REPUBLIC OF KENYA

COUNTY ASSEMBLY OF LAIKIPIA

THE HANSARD

Thursday, 24th September, 2020

The House met at the Assembly Chambers at 2.30 p.m.

[The Speaker (Hon. Patrick Waigwa) in the Chair]

PRAYERS

QUORUM CALL

Speaker: Clerk, kindly confirm whether we have got quorum.

(Lack of quorum confirmed)

Speaker: Serjeant at Arms to ring the bell.

(The bell was rang for one minute)

Speaker: Clerk, you can confirm whether we have achieved quorum.

(Quorum confirmed)

Speaker: The Serjeant at Arms to stop the bell.

STATEMENT

FINANCIAL YEAR PENDING BILLS

Hon. Daniel Mugweru: Thank you, Mr. Speaker. Mr. Speaker, Sir, the attached statement was read on the Floor of the House on 4th August, 2020 by Hon. Peter Matunge and committed to County Public Accounts and Investment Committee on the same day.

The committee received a response from the CECM for Finance and Economic Planning vide Ref: CGL/CECF/CA. S/VOL111/11 Dated 21st August, 2020 on the same day. The committee held a sitting with the officers from the Executive on 17th August, 2020 to scrutinize the response after which it was found that some crucial information was left out in the response.

After much deliberation it was resolved that the CECM for Finance and Economic Planning do submit a detailed response to the committee on or before 24th September, 2020 in order for the committee to go through it before tabling the same to the House. It is in this view that the committee is requesting for more time to table a response once the CECM responds. We are requesting to have until next week on Thursday to respond on the same statement. Thank you.

Speaker: You can respond next week on Thursday at 2.30 p.m. As you respond kindly check on paragraph 3. The committee held a sitting with the officers from the Executive on

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17th August, 2020 to scrutinize the response, but the response was received on 21st August as per paragraph 2. I do not know whether there is an issue of date but you can be able to look at that.

MOTION

EXPANSION OF SUB COUNTY HOSPITALS

Hon. Peter Matunge: Thank you, Mr. Speaker. Mr. Speaker, Sir, I beg to move the following motion;

> THAT NOTING THAT the Fourth Schedule of the Constitution of Kenya, 2010, stipulates that County Health Services is a function of the County Government;
>
> FURTHER NOTING THAT Kenya has adopted the universal Health Coverage as one of the Big Four priority Agenda by His Excellency the President, with an aspiration that by 2022, all persons in Kenya will be able to use the essential services they need for their health and well-being through a single unified benefit package, without the risk of financial catastrophe;
>
> AWARE THAT there exist a myriad of challenges facing the health sector in the county which include limited access to health care facilities, lack of adequate personnel and expertise to address the medical needs and poor infrastructure where most facilities do not have the proper facilities to handle the medical challenges;
>
> This House URGES the County Government to:
>
> 1. Expand the capacity of sub-county hospitals.
> 2. Devolve sub-county management team to sub county levels.
> 3. Strengthen Community Health Workers by continuously training and facilitating them.
> 4. Help accredit public health facilities by the National Hospital Insurance Fund in relation to the awarding of rebates to health facilities which applies on a voluntary basis to facilities from the sub county level upwards.

Mr. Speaker, the motion clearly states that a healthy nation is a working nation. We clearly know that the National Government has made health as one of the priorities. Universal Health Care (UHC) is an agenda of the world with many African countries including Kenya adopting it. This is so that every citizen is able to access health services at a reasonable time and distance.

With that in mind, our four sub-counties that have the existing ones, are still not in the level of the sub-county hospitals. This is because they lack basic equipment to offer the required services to the people of Laikipia.

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Mr. Speaker, if you go to Lamuria, there is a structure that the county had planned to make it a theatre. The same applied to Ndindika and Doldol. Up to date, those things are not functional. A mother has to have a rough road drive all the way from Doldol just to have a simple CS at Nanyuki. It is the same thing that if your child gets a bone fracture he has to be rushed to Nanyuki for a simple x-ray.

Those are the services that we are supposed to have as a standard requirement in sub-county hospitals that are supposed to be level 4 hospitals. Every level 4 hospital is supposed to have resident specialist doctors leave alone medical officers. The resident specialist doctors are able to attend to the very common and basic operations at those levels. All our four sub-county hospitals are unable to provide those services.

This is the reason that we need to speed up the process of expanding the capacity of these hospitals. It is clearly elaborated in our CIDP, the Governor's Manifesto and in the Department of Health Plan. This is that we need to improve and expand the capacity of these hospitals. This will help to reduce the congestion that we are seeing in Nyahururu, Nanyuki and in the referrals that we are doing to our neighbouring counties' hospitals.

On the issue of the Sub-County Management Teams, I do not see the reason as to why we have the Sub-County Management Teams sitting in Nanyuki whereas they are supposed to be in Doldol, Rumuruti, Ndindika or at our sub-county headquarters. If we have a Sub-County Management Team sitting in Nanyuki, how do we then expect them to provide management and supervision services to these sub-county hospitals and other facilities?

This is just building and bringing a lot of bureaucracies in this sector. We are saying that for them to perform effectively, they need to be at the level where they are able to access and supervise these facilities properly. This is for them to improve the services delivery in these facilities and at sub-county levels.

The issues of health workers have been in this House for some time. We need to empower these people. They are the basic foundation of our health system. They are also the basic foundation of Universal Health Care (UHC). Without them, we cannot be able to provide and reach many households on the issues of health care.

Any country that has achieved a meaningful improvement and milestone in the issue of health has invested in the health workers. Countries like Cuba have invested in these things such as the family doctors and Community Health Workers. Countries like Ethiopia and Rwanda are also going in the same direction. They are leading in Africa just because of investing in the issues of Community Health Workers.

We cannot claim as Laikipia that we are doing anything important in the UHC if we are unable to strengthen and facilitate these people to perform. We need to put them under clear structures that can be able to be part of health workers in this country.

Finally, is on the issues of accrediting our facilities. It is very unfortunate that we have accredited a number of facilities at lower levels. These facilities are unable to provide both outpatient and in-patient services and claims. This is because we have been unable to provide them with a platform which is able to provide both in-patient and outpatient services.

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I think that for us to enjoy these issues of accreditation and NHIF registration, we need to devolve these services further to the lower levels of the health sector. The motion is so clear with the objective on what we want to happen in this area. I wish to call upon Hon. Lukio to second this motion. Thank you.

Hon. Judy Lukio: Thank you, Mr. Speaker. I stand to second this important motion brought by Hon. Matunge. He has analysed it very well. I second the motion.

(Question proposed)

Hon. Catherine Nyawira: Thank you, Mr. Speaker. I wish to congratulate the mover of the motion. This is a motion that speaks to us as a community. Recently, we had a Corona Virus pandemic outbreak not only in the country but also in the world. This disease has not spared somebody in Doldol, Nanyuki or Nairobi. The treatment was the same. I believe that if these health workers had been empowered to do it from the community level, it would have never moved out to other levels to seek help.

Devolving the management team to the sub-county levels is a very important decision. This is because this will be able to handle issues are affecting them in ways acceptable to them, within guidelines and in a speedy time. I believe that this motion is very detrimental. I support. Thank you.

Hon. Joseph Suge: Asante, Mheshimiwa Spika. Nimesimama kuunga mkono huu mjadala. Niruhusu kwanza niweze kumshukuru Mheshimiwa Matunge kwa kuweza kuwasilisha hili suala katika hili Bunge tukufu. Huu mjadala umekuja kwa wakati unaofaa.

Tumekuwa na shida kwa sababu ya masuala ya ugonjwa wa Korona. Umekuwa ugonjwa wa tishio siyo tu Laikipia bali pia kwa taifa na dunia nzima. Tulijifunza mengi sisi kama wana Laikipia. Suala hilo lilitutahadharisha ya kwamba lazima tukae tukiwa tumejihami na kujizatiti kama kaunti.

Masuala ya afya yanaguza wana Laikipa na afya yetu sisi wote. Tunapokuwa katika hili Bunge na kufanya kazi katika maeneo yetu bila afya hakuna kitu kinachoweza kuendelea. Kusema ukweli nilipopitia mjadala huu, nimeona aliyewasilisha ameorodhesha mambo manne aliyoomba kaunti iweze kufuatilia. Haya ni mambo yanayostahili kupewa kipaumbele na kuzingatiwa ili masuala ya afya yaweze kuinuka katika kaunti yetu.

Juzi tumesikia mambo yaliyokuwa katika hospitali ya Pumwani katika mitandao ya kijamii. Watoto wadogo waliweza kushuhudia ya kwamba kuna shida katika sekta ya afya. Ilikuwa ni kama dhulma kwa yule mama aliyeweza kujifungulia pale mlangoni. Hiyo ni fedheha kubwa sana. Wazee na kina mama wanastahili kupewa heshima na huduma zinazostahili wanapohitaji usaidizi katika hospitali zetu kila mahali. Masuala ya kupanua hospitali zetu kule mashinani ni jambo nzuri. Kaunti ya Laikipia tuko na hospitali mbili kuu katika Nanyuki na Nyahururu.

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Ni changamoto wakati mgonjwa anasafirishwa kutoka mashinani hadi hizo hospitali. Sekta ya Afya ni sekta ambayo imechukua ushuru zaidi ya robo tatu. Hospitali zinafaa kuinuliwa na kupangwa kwa njia nzuri ziwe na *radiology* na vyumba vya upasuaji kwa sababu madaktari ambao tuko nao wakipelekwa hospitali kama ya Rumuruti ambayo haina nyumba ya upasuaji hawana kazi nyingi ya kufanya.

Kwa sababu ya usalama wa wagonjwa na madaktari, usiku kuna shida kwa sababu ugonjwa unaweza shuka wakati wowote. Ugonjwa ukitokea usiku kuna shida wakati mgonjwa anasafirishwa kwa sababu ya ukosefu wa usalama katika maeneo mengine. Ingekuwa ni vizuri kama kila kata ndogo iko na hospitali ambayo iko na mitambo yote. Nikielezea kuhusiana na wasimamizi katika Kaunti hii hakuna mahali ambapo kazi itafanyika vizuri kusipokuwa na wale ambao wamewajibika kwa niaba ya jamii.

Hii ni baadhi ya mambo ambayo yamelegeza matibabu katika hospitali zetu. Naomba kuwe na kamati katika kata ndogo ili wawe wakidhibiti hizo hospitali. Hilo litakuwa jambo la busara na naungana na Mheshimiwa Matunge hospitali zetu ziwe na kamati ili waweze kuziangalia. Mbeleni kulikuwa na kamati ambayo baadaye ilifutiliwa mbali ikisemekana ya kwamba wengine watanguliwe lakini hadi wakati huu bado kuna shida ambayo inastahili kushughulikiwa. Jambo lingine kuhusiana na CHV's juzi wakati Korona ilikuwa, kulikuwa na shida kwa sababu hakukuwa na watu walioko na ujuzi mashinani ili kupatiana sabuni na barakoa.

Ni jambo nzuri akina mama na vijana waweze kupatiwa ujuzi ili waweze kuwa na taaluma ya kutatua shida inapotokea mashinani. Hao CHVs ni vizuri waweze kusaidiwa kifedha kwa sababu wako na familia. Wako na kazi zao na hakuna kazi mtu anaweza kujitolea kila wakati ili kusaidia serikali ambayo iko na ushuru na nguvu ya kuajiri na kuwapatia elimu na ujuzi ambao unastahili. Hilo ni jambo nzuri. Maswala ya bima ya afya ni kimzungumkuti kwa sababu tuliweza kutumia Raslimali ya Laikipia kuzunguka katika kila pembe ya kaunti kuhamasisha watu wetu waweze kujiandikisha kaatika zahanati na hospitali zetu za serikali.

Bwana Spika, watu wengi wamepuuza kwa sababu matibabu katika hospitali yako chini. Wakati mwingine dawa zinakosa. Ndio maana wananchi wengi wanaegemea upande wa hospitali za kibinafsi kwa mambo ya bima. Hii ni pesa ambayo ingeweza kuinua ushuru katika hospitali zetu. Najua hili jambo likiweza kufuatiliwa na kuimarishwa, wananchi wetu wako tayari kuungana na kuhamasisha bima katika hospitali zetu.

Kwa hayo machache Mheshimiwa Spika, nashukuru na tujue kuna shida kwa sababu hospitali zingine hazina *generators*. Ile ya Hospitali ya Rumuruti inarekebishwa kila wakati. Ya Hospitali ya Kimanju pia ilikuwa imekwama na hii inatueleza kuna shida ambayo inafaa kutatuliwa. Naunga mkono na viongozi ambao tumewajibika kwa niaba ya wengi tuhakikishe tumewasukuma tuone watu wetu wanasaidiwa kila wakati wanahitaji matibabu. Nashukuru.

Speaker: May I now call upon the mover to give a reply.

Hon. Peter Matunge: I wish to take this chance to thank the Hon. Members who have contributed. They understand the importance of this motion because we are saying our sub-county hospitals are in level 4 but being in level 4, Laikipia County is disadvantaged because

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we do not have level 6 hospitals. We depend in other counties. The higher the level the higher the specialised services we get. Just to give some pictures, what actually is supposed to be in a level 4 hospital is what we are getting in Nanyuki and Nyahururu.

Level 4 sub-county hospitals are supposed to be giving a comprehensive specialised staff both emergencies and general. These hospitals are supposed to manage medical surgical and radiology services at sub-county level. Renal dialysis is supposed to have a capacity of not less than 150 beds for ICU, HDU and Radiology. To be at level 4 sub-county hospital you need to have not less than 16 resident medical officers and at least two specialised medical doctors, 2 general surgeons, 2 gynaecologists, 2 paediatricians and 2 radiologists.

Mr. Speaker, just to give a picture these services we ought to have are not in Nanyuki. It is just the other day Corona came and we were able to put 6 ICU beds. When we say we need to expand our level 4 hospitals we really know what we are talking about. We know the kind of hospitals we want and I wish this government can take some motions seriously after being moved here. Many counties are far ahead of us like Kakamega which is putting up a second level 6 hospital. Kiambu County has more than 6 level 6 hospitals.

We are just depending on Nyeri and Meru County for level 6 services. The more you have level 5 and level 6 hospitals, the more we get money from the government to support those hospitals because there are direct grants to those hospitals from the National Government. With those few remarks, I thank the Hon. Members for supporting this motion. Thank you.

(Question put and agreed to)

ADJOURNMENT

Speaker: This House now stands adjourned until Tuesday, 29th September, 2020 at 2.30 p.m.

The House rose at 3.05 p.m.

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