



REPUBLIC OF KENYA



MINISTRY OF HEALTH


HEALTH SECTOR

MEDIUM-TERM EXPENDITURE FRAMEWORK

REPORT FY 2024/25 – 2026/27

PRINCIPAL SECRETARY: STATE DEPARTMENT FOR PUBLIC
HEALTH AND PROFESSIONAL STANDARDS/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, the Medium-Term Plan IV recognizes provision of equitable, accessible and affordable 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 realigns new emerging issues toward achieving the SDGs 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 through increasing the financial protection of the citizens.

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** until they are not of major public health concern.
- ❖ **To halt and reverse the rising burden of non-communicable diseases** by setting clear strategies for implementation to address all the identified non-communicable diseases in the country.
- ❖ **To reduce the burden of violence and injuries** through directly putting in place strategies that address each of the causes of injuries and violence at the time.
- ❖ To provide essential health care that is **affordable, equitable, accessible and responsive** to client needs.
- ❖ To **minimize exposure to health risk factors** by strengthening the health prevention and promotion interventions, which address risk factors to health, plus facilitating use of products and services that lead to healthy behaviour in the population.

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
Program 1. National Referral and Specialized Services	To increase access and range of quality specialized healthcare services	Increased access to quality and range of 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 and reproductive healthcare services
Programme 3: Health Innovations and Research	To increase capacity and provide evidence for policy formulation and practice	Increased capacity to provide evidence for policy formulation and practice
Programme 4: General Administration Planning and Support services	To offer governance and enabling services for service delivery	Effective Governance and administration services strengthened.

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 leadership mechanisms 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
- Seeking health care services and also taking responsibility of their own health.

2. SECTOR PERFORMANCE REVIEW FY 2020/21–2022/23

- ❖ One Million indigent households identified were covered under the government social health insurance scheme nested in NHIF.
- ❖ Number of mothers who registered through the Linda mama program were 3,580,916 and 2,532,794 successful deliveries were reported over the period.
- ❖ 254,368 orphans and vulnerable children (OVC) household were covered under Health Insurance Subsidy Program (HISP)
- ❖ 58,800 households were covered under Older Persons and Persons with Severe Disability (OPSD) program annually over the period
- ❖ Increased number of HIV patients on Antiretroviral Treatment (ART) increased from 1,255,598 in 2020/21 to 1,299,152 in 2021/22 and 1,330,565 in 2022/23
- ❖ Percentage of HIV pregnant women who received HAART in ANC, PNC and Labor and Delivery was 95%, 93% and 94% for 2020/21, 2021/22 and 2022/23 respectively
- ❖ Confirmed malaria per 1000 population shows an increase from 82.6 in 2020/21 to 93.5 in 2021/22 and 105.1 in 2022/23

SECTOR PERFORMANCE REVIEW FY 2020/21–2022/23

- ❖ The malaria blood examination rate increased from 22.1 in 2020/21 to 29.1 in 2022/23
- ❖ TB case finding has improved from 73,777 in FY2020/21 to 82,302 in 2022/23
- ❖ Proportion of successfully treated TB cases (all forms of TB) was 85%, 84% and 84 % for 2020/21, 2021/22 and 2022/23
- ❖ Proportion of multi drug resistant TB successfully treated increased from 43% to 77% 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.
- ❖ Health care facilities with laboratory capacity to detect and report on Antimicrobial Resistance (AMR) increased from 12 (2020/21) to 17 (2022/23).
- ❖ The proportion of laboratories with capacity to conduct molecular testing of High-risk HPV increased from 9.1% to 10.6% in the period
- ❖ Proportion of national and county reference laboratories able to conduct molecular testing for emerging and re-emerging diseases stood at 31%

SECTOR PERFORMANCE REVIEW FY 2020/21–2022/23

- KNH, MTRH and KUTRRH conducted 1,629 open heart surgeries, 28,024 minimally invasive surgeries, 198 kidney transplants, 216,545 chemotherapy and radiotherapy sessions over the period
- 4,854 patients benefited from the PET scan examination and 592 patients on PSMAAs from KUTRRH since its installation in 2021/22.



SECTOR PERFORMANCE REVIEW FY 2020/21–2022/23

- ❖ Proportion of Women of reproductive age receiving Family Planning commodities also increased from 43% in 2020/21 to 74% in 2022/23.
- ❖ Number of facilities based neonatal deaths was 9.5 in 2020, 9.4 2021 and 10.1 in 2022
- ❖ In FY 2021/22, a total of 2.2 million copies of Mother Child Health Handbook (MOH 216) were printed and distributed to all 47 counties
- ❖ Proportion of fully immunized children was 84%, 88% and 84.7% in 2020/21, 2021/22 and 2022/23 respectively
- ❖ Orthopaedic Trauma Registers (MOH 274) was developed
- ❖ Vitamin A Supplementation coverage was 82.1% in 2020, 86.3% in 2021, and 83.7 in 2022 due to Malezi Bora
- ❖ Villages certified as open defecation free increased from 29 in 2021/2022 to 31 in 2022/2023

SECTOR PERFORMANCE REVIEW FY 2020/21–2022/23

- ❖ 121 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 84% completion rate as at 30th June 2023
- ❖ Health equalization funded projects appropriated for the 84 projects worth KES 1, 964,219,396 in the period



SECTOR PERFORMANCE REVIEW FY 2023/2024



The Sector in collaboration with Ministry of defence under the Sports fund projects in health were able to construct the following health facilities: **Githunguri sub County hospital, Engineer health centre, Busia County Referral Hospital, Sura Adoru level 2 health facility, Keroka level 4 hospital,**



SECTOR PERFORMANCE REVIEW FY 2020/21–2022/23

- ❖ Number of students enrolled at KMTCs increased from 17,241 in 2020/21, 21,700 in 2021/22 to 25,889 in 2023
- ❖ KEMRI conducted 2.45 million specialized laboratory test and produced 1,147,490 diagnostic kits over the period.
- ❖ KHPOA inspected for compliance to standards in service delivery a total of 13,996 facilities while 17 level 5 hospitals assessed for emergency care preparedness

SECTOR PERFORMANCE REVIEW FY 2020/21–2022/23

- ❖ 13 Medical oxygen was installed in six(6) national referral hospitals, (11) county referral facilities, and 83 sub-county referral hospitals (L4s), with KUTRRH, MTRH and KNH having 20,000-Liter capacity.
- ❖ 5 Pressure Swing Adsorption (PSA) plants were installed with 22 more under procurement tenders
- ❖ 10 facilities received liquid oxygen tanks
- ❖ 20,620 oxygen cylinders were delivered to facilities



SECTOR PERFORMANCE REVIEW FY 2020/21–2022/23

- ❖ The patients receiving Physiotherapy services at the Spinal Injury Hospital increased to 4377 in FY 2022/2023 from 3441 in FY 2021/2022 and 2810 in FY 2020/2021
- ❖ Number of patients receiving inpatient and outpatient specialized mental health services were 620,698 and 849,193 respectively. These were nested at Mathari National Teaching and Referral Hospital (MNTRH)
- ❖ KNBTS collected blood units of 412,868 in FY 2022/23, compared to 273,349 in 2021/22 and 178,249 in 2020/21
- ❖ KEMSA acquired HPTs valued at 95.39 billion and delivered 85.49 billion worth of HPTs to 9,129 facilities in the 47 counties over the 3 year period under review
- ❖ Order fill rate for essential HPTs was 51% in 2022/23 from 54% in 2020/21

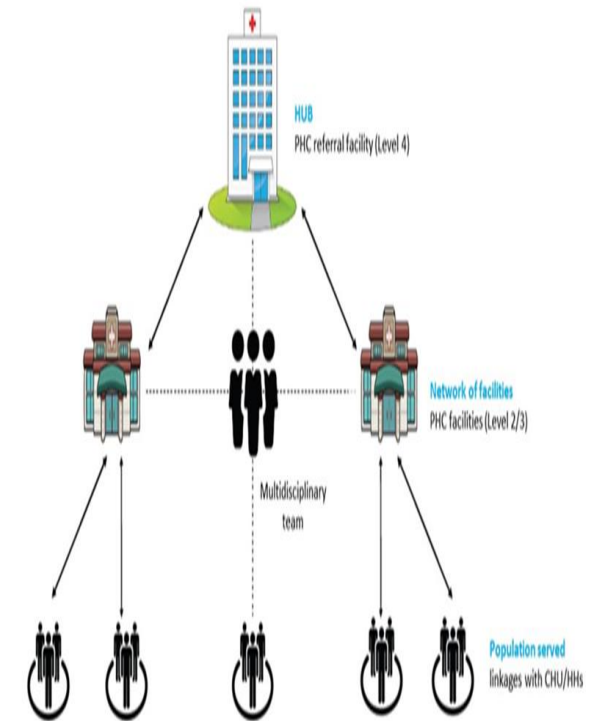
SECTOR PERFORMANCE REVIEW FY 2020/21–2022/23

- ❖ Digital Health Bill, Primary Health Care Services Bill, the Social Health Insurance Bill and the Facility Improvement Bill were all drafted in the review period
- ❖ National Health Insurance Fund (Amendment) Act, 2022 and the Mental Health (Amendment) Act, 2022
- ❖ The Sector also reviewed several proposed legislations from Parliament e.g., the Kenya Drugs Authority Bill, 2022, Health (Amendment) Bill, 2022 and cancer prevention and control (Amendment) Bill, 2022.
- ❖ 109 health facilities were assessed using Kenya Quality Model for Health standards in 2022/23 compared to 50 health facilities assessed in 2021/22

SECTOR PERFORMANCE REVIEW FY 2020/21–2022/23

Primary Healthcare

- ❖ PCN guidelines were developed
- ❖ 10 counties established at least 1 PCN with 21 PCNs established in total
- ❖ Electronic Community Health Information System (eCHIS) piloted in 2021/2022 in Isiolo and Kisumu and expanded to Kakamega, Siaya, Vihiga, Migori, Nakuru, and Nyeri in 2022/2023
- ❖ Operationalization of existing Community Health Units increased from 81 per cent in 2021/2021 to 86% in 2022/2023
- ❖ Dialogue days conducted in the community increased from 32,260 to 43,212.
- ❖ Number of functional community health units (CHUs) were 8,663(2020/21) , 8,772(2021/22) and 7,476 (2022/23)



Financial Review for FY 2020/21-2022/23

- The Sector's approved budgetary allocation was from **Kshs. 120.83** Billion in FY 2020/21, to **Kshs. 129.78** Billion in FY 2021/22 and **Kshs. 116.4** Billion in FY 2022/23.
- The actual expenditures were at **Kshs. 105.5** billion, **Kshs. 109.4** billion and **Kshs. 98.66** billion for the financial years, 2020/21 and 2021/22 2022/23 respectively. This represents Budget absorption rates at 87.5% , 84.3% and 84.8% FY 2020/21, FY 2021/22 and FY 2022/23 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 2024/25 – 2026/27



In line with the Bottom Up Economic Transformation Agenda the sector will over the Medium-Term Period FY 2024/25 – 2026/27 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 MTFP PERIOD 2024/25 – 2026/27

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



❖ Primary Care Networks will be established and operationalized in the counties to offer effective services to the community



❖ Universal seamless health insurance system comprising Social Health Insurance cover (SHI)

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



MEDIUM TERM PRIORITIES AND FINANCIAL PLAN FOR THE MTEF PERIOD 2024/25 – 2026/27



- ❖ National fund for chronic and catastrophic illness and injury costs not covered (or with very restrictive cover) by insurance (cancer, diabetes, strokes & accident rehabilitation, pandemics) to be funded by a combination of insurance levy and Government



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



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



- ❖ Strengthened Sector financing and collaboration with the county government to ensure retention of funds collected at health facility level for improvement of the facility operations

MEDIUM TERM PRIORITIES AND FINANCIAL PLAN FOR THE MTEF PERIOD 2024/25 – 2026/27



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



- ❖ Operationalizing programmes aimed at achieving improved accessibility, affordability of quality health services, reduction of health inequalities and optimal utilization of health services and promotion of health.



Financial Plan For The MTEF Period FY 2024/25-2026/27(Amount KSh. Million)

		RESOURCE REQUIREMENT			Allocation		
Expenditure Classification	Baseline 2023/24	2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
Current Expenditure	80,627.50	131,405.80	148,928.51	168,345.64	87,324.19	91,930.16	95,303.50
Capital Expenditure	60,559.40	240,445.00	262,448.60	288,434.92	61,025.54	63,577.84	64,777.34
Total	141,186.90	371,850.80	411,377.11	456,780.56	148,349.73	155,508	160,080.84

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

Economic Classification	Baseline Estimates 2023/24	RESOURCE REQUIREMENT			ALLOCATION		
		2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
GROSS	80,627.50	131,405.80	148,928.51	168,345.64	87,324.19	91,930.16	95,303.50
AIA	25,185.00	28,246.24	29,557.64	30,644.64	30,397.00	30,387.00	30,387.00
NET	55,442.50	103,159.56	119,370.88	137,701.00	56,927.19	61,543.16	64,916.50
Compensation to Employees	13,578.50	39,452.17	52,558.05	65,667.84	14,027.96	15,953.27	16,432.22
Transfers, Grants and Subscription	63,605.36	75,562.90	78,879.50	83,484.00	70,896.49	73,510.31	76,300.10
Other Recurrent	3,443.20	16,390.73	17,490.97	19,193.80	2,399.74	2,466.58	2,571.18

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

Category	Approved Estimates 2023/24	RESOURCE REQUIREMENT			ALLOCATIONS		
		2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
Gross	60,559.40	240,445.00	262,448.60	288,434.92	61,025.54	63,577.84	64,777.34
GOK	39,100.34	216,282.00	232,887.00	253,268.00	39,566.34	42,118.34	43,318.34
Loans	13,291.56	16,308.60	20,000.00	22,000.00	13,291.50	13,292.00	13,292.00
Grants	8,167.50	8,058.40	8,511.00	12,561.00	8,167.70	8,167.50	8,167.00
Local AIA	-	-	-	-	-	-	-

Financial Analysis- State Department for Medical Services

Summary of Vote Requirements vs Allocations (Ksh. Million)

No.	Expenditure Classification	Baseline 2023/24	Requirement			Allocation		
			2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
1	Current Expenditure	63,053.50	77,945.06	94,964.72	110,738.17	66,833.95	69,281.90	71,909.94
2	Capital Expenditure	53,539.06	231,490.00	252,010.60	277,312.92	55,864.20	58,877.84	60,328.00
	Total	116,592.56	309,435.06	346,975.32	388,051.09	122,697.99	128,159.74	132,237.94

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

Economic Classification	Baseline Estimates 2023/24	REQUIREMENT			ALLOCATION		
		2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
GROSS	63,053.50	77,945.06	94,964.72	110,738.17	66,833.95	69,281.90	71,909.94
AIA	19,536.00	20,317.44	21,130.14	21,764.04	22,377.00	22,367.00	22,367.00
NET	43,517.50	57,627.62	73,834.58	88,974.12	44,456.95	46,914.90	49,542.94
Compensation to Employees	9,175.00	22,963.85	35,575.08	48,175.38	8,691.96	8,824.67	8,962.62
Transfers, Grants and Subscription	52,106.00	52,448.00	56,774.00	59,883.00	56,399.49	58,681.31	61,119.10
Other Recurrent	1,772.50	2,533.21	2,615.64	2,679.79	1,742.50	1,775.92	1,828.22

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

Category	Approved Estimates 2023/24	REQUIREMENTS			ALLOCATIONS		
		2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
Gross	53,539.06	231,490.00	252,010.60	277,312.92	55,864.20	59,777.50	61,175.00
GOK	35,980.00	209,023.00	225,000.60	244,000.92	36,992.84	39,553.34	40,669.00
Loans	12,091.56	15,898.60	20,000.00	22,000.00	13,291.50	13,292.00	13,292.00
Grants	5,467.50	6,568.40	7,010.00	11,312.00	5,579.70	6,032.50	6,367.00
Local AIA	-	-	-	-	-	-	-

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

Economic Classification	Approved Estimates 2023/24	RESOURCE REQUIREMENT			RESOURCE ALLOCATIONS		
		2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
P. 1: National Referral & Specialised services							
S.P 1.1 : National Referral Health Services	48,383.62	98,742.61	109,003.60	128,565.05	49,612.82	48,348.46	49,799.21
S.P 1.2 : Health Infrastructure and Equipment	9,550.50	9,550.50	9,550.50	9,550.50	9,943.00	7,160.50	5,803.05
S.P 1.3: National Blood Transfusion Services	1,237.49	2,222.33	2,747.42	3,252.51	1,243.16	1,449.43	1,605.89
S.P 1.4 : Health Products and Technologies	4,324.70	1,424.82	1,575.00	1,625.19	5,429.26	5,460.13	5,322.04
Total	63,496.31	111,940.26	122,876.52	142,993.25	66,228.24	62,418.52	62,530.18

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

Economic Classification	Approved Estimates 2023/24	RESOURCE REQUIREMENT			RESOURCE ALLOCATIONS		
		2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
P2: Curative & Reproductive Maternal New Born Child Adolescent Health (RMNCAH)							
Total	21,018.57	28,235.65	29,439.43	30,639.47	22,896.88	28,703.13	30,195.37
P3: Health Research &Innovations							
S.P 3.1: Health Innovations	1,002.00	1,915.00	2,441.10	3,037.53	1,154.00	1,403.00	2,053.00
S.P 3.2 Medical Research	3,907.00	4,450.00	4,954.60	5,481.67	3,809.32	4,083.00	4,455.18
TOTAL	4,909.00	6,365.00	7,395.70	8,519.20	4,794.00	5,486.00	6,508.18

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

Economic Classification	Approved Estimates 2023/24	RESOURCE REQUIREMENT			RESOURCE ALLOCATIONS		
		2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
P. 4 – General Administration & Support Services							
S.P 4.1 General Administration & Human Resource Management and Development	3,103.9	16,908.8	29,532.3	42,145.0	3,287.8	3,409.9	3,554.7
S.P 4.2 Finance and Planning	180.7	183.8	185.1	186.3	228.6	234.3	240.2
S.P 4.3: Social Protection in Health	23,884.0	153,525.4	157,546.3	163,567.8	24,511.6	28,807.6	30,056.4
Total	27,168.6	170,618.1	187,263.7	205,899.2	28,028.0	32,451.8	33,851.2
TOTAL	116,592.5	317,159.0	346,975.3	388,051.1	121,947.2	129,059.4	133,084.9

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

No	SAGA	Approved Estimates 2023/24	RESOURCE REQUIREMENT			Allocation		
			2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
1	Kenyatta National Hospital	20528.9	20528.9	20528.9	20528.9	20373	20962	21581
2	Moi Teaching & Referral Hospital	12774	14296	15237.2	16760.92	13049.83	13910.51	14835.07
3	Kenya Medical Supplies Authority	3990	5747.6	5944.6	6191.8	5263	5273	5294
4	Kenya Medical Research Institute	3307	4049.9	4539.4	5050.4	3272	3425	3705
5	Kenyatta University Teaching Research and Referral Hospital	5106.6	8865.0	9751.5	10726.7	6744	6891	7046
6	National Cancer Institute of Kenya	200.5	850	1232	1525	200	208	219
7	KUTRRH Gatundu	-	825	907.5	998.3	-	-	-



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

No	SAGA	Approved Estimates 2023/24	RESOURCE REQUIREMENT			Allocation		
			2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
8	Mwai Kibaki Hospital	1381	2885.71	3050.85	4399.32	1379	1418	1459
9	Mama Margaret Uhuru Hospital	1031	2005	2128	2346	1031	1055	1081
10	Mathari National Teaching and Referral Hospital	-	4200	5823	6114	-	-	-
11	National Health Insurance Fund	94914.1	100609	106645.5	113044.2	100609	106645.5	113044.2
12	Kenya Biovax Institute LTD	150	634	951	1273	354	403	403
13	National AIDS Control Council/National Syndemic Control Council	967	1417	1554	1835	987	1036	1128

Financial Analysis - State Department for Public Health and Professional Standards

Summary of Vote Requirements vs Allocations (Ksh. Million)

No.	Expenditure Classification	Baseline 2023/24	RESOURCE REQUIREMENT			Allocation		
			2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
1	Current Expenditure	17,574.00	53,460.74	53,963.80	57,607.48	20,490.24	22,648.26	23,393.56
2	Capital Expenditure	7,020.34	8,955.00	10,438.00	11,122.00	5,161.50	4,700.00	4,449.34
	Total	24,594.34	62,415.74	64,401.80	68,729.48	25,651.74	27,348.26	27,842.90

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

Economic Classification	Baseline Estimates 2023/24	RESOURCE REQUIREMENT			ALLOCATION		
		2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
GROSS	17,574.00	53,460.74	53,963.80	57,607.48	20,490.24	22,648.26	23,393.56
AIA	5,649.00	7,928.80	8,427.50	8,880.60	8,020.00	8,020.00	8,020.00
NET	11,925.00	45,531.94	45,536.30	48,726.88	12,470.24	14,628.26	15,373.56
Compensation to Employees	4,403.50	2,047.04	2,108.45	2,171.71	5,336.00	7,128.60	7,469.60
Transfers, Grants and	11,499.36	23,114.90	22,105.50	23,601.00	14,497.00	14,829.00	15,181.00
Other Recurrent	1,670.70	13,857.52	14,875.33	16,514.02	657.24	690.66	742.96

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

Category	Approved Estimates 2023/24	RESOURCE REQUIREMENT			ALLOCATIONS		
		2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
Gross	7,020.34	8,955.00	10,438.00	11,122.00	5,161.50	4,700.00	4,449.34
GOK	3,120.34	7,259.00	7,887.00	8,268.00	2,573.50	2,565.00	2,649.34
Loans	1,200.00	410.00	-	-	-	-	-
Grants	2,700.00	1,490.00	1,501.00	1,249.00	2,588.00	2,135.00	1,800.00
Local AIA							

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

Economic Classification	RESOURCE REQUIREMENT			RESOURCE ALLOCATIONS		
	2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
P. 1: Preventive and Promotive services						
S.P 1.1 : Communicable Disease Control	10,973	13,288	14,129	4,509	4,325	4,422
S.P 1.2 : Disease Surveillance and Response	1,265	1,375	1,484	197	205	213
S.P 1.3 : Public Health Services	1,552	1,505	1,640	317	1,897	2,082
S.P 1.4 : Radiation Safety and Nuclear Security	1,100	1,210	1,331	272	281	290
S.P 1.5: Primary Health Care	6,404	6,550	7,204	113	150	171
Total	21,294	23,928	25,788	5,409	6,858	7,178

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

Economic Classification	RESOURCE REQUIREMENT			RESOURCE ALLOCATIONS		
	2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
Programme 2 - Health Resource Development and Innovation						
S.P 1.1 Capacity Building and Training	14,976	13,053	13,185	10,002	10,280	10,241
S.P 1.2 Research and Innovation on Health	1,846	1,833	1,917	312	237	248
S.P 1.3 Health Profession Services	15,720	16,289	16,807	3,954	4,036	4,125
Total	32,542	31,175	31,909	14,267	14,553	14,614

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

Programme Details	Resource Requirements			Resource Allocation		
	2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
Programme 3 - Health Policy, Standards and Regulations						
SP3.1 -Health Standards and Quality Assurance	6,703	7,215	8,642	4,953	4,930	4,989
SP3.2 - Health Policy and Regulations	1,950	2,030	2,205	202	209	215
Total Expenditure Programme 3	8,653	9,245	10,847	5,156	5,139	5,204
Programme 4 - General Administration & Support Services						
SP 4.1 : General Administration & Human Resource Management and Development	1,493	1,536	1,635	662	635	676
SP 4.2 : Finance and Planning	200	220	240	159	165	171
Total Expenditure Programme 4	1,693	1,756	1,875	821	800	847

Recurrent Requirements VS Allocation for SAGAs (Ksh. Million)

No	SAGA	Approved Estimates 2023/24	Requirement			Allocation		
			2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
1	Kenya Medical Training College	8,863	13,391	11,473	11,890	9,302	9,565	9,841
2	Kenya Medical Practitioners and Dentists' Council	850	1,345	1,360	1,375	855	879	905
3	Kenya Health Professions Oversight Authority	66	486	636	790	70	73	75
4	Kenya Nuclear Regulatory Authority	274	1,100	1,210	1,331	272	281	290
5	Kenya Institute of Primate Research	117.8	1780.2	1831	1917	226	237	248
6	Public Health Officers and Technicians Council	0	218	250	300	90.30	87.00	88.60

Recurrent Requirements VS Allocation for SAGAs(Ksh. Million)

No	SAGA	Approved Estimates 2023/24	Requirement			Allocation		
			2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
7	Kenya Health Human Resource Advisory Council	69	500	624	708	9,302	9,565	9,841
8	Tobacco Control Board	786	876	975	1,082	861	862	864
9	Kenya National Public Health Institute	34	107	126	200	34	35	37
10	Nursing Council of Kenya	503	920	1,040	1,140	751	758	765
11	Clinical Officers Council	0	557	607	662	172	252	292
12	Occupational Therapy Council of Kenya	0	100	110	120	24	24	25

Recurrent Requirements VS Allocation for SAGAs(Ksh. Million)

No	SAGA	Approved Estimates 2023/24	Requirement			Allocation		
			2024/25	2025/26	2026/27	2024/25	2025/26	2026/27
13	National Control Quality Laboratory	65	399	427	532	0	0	0
14	Counsellors and Psychologists Board	-	112	123	136	30	31	32
15	Pharmacy and Poisons Board	34	107	126	200	34	35	37
16	Physiotherapy Council of Kenya	0	79	84	89	40	42	46

CAPITAL PROJECTS & PROGRAMMES

- ❖ The Health Sector has a total of 63 projects funded by GOK as well as Foreign government
- ❖ Total allocation for the projects in FY 2024/25 is Ksh. 61,025.54 Million with GOK financing Ksh. 39,566.34 Million while Foreign government financing Ksh. 21,459.20 Million.
- ❖ The following are the capital projects and programmes in details;

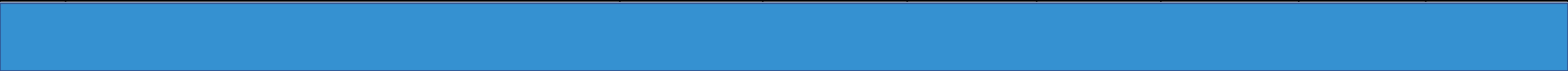
	Project Title	Financing			Approved Budget 2023/24		Allocation for FY 2024/25	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
1	KNH Burns and Pediatrics Centre	6,160	4,183	1,977	700.9	1,711.6	1,242	1,712
2	Cancer & Chronic Disease Management Centre – MTRH	1,843	1,393	450	102.0	-	102.0	-
3	Expansion and Equipping of ICU-MTRH	439	438.8	-	70.0	-	75	-
4	Construction and Equipping Children Hospital- MTRH	1,080	830	250	139	-	100	-
5	Construction of the Second Tower-Gatundu Level V Hospital (KUTRRH)	770	770		100.0	-	-	-
6	Refurbishment/Renovation and Replacement of Obsolete Equipment - KNH	8,059	8,059	-	1,100.0	-	1,100.0	-

	Project Title	Financing			Approved Budget 2023/24		Allocation for FY 2024/25	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
7	Expansion of Comprehensive Cancer Centre - KUTRRH	750	750	-	100.0	-	235	-
8	Expansion of Comprehensive Cancer Centre - KUTRRH	750	750	-	100.0	-	235	-
9	Modernize Wards & Staff house- Mathari Teaching & Referral Hospital	1,650	1,650	-	550.0	-	200	-
10	Construction of a Wall, renovation & Procure Equipment at National Spinal Injury Hospital	791	791.3	-	103.0	-	100	-
11	Equipping Maternity Unit (Mother & Baby Hospital)	350	350	-	150.0	-	75	-
12	Strengthening of Cancer Management at KNH	3,656	3,656	-	500.0	-	500	-

	Project Title	Financing			Approved Budget 2023/24		Allocation for FY 2024/25	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
13	Construction of Private Wing Inpatient Complex-MTRH	500	500	-	150		50	
14	Procurement of Specialized Medical equipment-MTRH	500	500	-	100		75	
15	Construction and Equipping of Children Hospital at KUTRRH	6,000	6,000	-	-	-	100	-
16	Dedan Kimathi Comprehensive Cancer Project - HUNGARY	3,500	-	3,500	-	-	-	-
17	East Africa's Centre of Excellence for Skills & Tertiary Education	4,875	634	4,241	105	1,403	200	1,403
18	National Equipment Service Programme	89,502	89,502		5,862		3,862	-
						-		

	Project Title	Financing			Approved Budget 2023/24		Allocation for FY 2024/25	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
19	Procurement of Medical Specialized Kits	26,000	26,000	-	-	-	3,000	-
20	Transforming Health Systems for Universal care Project	25,290		25,290		600.0	-	-
21	Infrastructural Support to Kigumo Hospital	400	400		103.0	-	50	-
22	Primary Health Care in the Devolved Context	2,935		2,935		577.5		578
23	Upgrading of Children Ward - Kibugua level 3	500	500	-	150.0	-	100	-
24	Upgrading and Equipping of Maternal and New born Ward Endebess Hospital	500	500	-	100.0	-	150	-

	Project Title	Financing			Approved Budget 2023/24		Allocation for FY 2024/25	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
26	EA's Centres of Excellence for Skills and tertiary education in Biosciences II	3,200	-	3,200		650		650
27	Procurement of Equipment at the National Blood Transfusion Services	10,396	10,396.3	-	1000	-	1000	-
28	National Commodities Storage Center (KEMSA)- (Intial Contract value)	6,124	5,151	973.1	310	-	150	-
29	Situation Room for Real Time Data & Information on HIV & AIDS - NACC	891	891	0	78.0	-	78	
30	Beyond Zero Campaign-NACC	566	566	0	52.0	-	52	



	Project Title	Financing			Approved Budget 2023/24		Allocation for FY 2024/25	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
31	Special Global Fund HIV Grant NFM3- NASCOP	31,641	25,906	5,735	3,600.0	763.0	3,600	750
32	Special Global Fund HIV Grant NFM3-NACC	1,216		1,216	-	447.0		450
33	9TH GoK/ UNFPA 10th County Programmes MOH NSDCC HIV -UNFPA	3,500		3,500	-	10.0		1,067
34	Acquisition of space by the National AIDS Control Council	1,600	1,600		-	-	100	-
35	Establishing of Regional Cancer Centres	8,000	8,000	-	155	-	171	-
36	Construction of a Cancer Centre at Kisii Level 5 Hospital	2,280	280	2,000	50.0	1,835.0	50	100

	Project Title	Financing			Approved Budget 2023/24		Allocation for FY 2024/25	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
37	Procurement of Family Planning & Reproductive Health Commodities	12,215	12,215	-	1,000	-	1,000	-
38	Upgrading of Maternal & New Born Units Project-VAMED-FINLAND	3,185	-	3,185	-	1,100	-	1,100
39	GoK UNFPA 10TH Country Programme Integrated Reproductive Health -SRHR	3,550	-	3,550	-	710	-	19
40	Kenya COVID-19 Emergency Response Project	41,572	2,000	39,572	100	3,600	400	6,786
41	Vaccines Programme	88,889	70,999	17,890	2,000	2,600	2,000	2,716

	Project Title	Financing			Approved Budget 2023/24		Allocation for FY 2024/25	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
42	Supply of Medical Equipment and Associated Services & Fight for Maternal y and Infant Mortality	4,254	-	4,254	-	694.0	-	694
43	Integrated Health Information System	10,000	10,000	-	352.1	-	400	
44	Human Vaccine Production (BIOVAX)	6,400	6,400	-	500.0	-	500	-
45	Construction and upgrading of KEMRI Laboratories (Nairobi, Kwale, Busia)	635	635	0	100.0	-	100	
46	Research and Development - KEMRI	6,400	6,400	0	500.0	-	400	
47	Free Maternity Program (Strategic Intervention)	70,088	70,088	-	4,098.0	-	4,098	

	Project Title	Financing			Approved Budget 2023/24		Allocation for FY 2024/25	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
48	Rollout of Universal Health Coverage	100,000	100,000	0	11,600.0	-	11,028	
49	Emergency, Chronic & Critical Illness Fund	10,000	10,000	-	300.0	-	500	
50	Social Health Insurance Fund	500,000	500,000	-	-	-		
51	Public Participation for the State Department for Medical Services	500	500	-	-	-	50	
52	Dietetics Services Improvement.	6,174	6,174		200.0		200	
53	Procurement of Anti TB Drugs Not covered under Global fund TB Progr	10,678	10,678		300.0		300	

	Project Title	Financing			Approved Budget 2023/24		Allocation for FY 2024/25	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
54	Special Global Fund Malaria Grant NFM3 - DOMC	12,021	6,400	5,621	1,100.0	1,500.0	1,100	1,500
55	Special Global Fund TB Grant NFM3.	2,998		2,998	-	1,000.0		587
56	Department of Health Systems Strengthening	1,500		1,500	-	200.0		501
57	Clinical Waste Disposal System	1,256	60	1,196	60.0	700.0	63	-
58	Clinical Laboratory and Radiology Services Improvement	1,052		1,052	-	500.0		-
59	Construction of Tuition Blocks and Laboratories at KMTC							
		1,800	1,800		332.0	-	200	-

	Project Title	Financing			Approved Budget 2023/24		Allocation for FY 2024/25	
		Est cost	GoK	Foreign	GoK	Foreign	GoK	Foreign
		Million (Kshs.)						
60	Equipping of Laboratories and Classrooms at KMTC	4,799	4,799		954	-	500	-
61	Construction of an Examination Centre	1,000			100		75	-
62	Public Participation for State Department for Public Health and Professional Standards	500	500		-		50	-
63	Infrastructure upgrade at Kenya Institute of Primate Research	252	182	70	44	-	86	-

Country-wide Stakeholders Consultations

- A county wide stakeholder participation was carried out in the counties between 30th October and 6th November, 2023.
- A number of Issues and proposed interventions related to Health Sector were identified.
- They include;

Country-wide Stakeholders Consultations

Issue Raised	Proposed Intervention	FY 2024/25 Intervention
Lack/Shortage of drugs in Health facilities	Timely delivery of drugs to Health Facilities	Capitalization of KEMSA with a view to improve on their Order Refill rate Local manufacturing and local procurement of HPT
Lack of inclusive NHIF Cover Low of awareness on NHIF Cover	Roll out Inclusive Cover	Rollout of Essential Health Benefit Package under the SHIF Sensitization/awareness creation on Social Health Insurance Cover/Essential Health Benefit Package

Country-wide Stakeholders Consultations

Issue Raised	Proposed Intervention	FY 2024/25
		Health Sector Intervention
Lack of objectivity in recruitment, training and equipping of Community Health Promoters	Objective Criteria in selection and remuneration of CHPs	Institutionalization and harmonization of recruitment and remuneration of CHPs through the Primary Health Care Act
		Digitization of management of CHPs for transparency
Lack of 24/7 Health services mashinani	Opening time for the dispensaries to be extended to weekends and longer working hours	MOH to consider change of Policy to ensure that patients can access Health care any time

Country-wide Stakeholders Consultations

Issue Raised	Proposed Intervention	FY 2024/25
		Health Sector Intervention
Ensuring that the Health Care Facilities (HCF) are aligned and equipped according to the level they are in	Carry out an audit of the HCF to determine the levels they fall	Census already done. Analysis of data is underway to inform action. Upgrade and downgrade HF levels based on assessed capacity. standards as per licensed levels. MOH to make sure Quality of Care of all services is ensured.
		Audit the HCF on regular basis (proposing every 2 years)for compliance and upholding
		Harmonized Health Facility assessment is planned and underway incorporating Quality of care
Assessment of PWDs – charges for assessment and treatment are not affordable	The PWDs need the cards and therefore it should be processed at the national level to enable them access services in a timely manner	Allocate resources for printing the cards for distribution to the PWDS at no cost.
		Offer PWD free services.
		PWD medical equipment readily available eg wheelchairs
		No sign language interpreters in hospital

Country-wide Stakeholders Consultations

Issue Raised	Proposed Intervention	FY 2024/25
		Health Sector Intervention
Mental health, drug and substance abuse, GBV	Enhance sensitization programs on the effects of drugs and substance abuse.	Increase budget allocation towards mental health programs and healthcare professionals specializing in mental.
	Establish new rehabilitation centers in the counties	
Inadequate Human Resources for health	Recruit more staff	BETA has provided for CHPs and the UHC staff (8600)
		BETA commitment to recruit 20,000 HCW in phases
Cancer	Early detection, treatment and care	Increase allocations to ensure the regional cancer centers.
		Allocation of 155 B for regional cancer center and 50B for Kisii level 5 hospital

Country-wide Stakeholders Consultations

- KES 100 million has been allocated to the health sector to address some of the concerns raised during the country-wide stakeholders consultations forums.

5. EMERGING ISSUES

- ❖ Climate change related calamities pose a great risk to the state of public health in the country. The recent re-emergence of disease implicates the resilience of micro-organisms to climatic conditions. Further, drought persistence has led to increased cases of malnutrition as well as increase in WASH related diseases such as cholera, trachoma and vector borne diseases;
- ❖ Artificial intelligence technology provides an opportunity to enhance the quality and efficiency of health services provision;
- ❖ Emergence of novel health products and technologies posing human capacity and regulatory challenges within the existing legislative framework;
- ❖ The health sector has positioned Kenya as a medical tourism hub through state of the art facilities and skilled healthcare professionals. This call for need to undertake research on procedures like cosmetic surgery, modern dental care and traditional medicine to ensure quality and safety.
- ❖ Emerging and re-emerging Diseases (Hemorrhagic fever, airborne viral epidemics, polio) due to increased cross border travels and the reality heather to unforeseen-security threats;
- ❖ Declining donor funding by development for strategic programs like TB, Malaria, Family Planning, nutrition and immunization. This has been occasioned by the Kenya being debased to Lower middle-income status and therefore need to progressively increase the domestic allocations to cater for these programmes in order to maintain the gains made;
- ❖ Re-emergence of neglected tropical diseases e.g. elephantiasis, kalaazar including Multi Drug resistant infectious agents

Challenges and Constraints for the Health Sector

- ❖ 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;
- ❖ 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.

Challenges and Constraints for the Health Sector

- ❖ 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;
- ❖ 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

6. Key Recommendations

- ❖ There is need to provide social protection to citizens against the catastrophic cost related to accessing health services through accelerating the implementation of the social health insurance acts enacted in 2023 to address out-of-pockets costs, enhance access to quality healthcare, bring services closer to households.
- ❖ 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.
- ❖ Enhance Human Resource Capacity: Develop strategies to retain and attract skilled healthcare professionals, through available structures to mitigate the impact of labor immigration, labor 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

- ❖ 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.
- ❖ Strengthen Regulatory Frameworks: 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.
- ❖ Increase investments in digital data management and information systems: 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.
- ❖ Health Promotion and Disease Prevention: Prioritize sector programs and campaigns aimed at creating awareness for regular screening, access to treatment, palliative care and promoting healthy behaviors.

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. Its 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.

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

*Thank
you*

