



## NAIROBI CITY COUNTY ASSEMBLY

### THE REPORT OF THE COMMITTEE ON HEALTH SERVICES ON SITE INSPECTION VISIT TO EASTLEIGH HEALTH CENTRE

*Paper laid on the  
Floor of the Assembly  
by Hon. Kariuki on  
Tuesday 25th Oct. 2016  
Attested  
Plca/101  
25/10/16*

CLERK'S CHAMBERS,  
CITY HALL,  
NAIROBI.

JULY, 2016

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## PREFACE

The sectoral Committee on Health Service is one of the Sectoral Committees established under Standing Order 191. It is mandated under the Second Schedule to among other functions oversee all matters related to County health services, including, in particular County health facilities and pharmacies, ambulance services and promotion of primary health care.

The Sectoral Committee on Health Services conducted an inspection visit to Eastleigh Health Centre whose objective was to inspect health care service provision in respect to drug supply, free maternity reimbursement, security of the facility, human resource, facilities, water and power supply, among others.

This concern was raised by the Ward Representative for Eastleigh who attended a meeting of the Committee which subsequently visited the facility on 9<sup>th</sup> July 2016 out of emphasis that firsthand information will be key to compiling of a report to be resolved upon by the Assembly upon adoption by the Committee.

## LIST OF ABBREVIATIONS

|        |                                        |
|--------|----------------------------------------|
| KEMSA  | - Kenya Medical Supplies Authority     |
| M.C.H  | - Maternal and Child Health            |
| O.P.D  | - Out Patient Department               |
| TB     | -Tuberculosis                          |
| UNICEF | - United Nations Children's Foundation |

## MEMBERSHIP OF COMMITTEE

The Committee on Health Service comprises the following members:

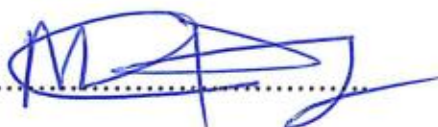
1. Hon. Manoah Karega Mboku, MCA - Chairman
2. Hon. Martin Mugo Kanyi, MCA - Deputy Chairman
3. Hon. George Ochieng Ochola, MCA
4. Hon. Samwel Nyaberi Nyang'wara, MCA
5. Hon. Peter Oweru Oluoch, MCA
6. Hon. Erastus Muiruri Mburu, MCA
7. Hon. Peter Wahinya Kimuhu, MCA
8. Hon. Charles Thuo Wakarindi, MCA
9. Hon. Tabitha Juma, MCA
10. Hon. Rose Nancy Luchiri, MCA
11. Hon. Florence Athembo, MCA
12. Hon. Susan Karimi Njue, MCA
13. Hon. Mohamed Abdi, MCA
14. Hon. Leah Mumo Mate, MCA
15. Hon. Karen Wanjiku, MCA
16. Hon. Peter Imwatok, MCA
17. Hon. Catherine Okoth, MCA

Hon. Members,

On behalf of the Members of Sectoral committee on Health Services, it is my pleasant duty and privilege, to present the Committee's Report on the inspection visit to Eastleigh Health Centre.

DATE.....17/10/16

HON. MANOAH KAREGA MBOKU, CHAIRMAN

SIGN.....

## ACKNOWLEDGEMENTS

The Sectoral Committee on Health Services wishes to thank the offices of the Speaker and the Clerk of the Nairobi City County Assembly for the support extended to it in the conduct of this site inspection visit.

Further, the Committee is thankful to the Secretariat for their contributions during and after the visit and compilation of this report.

Finally, many thanks to the Members of the Sectoral Committee on Health Services. Your commitment during the site inspection visit contributed immensely to the compilation of this report.



## 1.0 BACKGROUND INFORMATION

The Eastleigh Health Centre is one among the health facilities under the Nairobi City County and is located in Eastleigh Airbase Ward in Kamukunji Sub- County. The facility has three sections operational sections, namely; the maternal and child health (MCH), the Out Patient Department (OPD) and the Laboratory.

## 1.1 FINDINGS, CONCLUSION AND RECOMMEDATION

### 1.2 FINDINGS

The Committee, first held a meeting with representatives of the County and Sub- County Health Management Teams as well as staff at the health facility who took the Members round the facility and briefed the Committee.

#### Briefing by the Officer in charge of the facility

- i. The Health facility has three section including the MCH, OPD and the Laboratory located apart: with this observation, the Committee raised concern over the security of the patients being moved from one section to the other across the roads;
- ii. The facility was to begin offering 24 hour services to the residents: the Committee was concerned that the 24 hour health services will not be feasible since the OPD itself is not properly equipped in terms of drugs, electricity connection and security of the facility as the perimeter wall is not complete;
- iii. The facility attends to an average of 80-100 patients of below 5 years and between an average of 150 patients of above 5 years in a day. This is against a lean staffing of 2 clinical officers, 4 nurses and a nutritionist.
- iv. The facility is not well secured because of inadequate security staff, short or incomplete perimeter wall and poor lighting;
- v. The facility's pharmacy has only TB drugs and the others were expired owing to the KEMSA's push supply where drugs that are near expiry are supplied. The Committee was also informed that supply of drugs at the facility is not as per their request/order.

- vi. The laboratory of the facility lacks critical reagents save for TB;
- vii. There is lack of adequate supply of water to the health facility;
- viii. Sputum (samples of body fluids for tests) is collected at the waiting bay;
- ix. The last time the facility received the free maternity reimbursement and Health Sector Service Fund was in September 2015;
- x. The health facility lacks a National Environmental Management Authority (NEMA) approved incinerator for destruction of the health centre after use materials. Further, there is no means of carrying the materials to Pumwani Maternity Hospital that is closer with such incinerator;
- xi. There is lack of adequate toilet facilities and the County staff share the one available with patients; and
- xii. There is general sanitation challenges for lack of adequate staff to undertake sanitation works at the health facility.

### **Meeting with the Executive**

Mr. Speaker on 3<sup>rd</sup> August 2016, the Committee met with the County Executive Committee Member responsible for Health Services to deliberate on the status of the Health Centre. However, the CECM requested the Committee to allow the department more time to investigate the findings of the Committee and forward a report for further action.

### **Status report by the CECM Health Services**

On 7<sup>th</sup> October 2016, the Committee received a report from the County Executive Committee Member Health Services regarding the findings of the Committee from the site inspection visit to Eastleigh Health Centre.

#### **(a) The scattered services at the facility**

The Committee was informed that the Maternal and Child Health Department (MCH), Laboratory and Out Patient Department (OPD) of the facility are located apart due to two roads and other buildings cutting the facility. This compromises the smooth movement and general security of the patients as the patients move from one section to the other.



However, at the moment, there is little the Sector can do to reverse the scenario because relocating the two roads and other private developments may require high level multi-sectoral decision.

The alternative recommendation would be to consider separation of the facilities into two distinct ones, with different names in future.

#### (b) 24 hour service operation

The Committee was informed that Eastleigh Health Centre started offering the 24 hour services as recommended despite challenges of inadequacy of drugs and other commodities and security which the sector is keen on addressing.

#### (c) Staff shortage

The Committee was informed that the facility has high workload and needs additional staff, especially nurses to cope with the same. Since the inspection date, the facility has received two additional nurses. However, the clinical officers and laboratory staff are adequate. The challenge still lies with the cleaners which the Sector hopes to consider posting additional staff to the facility should staff be recruited in the near future.

#### (d) Security situation

The Committee learnt that insecurity in the Health Sector facilities remains a challenge and matter of great concern. The Sector acknowledged that a number of burglary cases targeting the County health facilities have been reported in the recent past. Currently, the health centres and dispensaries depend on the security personnel provided by the County Inspectorate Department which already seems to be overwhelmed.

Inadequate security staff at Eastleigh Health Centre has been taken up with Area Supervisor, City County Inspectorate and the facility is now minimally covered day and night.

However, the Sector is trying to seek authority to hire private security guards for hospitals and the high volume health centres like Eastleigh Health Centre.

Further, the perimeter wall fence that was started by Constituency Development Fund (CDF) stalled. Therefore, the Sector will seek for budgetary allocation to have it completed.

#### (e) Drugs and non-pharmaceutical situation

The Committee was informed that the County last received pharmaceutical and non-pharmaceutical supplies at the beginning of December 2015. The order fill rate then was approximately 75% with the total value of the order coming to Ksh. 227 Million. Out of the figure, Ksh. 59, 969, 080 were free items, that is, they were provided at no cost by KEMSA to the County. The County was invoice for the balance of Ksh. 167 million. These supplies were enough to cover the County for about one quarter of the financial year.

Currently, the outstanding debt for KEMSA is about Ksh. 78 million. KEMSA has indicated that the County's debt has gone beyond 90 days period and therefore, the County is expected to offset the full amount before placing new orders.

Ordering is still done online through the KMSA LMIS platform but even if the County submits new order, they will not be processed until the Accounts Department at KEMSA has cleared the County.

It is therefore imperative that the outstanding debt is settled as promptly as possible to address the current stock out of medicines, medical supplies and the resulting interruption in service delivery.

It is important to note that Nairobi City County has two primary supply pipelines: for essential medicines and medical supplies by KEMSA and programme commodities for TB, HIV, Malaria, reproductive health and vaccines.

##### *Essential medicines and supplies*

The Committee learnt that for essential medicines and medical supplies from KEMSA procured by the County. The County does not receive any items with an expiry shorter than 9 months. KEMSA has a policy of providing as donations for items with an expiry of below 6 months. The County has been a major beneficiary in the past. The Committee noted that all County orders are based on the PULL process where exactly what is ordered is supplied.

##### *Programme commodities*

The Committee was informed that programme commodities on the other hand are procured using a vertical system by the respective programmes at the National government as indicated below:



- National Malaria Control Programme for anti-malarial supplies;
- National AIDS and STI Control Programme for all HIV commodities; and
- National Tuberculosis, Leprosy and Lung Disease Programme for TB commodities.

Programme items are then stored and distributed on behalf of the programmes by KEMSA. When the County Facilities report and place a request the orders are rationalized by the programmes and a memo is generated indicating what and how much to supply to the respective facilities.

The said memo is then forwarded to KEMSA to commence the distribution process.

The main challenges with this system are as follows:

- ☐ i. They supply short expiry items; and
- ii. Use of PUSH process where facilities do not necessarily get what they request for.

#### **(f) Laboratory service**

The Committee learnt that the situation of the laboratory reagents in the County remains critical with most facilities experiencing stock outs.

The County laboratory coordinator has however done a list to the Chief Officer for Health Services to support reagents for Ante-Natal Clinic services. The same is still undergoing procurement process at City Hall.

Investigations have also revealed that the facility has a designated open corner, away from other patients for collecting sputum from cough patients as per the standard operating procedures.

#### **(g) Inadequate water supply**

The Committee was informed that it was detected that water line to the facility has been diverted to other buildings causing perennial shortage. This matter has already been taken up by the Sub- County Public Health Officer who is following up with Nairobi Water and Sewerage Company with hope of resolving the problem.

#### **(h) NEMA approved incinerator**

The Committee was informed that there is a general problem of modern incineration facilities in the County across the board. The Sector had made a proposal to have at least one functional incinerator in each Sub-County.

Eastleigh Health Centre does not have adequate space to support construction of modern incinerator. On the other hand, the water table in the area is high therefore compromising digging of placenta pit. At the moment, the placentas from the facility are taken to Bahati Health Centre for disposal. The Sector, however, is considering to purchase a macerator for the facility in the near future.

Meanwhile, Eastleigh Health Centre will continue using the incinerator at Pumwani Maternity Hospital. The Sub- County Health Administrator will support the transportation of the waste materials using the available open pick up.

**(i) Inadequate toilet facilities**

The Committee learnt that the facility is currently undergoing renovation of the maternity with support from UNICEF. This will include the staff and patient toilet facilities.

Additionally, the facility has been allocated Ksh. 4 million for the renovation by the County in FY 2016/2017. This will help address some of the infrastructural challenges currently experienced.

**(j) General sanitation challenges**

The Committee was informed that this problem is occasioned by inadequate staff. However, the Public Health Officer attached to the facility is making effort to manage the situation. Shortage of general cleaners to maintain proper cleanliness needs to be addressed by the Sector as soon as possible.

**(k) Free Maternity reimbursement and HSSF Funds**

The Committee learnt that the delayed reimbursement of funds to the facilities has been a general problem in the County which has affected quality of services in several facilities. This was occasioned by the slow action by the County Treasury.

The Sector is aware of this challenge and is making progress towards resolving the same and the funds will start flowing to facilities in due course.



### 1.3 CONCLUSION

The Sectoral Committee on Health Service is established and mandated by the County Assembly standing Order 191 and the Second Schedule. In pursuit of the foregoing, the Committee conducted an inspection visit to Eastleigh Health Centre to inspect quality of Health care provided and met with representatives of the County and Sub-County Health Management Team and the staff who briefed the Committee of the situation at the Hospital and guided the Committee around the facility. The Committee compiled a report with recommendations for the County Assembly's resolution.

## 1.4 RECOMMENDATIONS

The Committee urges that this assembly adopts this report of the Sectoral Committees on Health Services on the site inspection visit to Eastleigh Health Centre with recommendations as follows:

That the County Executive Health Services Sector be given 2 months to;

1. Ensure adequate and steady water supply to the facility;
2. provide three phase connection of electricity that will make it compatible with the stand by generator;
3. provide adequate toilet facilities for patients and staff;
4. Ensure reimbursement of Free Maternity money and disbursement of HSSF money to the facility;
5. Settle the KEMSA debt that is causing drugs shortage in the facility and others in the County;
6. Deploy adequate support staff to provide cleaning services for better sanitation and hygiene at the facility ;
7. Deploy more nurses, clinical officers, nutritionists and medical officers to the facility to handle the high number of patients that visit the facility.
8. Work on modalities to settle the current KEMSA debt and provide an annual schedule on procurement of pharmaceutical and non-pharmaceutical commodities and an agreed on payment plan with the County Treasury; and
9. Prioritize the completion of the perimeter wall around Eastleigh Health Centre in the next financial year's budget.

MINUTES 92 OF THE NAIROBI COUNTY ASSEMBLY HEALTH SERVICES COMMITTEE  
MEETING HELD MONDAY 17<sup>TH</sup> OCTOBER 2016 AT 11.00AM AT THE COUNTY  
ASSEMBLY FOYER, CITY HALL BUILDINGS

PRESENT

1. Hon. Manoah Mboku, MCA
2. Hon. Karen Wanjiku, MCA
3. Hon. Florence Athembo, MCA
4. Hon. Susan Karimu, MCA
5. Hon. Catherine Okoth, MCA
6. Hon. Tabitha Juma, MCA
7. Hon. George Ochola, MCA
8. Hon. Charles Thuo, MCA
9. Hon. Leah Mate, MCA
10. Hon. Peter Owera, MCA
11. Hon. Martin Kanyi, MCA

ABSENT

1. Hon. Samwel Nyangwara, MCA
2. Hon. Peter Imwatok, MCA
3. Hon. Erastus Mburu, MCA
4. Hon. Nancy Luchiri, MCA
5. Hon. Peter Wahinya, MCA
6. Hon. Abdi Mohammed, MCA

SECRETARIAT

1. Inyundele Austin – Committee Clerk

Min. No. 496/hsc/October/2016: Preliminaries

The Chair called the meeting to order at eleven O' Clock in the morning. The opening prayers were read by the Chair.

Min. No. 497/hsc/October/2016: Adoption of the agenda

The following Agenda of the meeting was adopted after being proposed by the Hon. Florence Athembo and being seconded by the Hon. George Ochola.

1. *Prayer*
2. *Adoption of the agenda*
3. *Adoption of the report of the site inspection visit to Eastleigh Health Centre*
4. *Any other business*



## 5. Adjournment

### Min. No. 498/hsc/October/2016: Adoption of the report of the site inspection visit to Eastleigh Health Centre

The Committee was informed that following a resolution of the Committee in a previous meeting, while considering the draft report of the visit to Eastleigh HC, that the Committee Clerk prepares a fine copy of the said report for the adoption of the Committee, the said fine copy had been prepared for adoption.

The Chairman requested that the copies of the report be circulated to all the Members for perusal.

The Members were led by the Chairman in reading through the report and agreed with the report with the following recommendations:

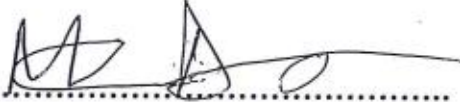
**That the County Executive Health Services Sector be given 2 months to;**

1. Ensure adequate and steady water supply to the facility;
2. provide three phase connection of electricity that will make it compatible with the stand by generator;
3. provide adequate toilet facilities for patients and staff;
4. Ensure reimbursement of Free Maternity money and disbursement of HSSF money to the facility;
5. Settle the KEMSA debt that is causing drugs shortage in the facility and others in the County;
6. Deploy adequate support staff to provide cleaning services for better sanitation and hygiene at the facility ;
7. Deploy more nurses, clinical officers, nutritionists and medical officers to the facility to handle the high number of patients that visit the facility.
8. Work on modalities to settle the current KEMSA debt and provide an annual schedule on procurement of pharmaceutical and non-pharmaceutical commodities and an agreed on payment plan with the County Treasury; and
9. Prioritize the completion of the perimeter wall around Eastleigh Health Centre in the next financial year's budget.

Therefore, the report was adopted having been confirmed by Hon. Peter Oweru and seconded by Hon. Martin Mugo Kanyi.

Min. No. 499/hsc/October/2016: Adjournment

There being no other business to consider, the meeting was adjourned four minutes past noon. The next meeting was scheduled for Monday 17<sup>th</sup> October, 2016 at 2.30 p.m.

CHAIRMAN ..... 

DATE ..... 19/10/16 .....

