



Ministry of Health

HEALTH SECTOR

MEDIUM TERM EXPENDITURE FRAMEWORK REPORT (PERIOD 2025/26 – 2027/28)

PRINCIPAL SECRETARY: STATE DEPARTMENT FOR MEDICAL
SERVICES/SECTOR CHAIRPERSON



OUTLINE

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1. INTRODUCTION

- ❖ The right to the highest quality of health is enshrined in the Constitution of Kenya and legislated in the Health Act 2017.
- ❖ Kenya Vision 2030 and the Medium-Term Plan IV recognizes provision of Equitable, Accessible, Affordable and Quality Healthcare.
- ❖ Health care is one of the five pillars of the Bottom-UP Economic Transformation Agenda (BETA)
- ❖ Kenya Health Policy (KHP 2014 -2030) – commits the sector to achieving the SDGs, especially focusing on SDG 2&3.
- ❖ Priorities for the Medium-Term period focuses on all aspects of the health care systems aimed to prevent, treat and control diseases, including the non-communicable diseases, as well as revitalize UHC aspirations of quality and affordable healthcare for all Kenyans .

Sector Vision and Mission

- **Vision:** “A healthy, productive and globally competitive Nation.”
- **Mission:** “To build a progressive, responsive and sustainable health care system for accelerated attainment of the highest standard of health to all Kenyans.”
- **Goal:** “To attain equitable, affordable, accessible and quality health care for all.”

Sector Strategic Objectives

- ❖ To eliminate communicable diseases
- ❖ To halt and reverse the rising burden of non-communicable diseases
- ❖ To reduce the burden of violence and injuries
- ❖ To provide essential health care
- ❖ To minimize exposure to health risk factors
- ❖ To strengthen collaboration with private and health related institutions
- ❖ To strengthen health professionals' regulatory mechanisms
- ❖ To strengthen health workforce production and management system

Sector Mandate

- Schedule 4 of the Constitution assigns the National Government the following functions:
 - ❖ Health Policy
 - ❖ Health regulations
 - ❖ National referral health facilities
 - ❖ Capacity building
 - ❖ Technical assistance to counties
- The Government has also outlined the core mandates of the Ministry of Health through Executive Order No. 2 of November 2023 implemented by two State Departments Namely;
 1. State Department for Medical Services
 2. State Department for Public Health and Professional Standards

Sector Programmes

State Department for Medical Services

Programme	Programme objectives	Outcomes
Programme 1. National Referral and Specialized Services	To increase access and range of quality specialized healthcare services	Increased access and range of quality specialized health services
Programme 2: Curative and Reproductive Maternal Neonatal Child & Adolescent Health (RMNCAH) Services	To increase access to quality curative and reproductive healthcare services	Increased access to quality curative healthcare services
Programme 3: Health Innovations and Research	To increase capacity and provide evidence for policy formulation and practice	Increased health research and innovations
Programme 4: General Administration, Planning and Support Services	To offer governance and enabling services for service delivery	Strengthen governance and leadership in the State Department

Sector Programmes

State Department for Public Health and Professional Standards

Programme	Programme objectives	Outcomes
Programme 1. Preventive and Promotive Health Services	To reduce disease burden due to preventable causes	Reduced disease burden due to preventable causes
Programme 2. Health resource development and innovation	To enhance health human resources for quality health care	Enhanced health human resources for quality healthcare
Programme 3. Health Policy Standards and Regulations	To strengthen quality health standards & regulations	Strengthened quality health standards and regulations
Programme 4. General Administration, Planning and Support Services.	To strengthen governance and leadership in the sector	Effective governance and administration strengthened

Role of Stakeholders



- Resources mobilization
- Technical and financial support to meet health sector objectives
- Legislation
- Policy formulation and implementation
- Training and capacity building
- Research & Development
- Support health systems strengthening interventions

2. SECTOR PERFORMANCE REVIEW FY 2021/22–2023/24

- ❖ One Million indigent households identified were covered under the government social health insurance scheme nested in NHIF/SHA annually over the period.
- ❖ Number of mothers who registered through the Linda mama program were 2,618,909 reported over the period.
- ❖ 253,400 orphans and vulnerable children (OVC) household were covered under Health Insurance Subsidy Program (HISP) annually.
- ❖ 58,800 households were covered under Older Persons and Persons with Severe Disability (OPSD) program annually over the period.
- ❖ Number of HIV patients on Antiretroviral Treatment (ART) increased from 1,299,152 to 1,362,515
- ❖ Percentage of newly identified HIV positive and breastfeeding women initiated on HAART increased from 93% to 96.3% in the period.
- ❖ Confirmed malaria per 1000 population shows a decrease from 105 to 88.5.

SECTOR PERFORMANCE REVIEW FY 2021/22–2023/24

- ❖ TB cases notified has improved from 82,517 to 97,126
- ❖ Proportion of successfully treated TB cases (all forms of TB) increased from 84% to 89%
- ❖ Proportion of multi drug resistant TB successfully treated reduced from 79% to 78% over the period.
- ❖ Electronic patient health records system for diabetes and hypertension was rolled out in 98 health facilities during the period.
- ❖ Three (3) regional cancer centers were established in Garissa, Mombasa, and Nakuru counties. Establishment of two (2) regional centres in Meru and Kakamega was initiated.
- ❖ Health care facilities with laboratory capacity to detect and report on Antimicrobial Resistance (AMR) increased from 6 to 22.
- ❖ Number of accredited laboratories in the ASAL categorized cohort increased from 3 to 4.

SECTOR PERFORMANCE REVIEW FY 2021/22–2023/24

- KNH, MTRH and KUTRRH conducted 1,993 open heart surgeries, 33,407 minimally invasive surgeries, 106 kidney transplants, 237,506 chemotherapy and radiotherapy sessions over the period
- 9,277 patients benefited from the PET scan examination from KUTRRH.



SECTOR PERFORMANCE REVIEW FY 2021/22–2023/24

- ❖ Proportion of Women of reproductive age receiving Family Planning commodities also increased from 52.4% to 53%.
- ❖ Number of facilities based neonatal deaths was averaged 9.3 for the period.
- ❖ Number of pre-school and school going children dewormed (Millions) increased from 5.4 to 9.4 in the period under review.
- ❖ Proportion of fully immunized children averaged 85.5 during the period.
- ❖ Orthopaedic Trauma Registers (MOH 274) was developed.
- ❖ Vitamin A Supplementation coverage was 86% in 2022/23 and 85% in 2023/24 due to Malezi Bora.
- ❖ Villages certified as open defecation-free decreased from 30 to 6 during the period under review.

SECTOR PERFORMANCE REVIEW FY 2021/22–2023/24

- ❖ 118 hospitals across all the 47 counties facilities benefitted from the Managed Equipment Services with Uninterrupted services due to an uptime of more than 95%.
- ❖ EAKI was at 98% completion rate as at 30th June 2024.
- ❖ Health equalization funded projects appropriated for the 33 projects in the period.



SECTOR PERFORMANCE REVIEW FY 2021/22–2023/24

- ❖ Number of students enrolled at KMTCs increased from 21,700 to 27,426.
- ❖ KEMRI conducted 2.56 million specialized laboratory tests and produced 873,569 diagnostic kits over the period.
- ❖ The percentage of health facilities inspected for compliance to norms and standards of healthcare delivery by KHPOA stood at 22%.

SECTOR PERFORMANCE REVIEW FY 2021/22–2023/24

- ❖ 20 health facilities had oxygen machines delivered and commissioned (PSA Plants and with liquid oxygen tanks).
- ❖ 5 Pressure Swing Adsorption (PSA) plants were installed with 22 more under procurement tenders.



SECTOR PERFORMANCE REVIEW FY 2021/22–2023/24

- ❖ The patients receiving orthopaedic surgeries services at the Spinal Injury Hospital stood at 300 during the review period.
- ❖ Number of patients receiving inpatient and outpatient specialized mental health services were 399 and 2,220 respectively. These were nested at Mathari National Teaching and Referral Hospital (MNTRH)
- ❖ KNBTS collected blood units of 449,689 in FY 2023/24, compared to 412,868 in 2022/23 and 273,349 in 2021/22
- ❖ Order fill rate for essential HPTs was 62% in 2023/24 from 68% in 2021/22.

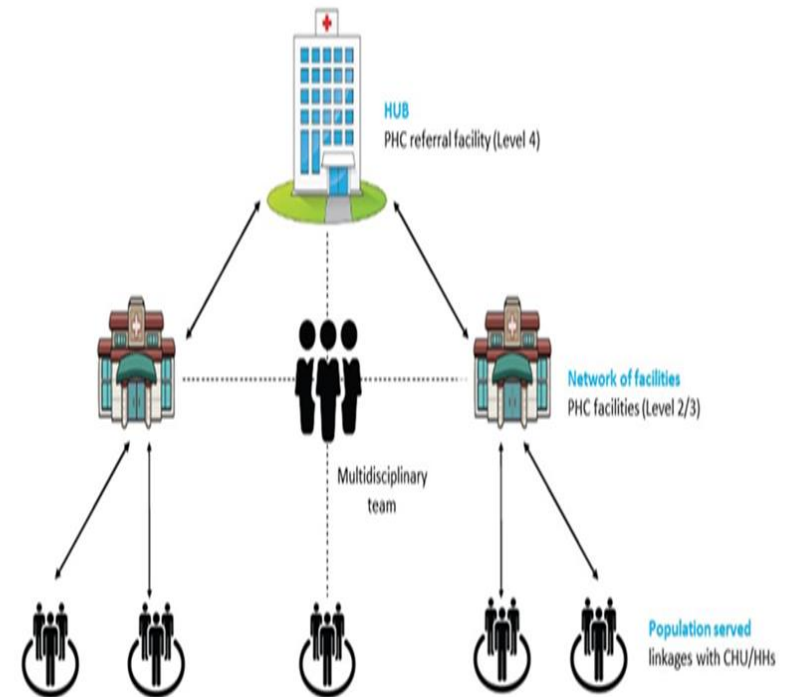
SECTOR PERFORMANCE REVIEW FY 2021/22–2023/24

- ❖ Primary Healthcare Act, 2023, Digital Health Act, 2023, Social Health Insurance Act, 2023 and the Facility Improvement Financing Act, 2023 were all assented to in FY 2023/24.
- ❖ The Quality of care Bill was developed and is awaiting finalization and Cabinet approval.
- ❖ County Facility Improvement Fund Bill and National FIF Bill developed
- ❖ Clinical Guidelines for management and referral of common health conditions developed

SECTOR PERFORMANCE REVIEW FY 2021/22–2023/24

Primary Healthcare

- ❖ 191 hospitals were mapped as primary healthcare hubs in FY 2023/24, far exceeding its target of 47 and the previous year's total of 20.
- ❖ Electronic Community Health Information System (eCHIS) was successfully deployed across all 47 counties.
- ❖ 94,390 Community Health Promoters (CHPs) received Ksh. 2,500 stipend in the period under review.



Financial Review for FY 2021/22-2023/24

- ❖ The Sector's approved budgetary allocation was **Kshs. 129.78** Billion in FY 2021/22, **Kshs. 116.4** Billion in FY 2022/23 and **Kshs. 134,437** Billion in FY 2023/24.
- ❖ The actual expenditures were at **Kshs. 109.4** billion, **Kshs. 98.66** billion and **Kshs. 110,424** billion for the financial years, 2021/22 and 2022/23 2023/24 respectively. This represents Budget absorption rates at 84.3%, 84.8% and 82.1% FY 2021/22, FY 2022/23 and FY 2023/24 respectively.
- ❖ The resources were used prudently to provide the health services to the public over the period.

3. MEDIUM TERM PRIORITIES AND FINANCIAL PLAN FOR THE MTEF PERIOD 2025/26 – 2027/28



In line with the Bottom Up Economic Transformation Agenda, the sector will, over the Medium-Term Period FY 2025/26 – 2027/28, continue to accelerate the initiatives started under Universal Health Coverage (UHC). This is aimed at ensuring all Citizens have access to quality affordable healthcare without the risk of getting into financial hardship, with a special focus on the poor and vulnerable in the society.

MEDIUM TERM PRIORITIES AND FINANCIAL PLAN FOR THE MTEF PERIOD 2025/26 – 2027/28

The sector will focus on the following areas;



❖ Enhanced prevention and promotion of health through community involvement and ownership to reduce disease burden due to preventable causes.



❖ Universal seamless health insurance system comprising Emergency Chronic and Critical illness Fund, Primary Healthcare Fund and Social Health Insurance Fund (SHIF)



❖ Strategic recruitment, management, and retention of Human Resources for Health for enhanced quality health care.



MEDIUM TERM PRIORITIES AND FINANCIAL PLAN FOR THE MTEF PERIOD 2025/26 – 2027/28



- ❖ Strengthened governance and administration of health services, quality health standards & regulations



- ❖ Continuous capacity building and collaboration with county governments and strengthened Sector financing to ensure retention of funds collected at health facility level for improvement of the facility operations



- ❖ Fully publicly financed primary healthcare (Curative, outpatient and basic diagnostic services)

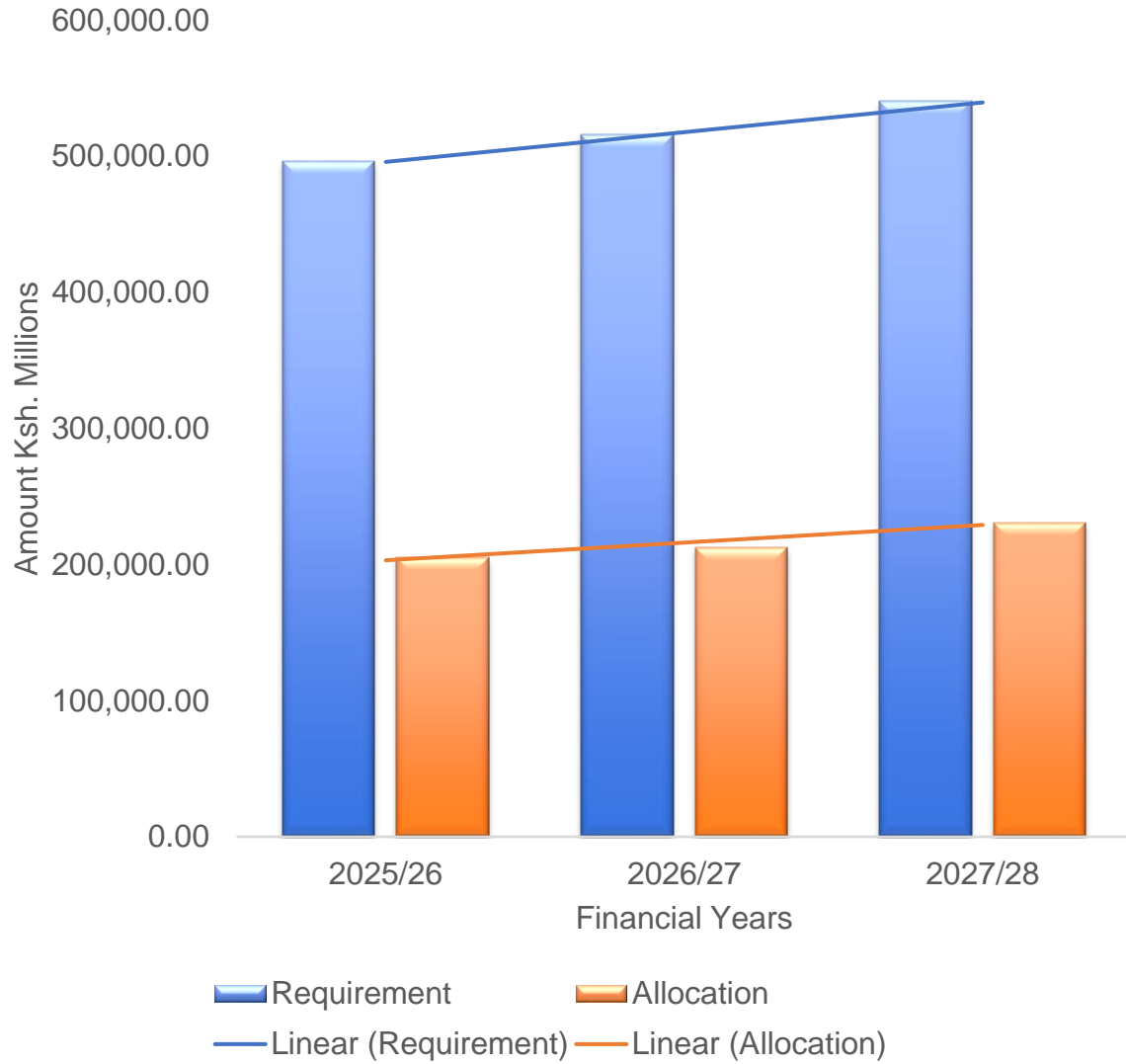


- ❖ Digitization of health services to increase efficiency, transparency and ensure seamless service delivery between providers across all levels of the health system

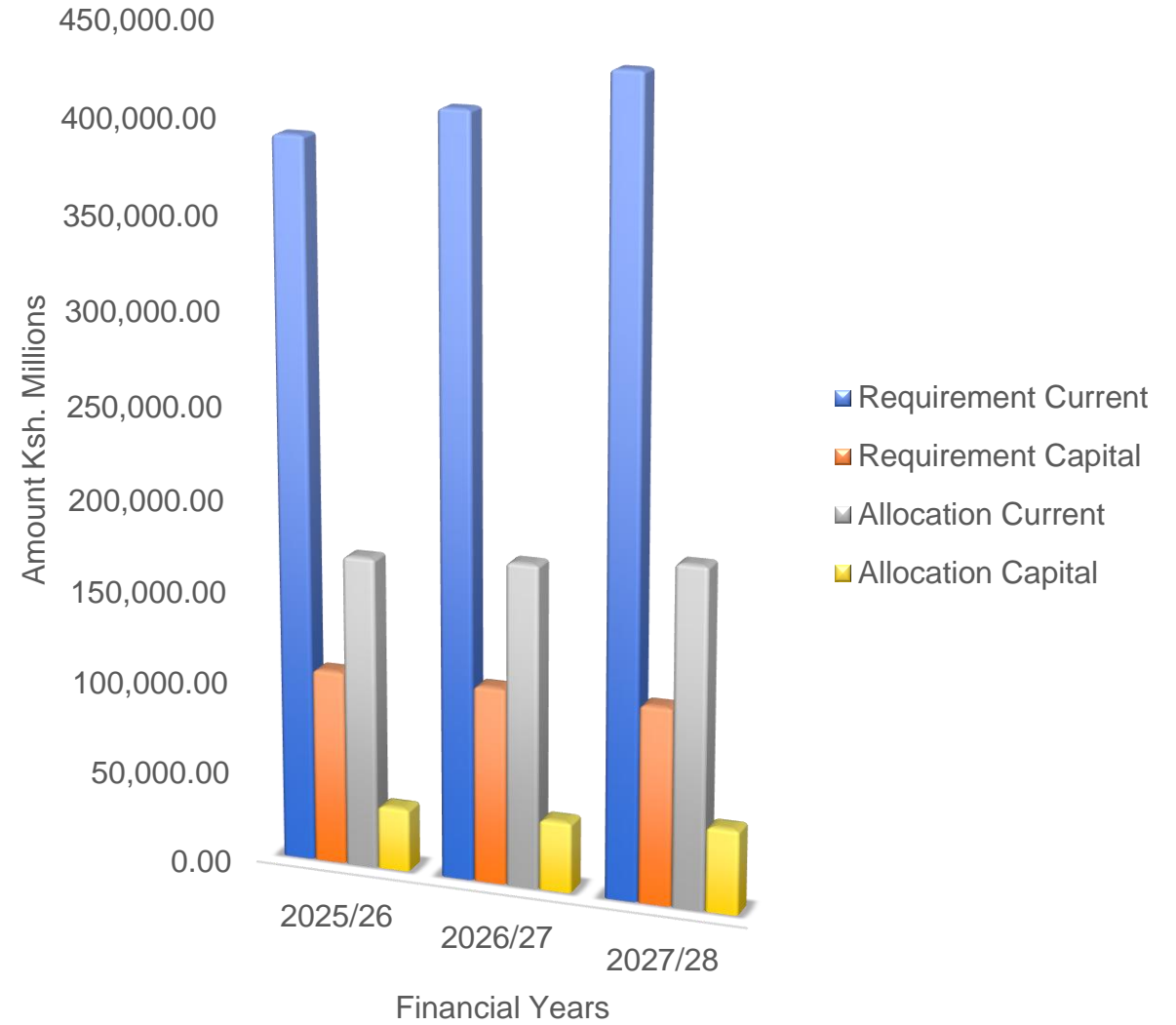
Financial Plan For The MTEF Period FY 2025/26-2027/28(Amount KSh. Million)

	Baseline	Requirement			Allocation		
Expenditure Classification	2024/25	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
Current Expenditure	86,828.66	390,475.93	408,712.99	432,879.48	170,447.97	176,241.74	184,863.93
Capital Expenditure	32,028.00	106,363.65	107,525.57	107,655.46	34,546.79	38,542.03	46,170.00
Total	118,856.66	496,839.58	516,238.56	540,534.94	204,965.92	212,754.34	230,954.82

MOH Resource Requirement VS Allocation in Ksh. Millions



MOH Current vs Capital Requirement & Allocation in Ksh. Millions



Sector Summary breakdown of recurrent requirements Vs allocation(Amount KSh. Million)

Economic Classification	Baseline Estimates 2024/25	REQUIREMENT			ALLOCATION		
		2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
GROSS	86,828.66	390,475.93	408,712.99	432,879.48	170,447.97	176,241.74	184,863.93
AIA	30,397.00	148,185.15	161,478.97	175,163.75	110,008.36	112,671.65	115,519.59
NET	56,431.66	242,290.78	247,234.02	257,715.73	60,439.61	63,570.09	69,544.54
Compensation to Employees	13,240.00	15,237.15	15,526.06	15,818.61	13,637.00	13,882.00	14,299.00
Transfers, Grants and Subscription	71,853.66	365,872.92	380,346.26	398,258.24	155,022.97	160,502.97	168,634.94
Other Recurrent	1,735.00	9,365.86	12,840.66	18,802.63	1,788.00	1,857.00	1,929.99

Sector Summary Breakdown Of Development Requirements Vs Allocation(Amount KSh. Million)

Category	Approved Estimates 2024/25	REQUIREMENTS			ALLOCATIONS		
		2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
Gross	32,028.00	106,363.65	107,525.57	107,655.46	34,546.79	38,542.03	46,170.00
GOK	14,908.50	85,207.80	87,214.11	88,365.69	17,556.00	23,264.00	32,848.00
Loans	9,281.30	11,830.00	9,827.00	11,112.00	8,992.00	4,500.00	5,400.00
Grants	7,838.20	9,825.85	10,484.46	8,177.76	7,998.79	10,778.03	7,922.00
Local AIA	-	-	-	-	-	-	-

Financial Analysis- State Department for Medical Services

Summary of Vote Requirements vs Allocations (Ksh. Million)

State Department for Medical Services

No.	Expenditure Classification	Baseline 2024/25	Requirement			Allocation		
			2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
1	Current Expenditure	64,242.47	350,614.88	364,380.55	378,572.89	144,127.42	148,717.06	155,419.91
2	Capital Expenditure	27,739.00	76,180.25	76,004.92	81,822.41	29,495.00	30,655.69	40,837.50
	Total	91,981.47	426,795.13	440,385.47	460,395.29	173,622.42	177,872.40	196,206.72

Summary breakdown of recurrent requirements vs allocation(Amount KSh. Million)

Economic Classification	Baseline Estimates 2024/25	REQUIREMENT			ALLOCATION		
		2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
GROSS	64,242.47	350,614.88	364,380.55	378,572.89	144,127.42	147,216.71	155,369.22
AIA	22,377.00	139,166.82	151,997.70	165,252.65	100,991.03	103,191.38	105,609.49
NET	41,865.47	211,448.05	212,382.85	213,320.24	43,136.31	45,525.67	49,810.41
Compensation to Employees	7,940.18	7,997.24	8,231.98	8,473.78	7,996.99	8,230.97	8,471.98
Transfers, Grants and Subscription	55,522.16	341,005.25	354,485.57	368,382.95	135,094.22	139,411.03	145,829.87
Other Recurrent	780.13	1,612.39	1,663.00	1,716.15	1,036.13	1,075.05	1,118.06

Summary breakdown of Development requirements vs allocation (Amount KSh. Million)

Category	Approved Estimates 2024/25	REQUIREMENTS			ALLOCATIONS		
		2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
Gross	27,739.00	76,180.25	76,004.92	81,822.41	29,495.00	30,655.69	40,837.50
GOK	13,207.50	59,337.54	60,389.57	64,632.64	15,366.00	20,533.69	29,015.50
Loans	9,281.30	11,330.00	9,827.00	11,112.00	8,492.00	4,500.00	5,400.00
Grants	5,250.20	5,512.71	5,788.35	6,077.76	5,637.00	5,622.00	6,422.00
Local AIA	-	-	-	-	-	-	-

Summary of Expenditure by Programme and Sub Programme(Amount KSh. Million)

Economic Classification	Approved Estimates 2024/25	RESOURCE REQUIREMENT			RESOURCE ALLOCATIONS		
		2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
P. 1: National Referral & Specialised services							
Sub-Total	55,499.76	80,644.47	80,617.62	86,059.56	55,009.00	59,093.57	65,641.74
P.2 Curative & Reproductive Maternal New Born Child Adolescent Health							
Sub-Total	16,477.15	21,778.06	22,394.76	24,486.13	17,430.00	15,889.27	18,938.30
P3: Health Research &Innovations							
Sub-Total	3,405.45	5,298.73	5,914.76	5,987.00	3,654.50	4,134.50	5,781.96
P. 4 – General Administration & Support Services							
Sub-Total	16,599.11	319,073.87	331,458.33	343,540.39	97,528.92	98,755.06	105,844.72
TOTAL	91,981.47	426,795.13	440,385.47	460,073.08	173,622.42	177,872.40	196,206.72

Recurrent Requirements VS Allocation for SAGAs (Amount KSh. Million)

No	SAGA	Approved Estimates 2024/25	Requirement			Allocation		
			2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
1	Kenyatta National Hospital	19,370.14	24,120.62	25,687.89	27,378.10	20,682.94	22,287.36	24,707.09
2	Moi Teaching & Referral Hospital	11,326.14	15,237.20	16,760.90	18,436.99	12,042.54	13,000.54	14,347.57
3	Kenya Medical Supplies Authority	5,207.33	7,767.56	8,581.44	6,911.00	5,366.88	5,718.26	5,945.20
4	Kenya Medical Research Institute	2,843.95	4,163.00	4,366.15	4,580.84	2,943.95	3,353.95	3,510.74
5	Kenyatta University Teaching Research and Referral Hospital	5,506.10	8,796.00	9,535.00	10,488.00	6,266.60	6,746.60	7,557.92
6	National Cancer Institute of Kenya	270.50	1,795.42	2,299.01	2,958.09	270.00	270.00	324.00

Recurrent Requirements VS Allocation for SAGAs (Amount KSh. Million)

No	SAGA	Approved Estimates 2024/25	Requirement			Allocation		
			2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
7	Mwai Kibaki Hospital	1,379.00	2,741.49	3,368.33	3,533.84	1,476.72	1,540.13	1,674.11
8	Mathari National Teaching and Referral Hospital	1,054.50	2,872.00	4,498.26	5,397.91	1,119.50	1,350.50	1,421.40
9	Digital Health Agency	100.00	1,385.95	2,534.05	2,746.90	224.20	226.68	249.22
10	Kenya Biovax Institute LTD	281.50	1,109.09	1,330.91	1,597.09	281.50	381.50	332.17
11	National Syndemic Control Council	1,121.95	1,324.00	1,364.00	1,405.00	1,179.95	1,296.07	1,391.24
12	Social Health Authority	14,822.11	13,714.45	14,217.57	14,733.61	3,918.02	3,918.02	3,918.02
13	Primary Health Care Fund	4,100.0	61,100.9	61,100.9	61,100.9	4,100.0	4,100.0	4,756.0
14	Social Health Insurance Fund	82,430.2	100,704.7	110,767.1	121,087.9	72,260.3	72,260.34	72,260.34
15	Emergency Chronic & Critical Illness Fund	2,000.0	107,189.2	107,189.2	107,189.2	2,000.0	2,000.0	2,320.0

Financial Analysis - State Department for Public Health and Professional Standards

Summary of Vote Requirements vs Allocations (Ksh. Million)

No.	Expenditure Classification	Baseline 2024/25	Requirement			Allocation		
			2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
1	Current Expenditure	22,586.19	39,861.06	44,332.43	54,306.59	26,320.63	27,524.69	29,444.03
2	Capital Expenditure	4,289.00	30,183.40	31,520.65	25,833.05	5,051.79	7,886.34	5,332.50
	Total	32,028.00	106,363.65	107,525.57	107,655.46	34,546.79	38,542.03	46,170.00

Summary breakdown of recurrent requirements vs allocation(Ksh. Million)

Economic Classification	Baseline Estimates 2024/25	REQUIREMENT			ALLOCATION		
		2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
GROSS	22,586.19	39,861.06	44,332.43	54,306.59	26,320.71	27,524.69	29,444.03
AIA	8,020.00	9,018.33	9,481.27	9,911.10	9,017.33	9,480.27	9,910.10
NET	14,566.19	30,842.73	34,851.16	44,395.49	17,303.30	18,044.42	19,533.93
Compensation to Employees	5,299.82	7,239.91	7,294.08	7,344.83	5,640.01	5,651.03	5,827.02
Transfers, Grants and Subscription	16,331.50	24,867.67	25,860.69	29,875.29	19,928.83	21,091.71	22,805.07
Other Recurrent	954.87	7,753.47	11,177.66	17,086.47	751.87	781.94	811.94

Summary breakdown of Development requirements vs allocation(Ksh. Million)

Category	Approved Estimates 2024/25	REQUIREMENTS			ALLOCATIONS		
		2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
Gross	4,289.00	30,183.40	31,520.65	25,833.05	5,051.79	7,886.34	5,332.50
GOK	1,701.00	25,370.26	26,824.54	23,733.05	2,190.00	2,730.31	3,832.50
Loans	-	500.00	-	-	500.00	-	-
Grants	2,588.00	4,313.14	4,696.11	2,100.00	2,361.79	5,156.03	1,500.00
Local AIA							

Summary of Expenditure by Programme and Sub Programme (KSh. Million)

Economic Classification	RESOURCE REQUIREMENT			RESOURCE ALLOCATIONS		
	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
P. 1: Preventive and Promotive services						
<i>Sub-Total</i>	34,276.02	38,254.63	37,633.62	12,175.60	13,419.41	10,335.46
Programme 2 - Health Resource Development and Innovation						
<i>Sub-Total</i>	25,266.21	25,926.43	30,086.16	10,217.01	11,300.93	13,037.10
Programme 3 - Health Policy, Standards and Regulations						
<i>Sub-Total</i>	9,800.92	8,574.29	10,392.15	8,638.57	9,839.36	10,997.77
Programme 4 - General Administration & Support Services						
<i>Sub-Total</i>	1,927.93	1,871.11	2,027.71	312.32	322.24	377.77
TOTAL	70,044.46	75,853.08	80,139.64	31,343.50	34,881.94	34,748.11

Recurrent Requirements VS Allocation for SAGAs (Ksh. Million)

No	SAGA	Approved Estimates 2024/25	Requirement			Allocation		
			2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
1	Kenya Medical Training College	8,561.69	16,538.00	16,410.00	19,297.00	8,861.69	10,019.58	10,328.44
2	Kenya Medical Practitioners and Dentists' Council	705.00	921.00	962.00	1,026.00	730.00	845.58	1,026.00
3	Kenya Health Professions Oversight Authority	170.03	195.53	251.86	323.09	175.03	251.86	253.16
4	Kenya Nuclear Regulatory Authority	198.81	297.00	326.00	357.00	208.81	326.00	357.00
5	Kenya Institute of Primate Research	375.52	1,355.64	1,355.64	1,423.42	376.52	576.52	835.98
6	Public Health Officers and Technicians Council	50.00	100.00	140.00	200.00	50.00	140.00	200.00

Recurrent Requirements VS Allocation for SAGAs(Ksh. Million)

No	SAGA	Approved Estimates 2024/25	Requirement			Allocation		
			2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
7	Kenya Health Human Resource Advisory Council	54.78	455.80	645.40	709.90	54.78	165.36	248.38
8	Tobacco Control Board	30.00	132.80	500.40	920.80	30.00	140.58	276.86
9	Kenya National Public Health Institute	33.64	781.63	819.81	867.92	33.64	144.22	284.22
10	Nursing Council of Kenya	625.00	771.00	833.55	890.28	694.92	727.64	918.70
11	Clinical Officers Council	182.28	212.28	231.20	251.01	182.28	231.20	251.01
12	Occupational Therapy Council of Kenya	24.00	72.00	100.00	120.00	24.00	100.00	120.00

Recurrent Requirements VS Allocation for SAGAs(Ksh. Million)

No	SAGA	Approved Estimates 2024/25	Requirement			Allocation		
			2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
13	Tobacco Control Fund	831.00	872.55	916.18	961.99	872.55	916.18	961.99
14	Counsellors and Psychologists Board	30.00	130.08	180.78	199.64	30.00	140.58	199.64
15	Pharmacy and Poisons Board	1,614.22	2,265.00	2,404.68	2,533.55	2,059.00	2,404.68	2,533.55
16	Physiotherapy Council of Kenya	116.00	140.00	156.00	180.00	58.00	156.00	180.00
17	Kenya Medical Laboratory Technicians & Technologist Board (KMLTTB)	-	250.00	260.00	270.00	250.00	260.00	270.00
18	Health Records & Information Managers Board	-	59.00	76.20	90.63	18.00	76.20	90.63

CAPITAL PROJECTS & PROGRAMMES

- ❖ The Health Sector has a total of **46** projects funded by GOK as well as development partners.
- ❖ Total allocation for the projects in FY 2025/26 is **Kshs. 34,546.79** Million with GOK financing **Ksh. 17,556** Million while Foreign government financing **Ksh. 16,990.79** Million.
- ❖ The following are the capital projects and programmes in details;

	Project Title	Financing			Approved Budget 2024/25		Allocation for FY 2025/26	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
1	KNH Burns and Paediatrics Centre	6,160	4,183	1,977	425	1,711	300	963
2	Cancer & Chronic Disease Management Centre – MTRH	1,843	1,393	450	102	-	100	-
3	Expansion and Equipping of ICU-MTRH	439	438.8	-	-	-	100	-
4	Refurbishment/Renovation and Replacement of Obsolete Equipment - KNH	8,059	8,059	-	500	-	450	-
5	Expansion of Comprehensive Cancer Centre - KUTRRH	6,160	6,160	-	50	-	250	-
6	Renovation/Equipping Buildings-Mathari Teaching & Referral Hospital	1,650	1,650	-	50	-	200	-
	Strengthening of Cancer Management at KNH	3,656	3,656	0	191.5	-	450	-



	Project Title	Financing			Approved Budget 2024/25		Allocation for FY 2025/26	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
7	Construction of a Wall, renovation & Procure Equipment at National Spinal Injury Hospital	791	791	-	50	-	100	-
8	Integrated Molecular Imaging Centre	2,332	2,332	-	-	-	0	-
9	East Africa's Centre of Excellence for Skills & Tertiary Education	5,174	634	4,540	200	1,100	100	600
10	Acquisition of Specialized Medical Equipment CHP	26,000	26,000	-	2,000	-	1,000	-
11	Primary Health Care in the Devolved Context	2,935	-	2,935	-	577	-	578
12	Upgrading and Equipping of Maternal and New born Ward Endebess Hospital	500	-	500	-	70	37	-
13	EA's Centres of Excellence for Skills and tertialy education in Biosciences II	3,200	-	3,200	-	838		
14	Procurement of Equipment at the National Blood Transfusion Services	10,396	10,396	-	300	-	500	-

	Project Title	Financing			Approved Budget 2024/25		Allocation for FY 2025/26	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
15	National Commodities Storage Center (KEMSA)- (Initial Contract value)	3,977	3,004	973.1	50	-	100	-
16	Health Emergency Preparedness, Response and Resilience Program	2,000	-	2,000	-	1,000	-	2,000
17	Special Global Fund HIV Grant NFM3- NASCOP	37,641	31,906	5,735	3,000.0	583.2	3,000	1,439
18	Special Global Fund HIV Grant NFM3-NSDCC	1,216	-	1,216	-	450	-	260
19	9TH GoK/ UNFPA 10th County Programmes MOH NSDCC HIV -UNFPA	3,500	-	3,500	-	10	-	10
20	Establishing of Regional Cancer Centers	8,000	8,000	-	50	-	50	-
21	Construction of a Cancer Centre at Kisii Level 5 Hospital	2,280	280	2,000	50	517.7	100	1,000
22	Procurement of Family Planning & Reproductive Health Commodities	12,215	12,215	-	500	-	1,000	-

	Project Title	Financing			Approved Budget 2024/25		Allocation for FY 2025/26	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
23	Integrated Reproductive Health Programme	3,550	0	3,550	-	710	-	750
24	Upgrading of Maternal & New Born Units Project-VAMED-FINLAND	3,185	-	3,185	-	1,270	-	1,600
25	Vaccines Programme	88,889	70,999	17,890	2,000	2,600	2,500	2,600
26	Supply of Medical Equipment and Associated Services & Fight for Maternal y and Infant Mortality	4,254	-	4,254	-	844	-	694
27	GESDeK COVID - 19 Response Project	3,860	-	3,860	-	-	-	797
28	Digital Health Platform- BETA	10,000	10,000	-	50	-	150	-
29	Human Vaccine Production (BIOVAX)	6,400	6,400	-	150	-	150	-
30	Construction and upgrading of KEMRI Laboratories (Nairobi, Kwale, Busia, Kombewa, Kirinyaga)	3,450	3450	-	80	-	80	-

	Project Title	Financing			Approved Budget 2024/25		Allocation for FY 2025/26	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
39	Department of Health Systems Strengthening	1,500.00	-	1,500.00	-	501.00	-	889.00
40	Construction of an Examination Centre - KMPDC	1,000.00	1,000.00	-	-	-	40.00	-
41	Research and commercialization of Snake Antivenom to support Universal Health Care	1,892.00	1,892.00	-	-	-	100.00	-
42	Infrastructure upgrade at Kenya Institute of Primate Research	252.00	182.00	70.00	10.00	-	52.00	-
43	Procurement of Anti TB Drugs Not covered under Global fund TB Programme	10,678.00	10,678.00	-	-	-	300.00	-
44	Special Global Fund TB Grant NFM3.	2,998.00	-	2,998.00	-	587.00	-	606.79
45	Central Radio active waste processing facilities	10,000.00	10,000.00	-	100.00	-	78.00	-
46	Construction and Equipping of Health Centers	2,000	2,000	-	410	-	200	-

5. EMERGING ISSUES

- ❖ Advancements in artificial intelligence, machine learning, drone technology, telemedicine, and high-speed internet connections have presented opportunities for improved access to and quality of health services and HPTs,
- ❖ Extreme changes in weather conditions caused by the effects of global climate change and related calamities pose a great risk to the state of health in the country. Further, drought persistence has led to increased cases of malnutrition as well as increase in WASH related diseases
- ❖ Positioning Kenya as a medical tourism hub through state of the art facilities and skilled healthcare professionals. This calls for the need to undertake research on procedures like cosmetic surgery, modern dental care and traditional medicine to ensure quality and safety.
- ❖ Conditions like cardiovascular diseases, diabetes, and cancer are not only leading causes of death but also place significant strain on healthcare systems.

5. EMERGING ISSUES

- ❖ Mental health disorders are becoming more prevalent but often go undiagnosed or untreated. This puts a significant burden on public health including increased mortality, reduced quality of life, negative societal impact and increased economic burden.
- ❖ As the population ages, there is a growing need for geriatric care and services for chronic conditions
- ❖ Regional and global conflicts are increasing, both in numbers and intensity. These are disrupting global supply chains impacting negatively on free and optimal movement of health products and technologies.
- ❖ Misuse/overuse of antibiotics, antifungals, antivirals and anti-protozoa in human and animal health contributing to the development of drug-resistant pathogens.
- ❖ Increased cross border travels has led to an increase in emerging and re-emerging Diseases (Haemorrhagic fever, Mpox, airborne viral epidemics, polio).
- ❖ Industrial Unrest which has negatively affected service delivery in the health sector

Sector Challenges

- ❖ Low awareness on the health insurance benefit package among the beneficiaries and healthcare providers, with associated low uptake of health insurance due to apathy and poor socio-economic status of many Kenyans;
- ❖ Weak health systems and Inadequate health infrastructure for provisioning of health services during the pandemics;
- ❖ Inadequate Human Resource for Health especially specialized cadres and low absorption of skilled health professional into the active workforce and recurring health workers unrest impacting negatively provision of quality health care services;

Sector Challenges

- ❖ Inadequate budgetary provision for key health products resulting in unpredictable/uneven supply of essential commodities (mainly, HIV, Malaria, TB and Nutrition, family planning and NCD) due to declining donor funding and increasing cost of health products.
- ❖ Sub optimal prioritization, overlapping and conflict of interest in health research for informing health policies and interventions and service provision leading to different stakeholders supporting the same service provision or program;

Sector Challenges

- ❖ Slow categorization of newly formed SAGAs thus delaying the execution of their mandates;
- ❖ Low level of digitization of the health records system and health supply chain where health facilities continue to manage and report health and commodities data manually;
- ❖ Rising cases of communicable diseases such as HIV, TB and malnutrition, NCD such as cancer and diabetes
- ❖ Low local production capacity of HPT commodities leads to overreliance of imported commodities resulting to high cost of products;

6. Key Recommendations

- ❖ There is a need to accelerate implementation of Social Health Insurance Act 2023 to reduce out-of-pockets costs.
- ❖ Strengthen and expand the capacity on surveillance as part of preparedness including the use of technology, analytics, infrastructure, human resource, cross-border and international collaboration to enable early detection and guided response to potential public health emergencies.
- ❖ Develop strategies to retain and attract skilled healthcare professionals, through available structures to mitigate the impact of labour immigration, labour unrest and improve the health workforce to population ratios and enhance the technical and managerial skills of healthcare professionals through continuous capacity development to ensures access to specialized services.

6. Key Recommendations

- ❖ Increase budgetary provisions and ring-fence allocations to reduce donor dependency for the sector to adequately address the health requirement resource gaps in essential commodities and enable effective implementation of programs and projects.
- ❖ Provide adequate investment in research for health through performance-based grants to local research institutes to promote technology and deliver innovative and sustainable health care delivery solutions for the current and emerging health challenges including those resulting from the effects of climate change.

6. Key Recommendations

- ❖ Review existing legal and policy frameworks to protect the public and fulfil the health rights of all persons in Kenya to the progressive realization of their right to the highest attainable standard of health. Further, this will ensure effective regulation of health professionals, healthcare services, health products and technologies and facilitate in a progressive and equitable manner, the highest attainable standards of health service
- ❖ Invest in robust health information systems to improve data collection, analysis, and utilization. Implement electronic medical records, surveillance systems, and enhance data sharing mechanisms for evidence-based decision-making.

7. Conclusion

The health of a nation's citizens directly result in economic growth since there are more people able to conduct effective activities in the workforce. It is therefore important to take personal responsibility on health matters and adopting a healthy lifestyle. Further, Cooperation and trust among all the stakeholders involved is essential in improving the quality of health services.

Public Participation Priorities Considerations

S/ N	Issues	FY 2025/26 Health Sector Intervention
1.	Inadequate supply of health products and technologies in health facilities at all levels	<ul style="list-style-type: none">• Ensuring availability of tracer HPTs in all Public Health facilities• local manufacturing of HPTs.• strengthening HPTs management systems.
2.	Inadequate health financing for individuals and households	<ul style="list-style-type: none">• Sensitization/awareness creation on Social Health Insurance Cover/ Essential Health Benefit Package, CIF and PHF.• Ensuring all Kenyans are registered and covered in SHA.• Full operationalization of SHA.

Public Participation Priorities Considerations

S/N	Issues	FY 2025/26 Health Sector Intervention
3.	Inconsistent internet connectivity and poor integration of systems	<ul style="list-style-type: none">• Implementing the 2023 Digitization Bill that promotes digital health platforms and system• Implementing the FIF Act to ensure health facilities have adequate resources for ICT infrastructure.
4.	Inadequate Human Resources for health	<ul style="list-style-type: none">• Government has committed to recruit 925 UHC personnel.• Government has committed to recruit 1800 medical interns.• Digitization of management of CHPs for transparency. Draft HRH policy being developed awaiting the external

Public Participation Priorities Considerations

S/N	Issues	FY 2025/26 Health Sector Intervention
5.	Inadequate Service Delivery in Healthcare Due to Systemic Barriers	<ul style="list-style-type: none">• Carrying out sensitization campaigns on SHIF packages• Implementing PHC Act that strengthens primary health care delivery• Sensitization of facility in charges on updating their service charters• Sensitizing facilities to adhere to the KMPDC guidelines on KEPH levels and the services offered
6.	Leadership and Governance	<ul style="list-style-type: none">• Training/Sensitizing the members of various committees/boards on their roles.• Enhance implementation/adoption of all national health laws, policies, guidelines and standards.

*We therefore commit to delivering quality health services
towards the attainment of the Universal Health Coverage*

*Thank
you*

