
Rift Valley	Bomet	Sigowet SDH	1,309,482
Rift Valley	chepalungu	Sigor SDH	1,115,423
Rift Valley	Buret	Kapkatet DH (Buret)	3,654,156
Rift Valley	konoin	Cheplalal SDH	1,242,356
Rift Valley	konoin	Roret SDH	974,396
Rift Valley	Kajiado North	Ngong SDH	1,666,337
Rift Valley	Kajiado Central	Kajiado DH	3,692,815

MINISTRY OF MEDICAL SERVICES: Examination of the 2010/11 Printed Estimates

PROVINCE	DISTRICT	HOSPITAL	Allocation -KSh
Rift Valley	Loitokitok	Loitokitok SDH	3,193,443
Rift Valley	Keiyo	Ilen DH	3,419,274
Rift Valley	Keiyo South	Tambach SDH	703,309
Rift Valley	Keiyo South	KaplarakwasDH	793,998
Rift Valley	Keiyo South	Kocholwo SDH	678,345
Rift Valley	Keiyo	Kamwosor SDH	638,013
Rift Valley	Kenicho	Kenicho DH	7,088,247
Rift Valley	Kippkelion	Fort-Teman SDH	972,826
Rift Valley	Kippkelion	Kippkelion SDH	1,093,168
Rift Valley	Kippkelion	Londiani DH	2,429,378
Rift Valley	Koibatek	Eldama Ravine DH	2,365,850
Rift Valley	Laikipia East	Nanyuki DH	5,138,178
Rift Valley	Laikipia East	Doldoi Sub-District Hospital	886,226
Rift Valley	Laikipia West	Rumuruti SDH	1,089,312
Rift Valley	Marakwet west	Marakwet (Chebiemiti) DH	2,952,990
Rift Valley	Marakwet East	Tot Sub-District Hospital	810,790
Rift Valley	Molo	Elburgon SDH	1,497,895
Rift Valley	Molo	Molo DH	7,369,600
Rift Valley	kuresoi	Oleingurone SDH	1,241,904
Rift Valley	Naivasha	Gilgil SDH	1,496,671
Rift Valley	Naivasha	Naivasha SDH	5,216,984
Rift Valley	Nakuru	Annex hospital DH	2,249,552
Rift Valley	Nakuru N (Subukia)	Bahati DH	2,602,583
Rift Valley	Nandi North	Cheparwai SDH	1,359,784
Rift Valley	Nandi Central	Kapsabet DH	5,714,359

PROVINCE	DISTRICT	HOSPITAL	Allocation -KSh
Rift Valley	Nandi East	Nandi Hills DH	4,282,905
Rift Valley	Tinderet (Nandi South)	Mitetei SDH	1,436,194
Rift Valley	Nandi South	Kapumo SDH	1,059,220
Rift Valley	Narok North	Narok DH	4,421,633
Rift Valley	Narok South	Olulilunga DH	1,367,202
Rift Valley	Samburu North	Baragoi Sub-District Hospital	969,271
Rift Valley	Samburu Central	Maratat DH	4,054,486
Rift Valley	Kwanza (Trans Nzoia East)	Endebess SDH	1,477,012
Rift Valley	Trans Nzoia West	Saboti SDH	1,467,289
Rift Valley	Trans Nzoia West	Kitale DH	11,244,147
Rift Valley	Transmara West	Transmara DH(Kilgoris)	1,693,906
Rift Valley	Trans mara West	Lolgorian SDH	1,011,889
Rift Valley	Turkana North	Lokitaung SDH	1,471,002
Rift Valley	Turkana North	Lopiding DH	1,469,509
Rift Valley	Turkana South	Kapedo Sub-District Hospital	1,410,551
Rift Valley	Turkana Central	Lodwar DH	6,596,862
Rift Valley	Eldoret West (Uasin Gishu)	Huruma SDH	2,104,552
Rift Valley	Eldoret West (Uasin Gishu) North	Ziwa Sirikwadh	2,179,485
Rift Valley	Central Pokot	Sigor SDH	1,267,015
Rift Valley	North Pokot	Kacheliba SDH	1,515,783
Rift Valley	West Pokot	Kapenguria DH	4,609,165
Rift Valley	West Pokot	chepareria SDH	692,346
Western	Bungoma East	Bokoli SDH	998,951
Western	Bungoma East	Webyue DH	4,337,116
Western	Bungoma North	Kimilili DH	2,759,425

MINISTRY OF MEDICAL SERVICES Examination of the 2010/11 Printed Estimates

PROVINCE	DISTRICT	HOSPITAL	Allocation -KSh
Western	Bungoma North	Naitiri Sub-District Hospital	839,205
Western	Bungoma South	Bungoma DH	8,207,382
Western	Bungoma West	Sirisia SDH	1,941,398
Western	Busia	Busia DH	5,405,799
Western	Busia (Butula)	Khunyangu SDH	1,169,206
Western	Bunyala	Port Victoria SDH	2,018,938
Western	Samia	Sio Port District Hospital	678,883
Western	Butere	Butere DH	2,606,197
Western	Butere	Manyala SDH	1,064,934
Western	Kakamega North	Malava SDH	2,573,283
Western	Kakamega Central	Navakholo DH	1,938,183
Western	Kakamega South	Iguhu DH	1,602,622
Western	Kakamega South	Shibwe SDH	939,963
Western	Lugari	Lumakanda DH	1,611,087
Western	Lugari	Matunda SDH	888,717
Western	Lugari	Likyani SDH	1,168,134
Western	Lugari	Mautuma SDH	840,996
Western	Mt. Elgon	Mt. Elgon DH	1,930,292
Western	Mt. Elgon	Cheptais Sub-District Hospital	663,809
Western	Mumias	Matungu SDH	1,884,763
Western	Teso South	Alupe SDH	2,202,760
Western	Teso North	Teso DH(Kocholia)	2,247,015
Western	Vihiga	Vihiga DH	4,328,403
	Subtotal for Sub-district & District Hospitals		615,024,715
	GRAND TOTAL		778,612,297