



**REPUBLIC OF KENYA**

## **HEALTH SECTOR REPORT**

# **MEDIUM TERM EXPENDITURE FRAMEWORK (MTEF) FOR THE PERIOD 2025/26-2027/28**

**OCTOBER, 2024**

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## LIST OF ABBREVIATIONS

<b>ACRONYM/ABBREVIATION</b>	<b>DEFINATION</b>
ACT	Artemether Combination Therapy
AIA	Appropriation in Aid
AIDS	Acquired Immune Deficiency Syndrome
AIE	Authority to Incur Expenditures
ALARM	Advanced Labour and Risk Management
ALOS	Average Length of Stay
AMR	Antimicrobial Resistance
AMREF	African Medical and Research Foundation
ARV	Anti-Retroviral
ASAL	Arid and Semi-Arid Lands
AU	African Union
AYP	Adolescents and Young People
BETA	Bottom-up Economic Transformation Agenda
BFCI	Baby Friendly Community Initiative
CAPR	Community AIDS Programme Reporting system
CASPs	County AIDS Strategic Plans
CBA	Collective Bargaining Agreement
CBOs	Community Based Organizations
CBRN	Chemical Biological Radiological and Nuclear
CDC	Centre for Disease Control
CHEWs	Community Health Extension Workers
CHMTs	Community Health Management Teams
CHPs	Community Health Promoters
CLTS	Community Lead Total Sanitation
COBPAP	Community Based Programme Activity Reporting Tool
COC	Clinical Officers Council
CoE	Centres of Excellence
COFOG	Classification of the Functions of Government
COG	Council of Governors
COVID-19	Corona Virus Disease 2019
CRWPF	Central Radioactive Waste Processing and temporary storage Facility
CSOs	Community Service Organizations
DHIS-2	District Health Information System Version 2

DSTB	Drug-Sensitive Tuberculosis
E&PWSD	Elderly and Persons with Severe Disabilities
EBS	Event based surveillance
EMRs	Electronic Medical Records
eMTCT	Elimination of Mother to Child Transmission
ERS	Economic Recovery Strategy
ETAT	Emergency Triage Assessment and Triage
FBOs	Faith Based Organizations
FOPNL	Front of Pack Nutrition labelling
FY	Financial Year
GAMR	Global AIDS Monitoring Report
GAVI	Global Alliance for Vaccines and Immunizations
GDP	Gross Domestic Product
GF	Global Fund
GoK	Government of Kenya
HAIs	Hospital Acquired Infections
HCI	Human Capital Index
HISP	Health Insurance Subsidy Program
HLMA	Health Labour Market Analysis
HRH	Human Resources for Health
IAEA	International Atomic Energy Agency
ICT	Information, Communication and Technology
IDSR	Integrated Disease Surveillance and Response
iHRIS	Integrated Human Resource Information system
IPC	Infection Prevention Control
KENRA	The Kenya Nuclear Regulatory Authority
KHATF	The Kenya Hospital Authority Trust Fund
KHHRAC	The Kenya Health Human Resource Advisory Council
KHIS	Kenya Health Indicator Survey
KHPOA	The Kenya Health Professions Oversight Authority
KIPRE	Kenya Institute of Primate Research
KMIS	Kenya Malaria Indicator Survey
KMLTTB	Kenya Medical Laboratory Technicians and Technologists Board
KMPDC	Kenya Medical Practitioners and Dentists Council
KMTC	Kenya Medical Training College
KNBTS	Kenya National Blood Transfusion Services

KNDI	Kenya Nutritionists and Dieticians Institute
KNMS	Kenya National Micronutrient Survey
KNPM	Kenya Nutrient Profile Model
KNRA	Kenya Nuclear Regulatory Authority
KPI	Key Performance Indicator
KQMH	Kenya Quality Model for Health
KTTA	Kenya Tissue Transplant Authority
LMIS	Logistics Management Information System
MOH	Ministry of Health
MTEF	Medium-Term Expenditure Framework
MTP	Medium Term Plan
NASIC	National Stewardship Inter-Agency Committee
NCD	Non-Communicable Disease
NCK	Nursing Council of Kenya
NHWA	national health workforce accounts
NNAFP	non-polio Acute Flaccid Paralysis
NQCL	National Quality Control Laboratory
PC-ERS	Post COVID-19 Economic Recovery Strategy
PCN	Primary Care Networks
PET/ CT	Positron Emitted Tomography Computed Tomography
PGEC	Postgraduate Education Certificate
PHOTC	Public Health Officers and Technicians Council
PPB	Pharmacy and Poisons Board/ Council
PPM	Public-Private Mix
PPR	Programme Performance Review
RMNCAH	Reproductive, Maternal, Neonatal, Child and Adolescent Health
SDPHPS	State Department of Public Health and Professional Standards
SHA	Social Health Authority
SP	Sub Program
TADSAS	Tobacco, Alcohol, Drugs and other Substances of Abuse
UHC	Universal Health Coverage
VAS	Vitamin A supplementation
WISN	Workload Indicators for Staffing Needs

## EXECUTIVE SUMMARY

In the efforts to fulfill Kenya's constitutional requirement of equitable access to affordable healthcare of the highest attainable standards, the Ministry of Health, through its two state departments, commits to provide leadership on health policies and standards, technical assistance and capacity building towards realization of the health goals.

Through the Bottom-Up Economic Transformation Agenda (BETA) and in an effort to deliver Universal Health Coverage the Ministry of Health in collaboration with County Governments and key stakeholders in the spirit of *Afya bora Mashinani* will continue to prioritize Kenya Vision 2030 Flagship Projects for the Health Sector as outlined in MTP-IV including Social Health Protection, Community Health High Impact interventions, Family Health & Strategic Public Health Programme, National Health Institutions, Local Manufacture of Life-Saving Essential Health Products and Diagnostics, Human Resources for Health, Health infrastructure and Medical Tourism

The State Department of Medical Services comprises four programmes namely, National Referral and Specialized Services, Curative and Reproductive Maternal Neonatal Child and Adolescent (RMNCAH), Health Research and Innovation, and Administrative Support Services. The State Department of Public health and Professional standards (SDPHPS) on the other hand operates through four budgetary programs: Preventive and Promotive Health, Health Resource Development and Innovation, Health Policy, Standards and Regulations, and General Administration, planning and support Services.

The sector priorities are aligned with the Kenya Constitution, Vision 2030, Kenya Health Policy, Bottom-up economic Transformation Agenda, the UHC Policy, Fourth Medium Term Plan (2023-2027) and the various regional and international obligations including the Sustainable Development Goals (SDGs) and Africa Union Agenda 2063.

Over the review period 2021/2022 to 2023/2024, the budgetary allocation for the Sector fluctuated from Kshs.129.8 billion in 2021/22 FY but then dipped to Kshs. 116.4 billion in 2022/23 FY and increased to 134.4 billion in FY 2023/24. The actual expenditure for the period was Kshs.109.4 billion, Kshs.98.6 billion and Kshs.110.4 billion for 2021/22, 2022/23 and 2023/2024 financial years respectively, translating to absorption rates of 84.3%, 84.8% and 82.1% over the same period. The resources were utilized to achieve the following:

The mission is to provide equitable, affordable, and high-quality healthcare and the strategic priorities across two state departments: Medical Services and Public Health and Professional Standards. The mandates, functions and the Semi-Autonomous Government Agencies (SAGAs) within the two state departments are outlined in the executive order no. 1 of January 2023. This dual structure supports comprehensive service delivery, from

specialized medical treatments to preventive and promotive health initiatives. UHC is pursued through four key pillars; robust human resources, health products and technologies, digitization, and sustainable financing. A pivotal component is the Social Health Insurance Fund (SHIF), which complements primary healthcare efforts by covering essential medical costs for Kenyans at all income levels.

Significant achievements over the past three fiscal years include expanded access to advanced healthcare services, enhanced maternal and child health outcomes, and substantial gains in communicable disease prevention. Availability of specialized equipment and skills enabled an increase of locally available services for heart surgeries, cancer screening and treatment and other specialized services through the referral health facilities.

Programs addressing HIV/AIDS, malaria, and tuberculosis (TB) made considerable strides, with treatment success rates improving markedly with TB treatment success rate of 89%. Immunization services (Penta 3) have flat-lined at 84% and there is a need to address gaps for higher performance. The fill and finish facility under the Kenya BioVax is 90% complete and will contribute towards the self-sustenance of vaccine availability. The country has attained the 80% global threshold in terms of effective treatment for malnourished children under 5 years of age, pregnant and lactating women.

On training, the tertiary institutions have continued to provide high-quality workforce for the sector with regulatory bodies undertaking their registration, accreditation and oversight functions. There is a need to address the unregulated cadres within the sector to ensure operational consistency with guidelines. A total of 93,390 Community health promoters have been engaged and kitted by the end of the 2023/2024 period. The performance demonstrates increasing coverage with quality health services across the various entities and delivery approaches.

However, the sector encountered substantial obstacles, such as budget shortfalls and uneven healthcare workforce distribution, which slowed progress, especially in rural areas. These challenges underscore the need for improved sustainable financing and equitable deployment of healthcare resources.

In the upcoming MTEF period, the sector aims to allocate substantial funds to expand UHC and strengthen the health system's resilience. The Social Health Insurance Fund, Primary Healthcare Fund, and Emergency Chronic and Critical Illness Fund are pivotal in achieving financial sustainability.

These priorities and approaches highlight the need for an efficient resource allocation and utilization process and is critical to achieving set goals in health services delivery. UHC priorities over this period include expanding primary healthcare infrastructure, focusing on maternal and child health, and improving supply chains for essential health products. This includes digital health investments in infrastructure to connect healthcare facilities with the National Optic Fiber Backbone Infrastructure (NOFBI), targeting expanded coverage to over 6000 health facilities by 2028. Emphasis on evidence-based and data-driven decision-making the digital health superhighways will include the full implementation of the Electronic Community Health Information System (eCHIS) and integration of UHC tracking in real-time through the Kenya Health Situation Room.

Human Resource for Health shortfalls continue to undermine the sector performance and the thrust in the coming period will be to address shortages through equitable distribution and enhanced training opportunities for health professionals.

To mitigate the supply chain issues, the sector goal is to reduce reliance on imports by promoting local manufacturing, expanding cold-chain capacity for immunization and enhancing health facility stock management for essential drugs.

The health sector's reliance on other sectors for infrastructure, education, and research underscores the importance of a cross-sector approach. The collaborations with the Ministry of ICT support telemedicine and rural healthcare access, and partnerships with agricultural sectors address food security and nutrition. Other sectors include the security, social protection, education, regional and international relations amongst others.

The sector is also facing some emerging issues that could erode fragile gains made over the last period. These issues include the critical impact of climate change on health, the potential increase and introduction of new and expanded areas conducive for vector-borne diseases and malnutrition-related conditions due to prolonged droughts depressing agricultural production, In addition, flooding and the increase of water-borne diseases. This intensifying climate volatility challenges Kenya's health sector resilience, stressing the need for robust disease surveillance and adaptable health infrastructure while expanding WASH (Water, Sanitation, and Hygiene) services, and improved capacity for emergency response to health crises tied to environmental instability.

In conclusion, The sector's approach will continue to focus on UHC, human resource capacity, climate and pandemic resilience reflecting the government's commitment to health as a constitutional right. Increased investment in digital health, sustainable financing, and inter-agency collaboration will support the sector's overarching goal of equitable healthcare access for all Kenyans.





# CHAPTER ONE: INTRODUCTION

## 1.1 Background

In conformity with the Kenya Constitution requirement, the Government commits to improve the quality of life for all Kenyans by ensuring Equitable, Accessible, Affordable and Quality Health Care of the Highest attainable Standards. This commitment mandates the National Government to provide leadership on health policies and standards, technical assistance and capacity building towards realization of the health goals.

Through the Bottom-Up Economic Transformation Agenda (BETA) and in an effort to deliver Universal Health Coverage the government in collaboration with County Governments and key stakeholders in the spirit of *Afya bora Mashinani* will continue to prioritize Kenya Vision 2030 Flagship Projects for the Health Sector as outlined in MTP-IV. The pillars of focus in the MTP IV are;

- ❖ Community High Impact interventions including the strengthening primary health care through the community health promoters and establishment of the Primary Health Care Networks.
- ❖ Human resources for health- ensures adequate, appropriately, and equitable distribution of HRH
- ❖ Health products and technologies-**to** ensure efficient HPT management, security for all health
- ❖ Digitization of health - This focuses on digitizing the health ecosystem, strengthening health data quality, governance and use.
- ❖ Health financing To mobilize resources and ensure equitable allocation of funds while maximizing efficiency and value for money. A key element of this is the establishment of the Social Health Authority to manage the three UHC funding mechanisms, namely
  - Primary Healthcare Fund
  - Social Health Insurance Fund
  - Emergency Chronic and critical Illness Fund

Executive Order No. 2/2023 reorganized the Health Sector into two State Departments, namely the State Department for Medical Services and the State Department for Public Health and Professional Standards and enumerated the functions and institutions falling under each State Department.

This Report presents an analysis of the Health Sector performance and achievements for the period 2021/22 to 2023/24, the priorities and resource requirements for the period 2025/26 to 2027/28, cross sector linkages, emerging issues, challenges, and recommendations. This report further outlines the priority investment areas of the Health Sector and its role in socioeconomic development as highlighted in the Subsequent Chapters.

## **1.2 Sector Vision and Mission**

The vision, mission, core values and strategic objectives have been developed in the framework of the mandate and strategic plans.

### **Vision**

The vision of the sector is "A healthy, productive and globally competitive nation"

### **Mission**

The sector mission is "To build a progressive, responsive and sustainable Health care system for accelerated attainment of the highest standard of health to all Kenyans"

### **Goal**

The Goal of the sector is "To attain equitable, affordable, accessible and quality health care for all."

## **1.3 Strategic Objectives for THE SECTOR**

The Sector objectives are as stated in the health Policy (2014-2030). The policy objectives reflect the country's agenda for improving population health. They include;

- To eliminate communicable diseases
- To halt and reverse rising burden of NCDs
- To reduce the burden of violence and injuries
- To provide essential healthcare
- 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 systems.

The focus areas of investments in the Health Sector includes Health financing, Leadership and governance, Health Products and Technologies, Health information, Service delivery, Health Infrastructure, Research & innovation, Health workforce and Development.

**1.4. Sub-Sectors and their Mandates**

**1.4.1 State Department for Medical Services**

Executive Order No. 2 of 2023 outlines the functions of the State Department for Medical Services as well as the institutions under it as shown in table 1.1 below;

**Table 1.1: State Department for Medical Functions and institutions**

<b>Functions</b>	<b>Institutions</b>
<ul style="list-style-type: none"> <li>• Medical Services Policy</li> <li>• Medical research</li> <li>• Curative health services</li> <li>• Health Policy and management</li> <li>• Pharmacy and Medicines Control</li> <li>• National Health Referral Services.</li> <li>• Cancer management policy</li> <li>• E-Health</li> <li>• Immunization Policy and Management.</li> <li>• Reproductive Health Policy and management.</li> <li>• Non-Communicable diseases (NCD) control and management.</li> <li>• Control and protection against HIV/AIDS and STI</li> <li>• Control and management of Leprosy</li> </ul>	<ul style="list-style-type: none"> <li>• Social Health Authority (Social Health Insurance Act No 16 of 2023)</li> <li>• Kenya Medical Supplies Authority (KEMSA) (Kenya Medical Supplies Authority Act, 2013)</li> <li>• Kenyatta National Hospital, (State Corporations Act, Cap. 446,</li> <li>• Moi Teaching Referral Hospital (Legal Notice No.78 of 1998, State Corporations Act, Cap. 446)</li> <li>• The National Cancer Institute of Kenya (Cancer Prevention and Control Act, 2012)</li> <li>• National AIDS Control Council Amendment Order (2022) that establishes the National Syndemic Diseases Control Council</li> <li>• Kenya Medical Research Institute (KEMRI) (Science Technology and Innovation, 2013)</li> <li>• Kenyatta University Teaching, Referral and Research Hospital State Corporations Act Cap 446</li> <li>• Kenya tissue and Transplant Authority</li> <li>• Kenya Biovax institute limited</li> <li>• Spinal Injury hospital</li> <li>• Mathari National Teaching and Referral Hospital</li> <li>• Mwai Kibaki Referral Hospital, (Legal</li> </ul>

	<p>Notice No. 148 of 2024, State Corporations Act, CAP 446,</p> <ul style="list-style-type: none"> <li>Digital Health Authority</li> </ul>
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### 1.4.2 State Department for Public Health and Professional Standards

Executive Order No. 2 of 2023 outlines the functions of the State Department for MPublic Health and Professional Standards as well as the institutions under it as shown in table 1.2 below;

**Table 1.2: State Department for Public Health and Professional Standards Functions and institutions**

<b>Functions of the State Department as per the Executive Order No.2 of 2023</b>	<b>Institutions Under the State Department</b>
<ul style="list-style-type: none"> <li>Public Health and Sanitation Policy;</li> <li>Preventive and Promotive Health Services;</li> <li>Policy on Human Resource Development for Health Care Workers;</li> <li>Health Education Management;</li> <li>Food Quality, Hygiene and Nutrition Policy;</li> <li>Quarantine Administration;</li> <li>Radiation Policy;</li> <li>Administration of the legal and institutional framework for the control of the production, manufacture, sale, labelling, advertising, promotion, sponsorship and use of tobacco products;</li> <li>Control and Management of Tuberculosis (TB) and other Lung</li> </ul>	<ul style="list-style-type: none"> <li>Kenya Medical Practitioners and Dentist Council (KMPDC)</li> <li>Kenya Health Professions Oversight Authority (KHPOA)</li> <li>Kenya Medical Training College (KMTC)</li> <li>Kenya National Public Health Institute (KNPHI)</li> <li>Kenya Hospital Authority Trust Fund</li> <li>Counsellors and Psychologists Board</li> <li>Physiotherapy Council of Kenya</li> <li>Clinical Officers Council of Kenya (COC)</li> <li>Kenya Medical Laboratory Technicians and Technologists Board (KMLTTB)</li> <li>Nursing Council of Kenya (NCK)</li> <li>Kenya Nutritionists and Dieticians</li> </ul>

<p>Diseases; and Malaria Control and Management; and</p> <ul style="list-style-type: none"> <li>• Control and Management of Leprosy</li> </ul>	<p>Institute (KNDI)</p> <ul style="list-style-type: none"> <li>• Health Records and Information Managers Board</li> <li>• Pharmacy and Poisons Board (PPB)</li> <li>• National Quality Control Laboratories (NQCL)</li> <li>• Public Health Officers and Technicians Council (PHOTC)</li> <li>• Kenya Nuclear Regulatory Authority (KNRA)</li> <li>• Kenya Institute of Primate Research (KIPRE)</li> <li>• Kenya Health Human Resource Advisory Council (KHHRAC)</li> <li>• Tobacco control board</li> <li>• Occupational therapy Council of Kenya</li> </ul>
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## 1.5. Autonomous and Semi-Autonomous Government Agencies

### 1.5.1 State Department for Medical Services

The State Department Semi-Autonomous Government Agencies (SAGAs) are stated in the Executive Order No. 1 of January 2023. They include.

#### 1. Kenyatta National Hospital (KNH)

Kenyatta National Hospital (KNH) was established through Legal Notice No. 109 of 6th April 1987 and as amended under Legal Notice No. 38 of 1st March 2021. The Hospital is mandated to receive patients on referral from other hospitals or institutions within or outside Kenya for specialized health care; Provide facilities for medical education for the University of Nairobi Medical School, and for research either directly or through other co-operating health institutions; Provide facilities for education and training in nursing and other health and allied professions and Participate as a national referral hospital in national health planning. Over the years KNH has grown to its present capacity of 2,516 beds and attends to an annual average of 949,000 inpatients and 800,009 outpatients including Mwai Kibaki Hospital (MKH) and Mama Margaret Uhuru Hospital (MMUH).

## **2. Moi Teaching and Referral Hospital (MTRH)**

Moi Teaching and Referral Hospital (MTRH) is a State Corporation established through Legal Notice No. 78 of 12<sup>th</sup> June 1998 under the State Corporations Act (CAP 446). It is a Level 6B National Referral Hospital located in Eldoret town, Uasin Gishu County, in the North Rift region of Western Kenya. MTRH is the training facility for Moi University College of Health Sciences, Kenya Medical Training College (KMTC) Eldoret Campus and University of Eastern Africa Baraton.

## **3. Kenyatta University Teaching, Referral and Research Hospital (KUTRRH)**

Kenyatta University Teaching, Referral and Research Hospital (KUTRRH) was established as a state corporation under the State Corporations Act Cap 446 through a Legal Notice No.4 of 2019. The mandate of the hospital is to receive patients on referral from other hospitals or institutions within or outside Kenya for specialized health care.

## **4. Kenya Medical Supplies Authority (KEMSA)**

Kenya Medical Supplies Authority was established under the Kenya Medical Supplies Authority Act No. 20 of 25<sup>th</sup> January 2013 as a successor to the Kenya Medical Supplies Agency, established under Legal Notice No. 17 of 3<sup>rd</sup> February 2000. The Authority 's mandate is Medical logistics provider with the responsibility of supplying quality and affordable essential medical commodities to health facilities in Kenya through an efficient medical supply chain management system.

## **5. Kenya Medical Research Institute (KEMRI)**

The Kenya Medical Research Institute (KEMRI) is a State Corporation established in 1979 under the Science and Technology (Repealed) Act, Cap 250 Laws of Kenya, subsequently under the Science, Technology and Innovation Act, 2013 and as currently established under Legal Notice No. 35 of 31<sup>st</sup> March 2021.

The objective of the Institute shall be to carry out health research, innovation, capacity-building and service delivery for the improvement of human health and quality of life, and advise the Government on matters related thereto. KEMRI is responsible for providing leadership in health research & development, shaping the health research agenda, setting norms and standards, articulating evidence-based policy options, and monitoring and assessing health trends as well as dealing with trans-boundary threats and disease outbreaks.

## **6. Social Health authority (SHA)**

The Social Health Authority (SHA) was established through the Social Health Insurance Act, No. 16 of 2023, which was assented to on 19th October 2023 and came into force

on 22nd November 2023. The Act establishes the Social Health Authority and a framework for managing social health insurance to give effect to Article 43(1)(a) of the Constitution.

The Authority administers three Funds namely; Primary Care Fund, Social Health Insurance Fund, and the Emergency, Chronic and Critical Illness Fund. Notably, the Act gives provision for innovative financing mechanisms, such as public-private partnerships and additional revenue streams, to strengthen the Authority's financial position. The SHI Act repealed the National Health Insurance Act No. 9 of 1998. The transition from NHIF to SHA aims to mitigate financial strains and guarantee the Authority ability to provide quality healthcare services efficiently and effectively.

### **7. The National Syndemic Diseases Control Council – (NSDCC) formerly National AIDS Control Council (NACC)**

The National Syndemic Diseases Control Council (NSDCC) is a State Corporation established under Section 3 of the State Corporations Act, Cap 446, through the National Syndemic Diseases Control Council Order, 1999 as amended by legal notice number 143 of 2022. The amendment comprises an expanded mandate to manage Syndemic diseases, including HIV, sexually transmitted infections, malaria, leprosy, tuberculosis, and lung disease. The key mandate of NSDCC is to: Develop policies and guidelines relevant to the prevention and control of Syndemic diseases as well as mobilize resources and Government Ministries, Counties and institutions, non-Governmental organizations, community-based organizations, research bodies, the private sector and universities to participate in Syndemic diseases control and prevention.

### **8. National Cancer Institute of Kenya**

The National Cancer Institute of Kenya (NCI Kenya) is a state corporation established by the Cancer Prevention and Control Act (No. 15 of 2012). This was in recognition of the need for a coordinated response to the growing cancer burden in Kenya. The mandate of the NCI Kenya is to coordinate and centralize all activities, resources and information related to cancer prevention and control in Kenya.

### **9. Mathari National, Teaching and Referral Hospital**

Mathari Hospital, established in 2020 as a State Corporation under the State Corporations Act Cap 446 through Legal Notice No. 165, is a level 6 tertiary healthcare facility. The hospital's mandate is to Provide highly specialized services including Specialized psychiatric services, Forensic psychiatry services, Child and adolescent mental health services, Receive and manage referrals of persons with mental disorders from other facilities for specialized care and to Provide training and research facilities in the field of



psychiatry and mental health for doctors, nurses, clinical officers and other allied health workers.

#### **10. National Spinal Injury Referral Hospital.**

The National Spinal Injury Referral Hospital was founded in 1944 as a facility to care for World War II soldiers who had spinal cord injury. The hospital is not yet confirmed as a SAGA, but the request has been discussed with the previous Health Parliamentary team and the completion process is underway.

The main mandate of the hospital is to achieve effective accessible, equitable and secure health services for patients with spinal injuries that will bring the realization of Universal Health Coverage (UHC) in Kenya. Hospital offers Curative Spinal Services such as spine, plastic and general surgeries; nursing care; medical care; diagnostic laboratory and radiology, Rehabilitative Services including physiotherapy, occupational therapy, psychosocial therapy and orthopaedics as well as Promotive and Preventive Spine care; including chronic pain management; health education on spine care to general public and former patients.

#### **11. Kenya Tissue and Transplant Authority**

The Kenya Tissue and Transplant Authority (KETTA) formerly, Kenya National Blood Transfusion Tissue and Human Organ Transplant Service is a State Cooperation established under Legal Notice No. 142 of 1st August 2022. The Authority is mandated to ensure access to the safe and ethical use of human cells, tissues and organs and the safety, biosafety, and well-being of donors and recipients in medical services relating to human-derived medical products through the establishment and maintenance of systems that comply with safety and legal requirements. The Authority currently runs a hub and spoke model approach to increase access to blood transfusion services in the Country through blood donor recruitment, collection, and laboratory processing to ensure blood transfusion safety. The Authority has a network of 6 Regional Blood Transfusion Centers and provides commodities for blood collection to all the blood establishments.

#### **12. Kenya Biovax Institute (KBI)**

Kenya Biovax Institute (BioVax) Limited is a State Corporation incorporated under the Companies Act 2015 on 16 th September 2021. Kenya Biovax Institute is a purpose-led, biotechnology institution with a focus on manufacturing, commercialization and R&D for specialized HPTs, including human vaccines, biotherapeutics and diagnostics. The Institute's establishment was catalysed by the need to ensure self-sufficiency and sustainability of human vaccines post-GAVI/UNICEF graduation and dwindling donor-

financing, in order for Kenya to promote life for maternal and under-5 populations. Further, due to lessons learnt from COVID-19, there is an urgent need for enhanced efforts towards pandemic preparedness to ensure availability of specialised health products and technologies including vaccines for national health security.

### **13. Mwai Kibaki Referral Hospital**

Mwai Kibaki Referral Hospital (MKRH) was established as a state corporation under the State Corporations Act Cap 446 through a Legal Notice No. 148 of 2024. The Hospital is mandated to receive patients on referral from other hospitals or institutions within or outside Kenya for specialized health care, provide facilities for research and medical education for the Dedan Kimathi University of Science and Technology, provide facilities for education and training in nursing and other health and allied institutions and participate in national health planning.

### **14. Digital Health Agency**

The Digital Health Agency (DHA) was established by the Digital Health Act, 2023. The core mandate is to establish, operationalize and maintain the comprehensive and integrated health information system and ensure that it is secure by design, robust and flexible. Further, the Agency has a regulatory role, as per the Digital Health Act, and is tasked to certify all digital health solutions that are to be used in the country.

## **1.5.2 State Department for Public Health and Professional Standards**

The following are the semi-autonomous government agencies within the State Department for Public Health and Professional Standards.

### **1. Kenya Medical Training College (KMTTC)**

Kenya Medical Training College is a body corporate established under the provisions of the Kenya Medical Training College Act, (Cap 261) of the laws of Kenya as amended by Act No.5 of 2019). The Kenya Medical Training College (KMTTC) is a State Corporation established in 1990 through an Act of Parliament Cap 261 Section 3 of the Laws of Kenya as amended by Act No. 5 of 2019. Founded in 1927, it is the largest middle-level medical training, research, and consultancy institution in Kenya and the East African region. Its graduates contribute to 85 percent of the healthcare workforce in Kenya. Currently the College has 84 campuses and 5 satellite campuses with an enrollment of approximately 70,000 students.

### **2. Kenya Nuclear Regulatory Authority (KENRA)**

The Kenya Nuclear Regulatory Authority (KNRA) is a State Corporation, established on 10th January 2020, by the Nuclear Regulatory Act, 29 of 2019. It is mandated to ensure the safe, secure, and peaceful use of nuclear science and technology, and to provide protection for persons, property, and the environment against the harmful effects of the production and use of radiation sources, nuclear materials, associated technologies, and facilities, guarding against the related hazards effectively.

### **3. Kenya Medical Practitioners and Dentists Council**

The Kenya Medical Practitioners and Dentists Council is established under Section 3 of the Medical Practitioners and Dentists Act Cap 253 of the Laws of Kenya. The mandate of the Council is to regulate the practice of medicine, dentistry and health institutions in the country. This Act was enacted by Parliament in 1977 and came into operation on 1st January 1978. (The Act was revised in 2019, CAP 253).

### **4. The Kenya Health Human Resource Advisory Council (KHHRAC)**

The Kenya Health Human Resource Advisory Council (KHHRAC) is established under the Health Act 2017, Part V Sections 30-44, and is mandated to review policy and establish uniform norms and standards on the management of interns and medical specialists, intergovernmental transfers (county to county and between the two levels of government), welfare and the scheme of service for health professionals and maintenance of a master register for all health practitioners in the country.

### **5. The Kenya Health Professions Oversight Authority (KHPOA)**

The Kenya Health Professions Oversight Authority is a corporate body created by part VI of the Health Act no. 21 of 2017 with the mandate of providing oversight in training, registration and licensing of health professionals; coordinating joint health inspections; receiving and facilitating resolution of complaints and arbitrating disputes and conflicts; and monitoring execution of respective mandates and functions of health regulatory bodies. It has been categorized by the State Corporation Advisory Council (SCAC) as a Regulatory Corporation category PC 6.

### **6. Nursing Council of Kenya (NCK)**

The Nursing Council of Kenya (NCK) is a regulatory body under the Ministry of Health established on 10th June 1983 by an Act of Parliament under the Nurses Act Chapter 257 of the Laws of Kenya. It is mandated to make provision for the training, registration, enrolment and licensing of nurses and midwives: to regulate their conduct and to ensure

their maximum participation in the health care of the community and for connected purposes

### **7. Clinical Officers Council (COC)**

The Clinical Officers Council was established under the Clinical Officers Act, No. 20 of 2017, laws of Kenya. The Council's mandate is to oversee the training, registration, and licensing of clinical officers, regulate their professional practice, and address matters related to the effective delivery of clinical services. This ensures that clinical officers meet the required standards of competence and professionalism, safeguarding the quality of healthcare services.

### **8. Kenya Medical Laboratory Technicians and Technologists Board (KMLTTB)**

KMLTTB is a body corporate with statutory mandate to exercise general supervision and control of training, registration and licensing of medical laboratory technicians and technologists under CAP 253A, laws of Kenya. The board also advises the government in relation to all aspects including validation of invitro diagnostics through legal notice NO.113 of 2011.

### **9. Kenya Nutritionists and Dieticians Institute (KNDI)**

The Kenya Nutritionists & Dieticians Institute (KNDI) was established to provide for training, registration, and licensing of nutritionists and dieticians; to provide for the registration of the standards and practice of the profession; to ensure their effective participation in matters relating to nutrition, dietetics; and for related purposes under the Nutritionists & Dieticians Act No. 18 of 2007.

### **10. Public Health Officers and technicians' Council**

The Public Health Officers and Technicians Council is a statutory body established under the Public Health Officers (training, registration, and Licensing) Act CAP 253G, laws of Kenya. The council's mandate is to regulate the training, registration, and licensing of public health officers and technicians in Kenya.

### **11. Pharmacy and Poisons Board/ Council (PPB)**

The Pharmacy and Poisons Board (PPB) is the Drug regulatory authority established under The Pharmacy and Poisons Act Cap 244, laws of Kenya. The mandate of the Board is to regulate the practice of pharmacy, the drug and poisons. the Board aims to implement the appropriate regulatory measures to achieve the highest standards of safety, efficacy

and quality for all drugs, chemical substances, medical devices, locally manufactured, imported, exported, distributed, sold or used, to ensure the protection of the consumer as envisaged by the regulating drugs in force in Kenya.

#### **12. Tobacco Control Board (TCB)**

The Tobacco Control Board is established under Section 5 of the Tobacco Control Act 2007, CAP 245A with a broad mandate of advising the Cabinet Secretary for Health on National Tobacco Control Policy, Regulations relating to production, manufacture, sale, labelling, advertising, promotion and sponsorship of tobacco products, and generally on implementation of the Act.

The principal mandate of the Tobacco Control Board is to oversee the implementation of the Tobacco control laws and policies, primarily focusing on reducing tobacco consumption and harmful effects on public health. This includes regulating tobacco advertising, packaging, sales, and use in accordance with the Tobacco Control Act, 2007, and ensuring compliance with Kenya's obligations under World Health Organization's Framework Convention on Tobacco Control. The Board also works on public education, research, and enforcement of restrictions on smoking in public places.

#### **13. National Quality Control Laboratory (NQCL)**

The National Quality Control Laboratory was established as a body corporate, under Section 35 of the Pharmacy and Poisons Act Cap 244, Laws of Kenya. It is mandated to carry out the examination and testing of health products and technologies locally manufactured or imported with a view to determining whether such health products and technologies comply with the act or rules made under the act.

#### **14. Physiotherapists Council of Kenya**

The Physiotherapist Council of Kenya was established under the Physiotherapist act CAP 253D, Laws of Kenya. The key mandate of the council is to regulate the Training, Registration, and Licensing of Physiotherapists in Kenya. The Council ensures that physiotherapists meet the necessary professional standards, promoting competence and accountability within the profession to enhance the quality of physiotherapy services provided in Kenya.

#### **15. Health Records and Information Managers Board**

Health Records and Information Managers Board is established under section 7 of the Health Records and Information Managers Act, Cap 539, Laws of Kenya. The Board is mandated to regulate training, registration, licensing and practice of Health Records and Information Managers.

## **16. Counsellors and Psychologist Board**

The Counsellors and Psychologist Board is established under part 2 of the Counsellors and Psychologist Board Act, 2014 (No. 14 of 2014). The Act provides for the training, registration, licensing, practice and standards of Counsellors and Psychologists.

## **17. The Kenya National Public Health Institute**

The Kenya National Public Health Institute was established under CAP 446 Laws of Kenya and came into operation under Legal Notice no.14 on 21st Jan 2022. It is mandated to establish mechanisms to facilitate quick detection of outbreaks and emergencies; Conduct vulnerability and risk assessment, and mitigate various health-threatening issues in collaboration with non-health entities including Ministries responsible for matters relating to environmental health, animal health, and trade; academic institutions and non-governmental organizations.

## **18. Kenya Hospital Authority Trust Fund**

The Kenya Hospital Authority Trust Fund (KHATF) was established in 1968 by the then, Minister of Health through a Trust Deed in exercise of the powers conferred upon the Minister by National Hospital Insurance Fund Act of 1966 Section 42(3). The objective of the fund as spelt out in section 1 of the Trust Deed was the "furtherance of medical education in association with the University College of Nairobi".(not functional)

## **19. Occupational Therapy Council OF KENYA**

The Occupational Therapy Council is established under the Occupational Therapists (Training, Registration and Licensing) Cap 253H, laws of Kenya. The key mandate of the Council is to regulate the training, registration, licensing and the practice of occupational therapists. The Council also plays a crucial role in evaluating and regulating the tools, equipment, and appliances used in occupational therapy practice. This ensures that only approved and effective methods are applied, aligning with the latest industry standards.

## **20. Kenya Institute of Primate Research (KIPRE)**

The Kenya Institute of Primate Research (KIPRE), formerly Institute of Primate Research, is a biomedical research facility established through legal notice No. 273 of 2017 anchored in Science, Technology & Innovation Act no 28 of 2013 Cap 511 of laws Kenya and executive order no. 1 of 2023.

Its mandate is to ethically utilize non-human primates and other experimental animals for research resulting in production and commercialization of vaccines, drugs, therapeutics, medical intervention and services to improve human health. Additionally, KIPRE conduct research on 'one health' to provide early warning for emerging and re-emerging diseases arising from high risk disease interface zones of humans-livestock-wildlife in the light of climate change. This solidifies the government's commitment to prevent and mitigate epidemics and pandemics as well as build domestic capacity for health security, aligning with the Universal Health Coverage (UHC) agenda.

### 1.6. Roles of State Department's Stakeholders

The Health Sector is governed through the steering leadership of the Government. The following are major stakeholders in the Sector:

**Table 1.2: Stakeholders in the Health Sector**

<b>Name of Stakeholder</b>	<b>Role of the Stakeholder</b>
<b>The National Treasury</b>	Providing budgetary support for investments, operations and maintenance of the Sector besides the remuneration of all employees.
<b>State Department for Economic Planning</b>	Coordination of planning, policy formulation and tracking of results.
<b>National Assembly and Senate</b>	Legislation and oversight on matters relating to health including law enactment and budgetary approval.
<b>County Health Departments</b>	In accordance with Schedule 4 of the Constitution counties departments of Health are specifically mandated with: County health facilities; County health pharmacies; Ambulance services; Promotion of preventive and promotive health care services; licensing and control of sale of food in public places; veterinary services; cemeteries, funeral parlours and crematoriums; enforcement of waste management policies.
<b>Non-State Actors in Health</b>	They include the private sector, faith-based organizations (FBOs), non-governmental organizations (NGOs), Community Based Organizations (CBOs) and Civil Society

	organizations (CSOs). Non state actors contribute to Health service delivery through advocacy and resource mobilizing, provision of service delivery, social mobilization at community level to influence health seeking behaviour, promotion of best practices and address human rights and gender issues.
<b>Academic Institutions</b>	Universities and middle level colleges play crucial roles in health research, development of Human resources for Health, provision of tertiary health care and funding.
<b>WHO</b>	Support the State Department with technical advice on Health systems strengthening approaches; both national and counties.
<b>Global Fund</b>	The Global Fund is a multi-sectoral partnership designed to accelerate the end of AIDS, tuberculosis, and malaria at national and county levels. Key programmatic activities are for the procurement of diagnosis and treatment commodities; facilitate preventive measures. In addition, the support is to improve the quality of care; enhance use of quality data for decision-making; social behaviour; support community approaches and address human right and gender.
<b>PEFFAR (USAID &amp; CDC)</b>	Supports the State Department in provision of Financial and Human resources and technical assistance for the HIV and TB programs at the National and county levels.
<b>GAVI</b>	Support for Vaccines and Immunization programmes
<b>World Bank</b>	Support health systems strengthening interventions in both national and county government levels
<b>JICA</b>	Leadership and Governance, infrastructure, community health both National and Counties
<b>UNICEF</b>	Supports maternal, children & adolescents, nutrition and healthcare, strengthening of health and nutrition



	systems, Scorecard (RMNCAH) and water and sanitation (WASH) programs at both National and county levels.
<b>UNFPA</b>	Support on Population Health and family planning commodities; maternal health programme (RMNCAH)
<b>UNAIDS</b>	Co-ordinate the joint UN team for multi sectoral HIV response; support M&E of HIV response
<b>DANIDA</b>	Health System strengthening in the Counties.
<b>Organization of Petroleum Exporting Countries (OPEC)</b>	Support for Burns and Paediatric centre.
<b>Saudi Arabia Fund for Development</b>	Support for cancer centre in Kisii Hospital and Burns and Paediatric centre.
<b>Arab Bank for Economic Development in Africa (BADEA)</b>	Support for cancer centre in Kisii hospital and burns & Paediatric centre.
<b>Private sector consortium-local manufacturers of health products</b>	Coordinates all private practice members;
<b>Faith-Based Organizations</b>	Coordinates Faith based health services among them are SUPKEM, CHAK and KCCB
<b>Kenya Health Federation</b>	The federation works with commercial and public institution, professionals, non-state actors to promote strategic public private partnerships
<b>Other state actors</b>	Multisectoral collaboration to implement programs that have impact on Health including; Ministry of Environment and Forestry, Ministry of Water, Sanitation and Irrigation; Ministry of Agriculture and livestock development; Ministry of Labour and Social Protection; Ministry of Public Service, Gender, and Affirmative Action, Ministry of Information, Communications and the Digital Economy,

	Ministry of Interior and National Administration Ministry of Roads and Transport, Ministry of Education, Ministry of Trade, Investments and Industries, Judiciary through inter-sectoral collaboration in promotion of health services, disease prevention and addressing the social determinants of health. In addition, Kenya National Bureau of Statistics (KNBS) and Kenya Institute for Public Policy Research and Analysis (KIPPRA) conduct surveys and provide information for policy and planning purposes.
<b>Clients/ Consumers of Health Services</b>	Household and communities have a major role in the demand and utilization of quality, accessible and affordable services
<b>East Africa Community (EAC)</b>	EAC has a key role in advocating for and safeguarding cross border health
<b>Advocacy groups- Qualify</b>	These are non-profit organisation and advocacy groups that focus on public health issues and professional standards working to influence policy and promote public health initiatives.
<b>Schools</b>	These includes primary and secondary schools whereby primary health care is reinforced
<b>Other state actors (MDAS)</b>	Multisectoral collaboration to implement programmes that have an impact on Health.
<b>Council of Governors</b>	

## CHAPTER TWO: PROGRAMME AND PERFORMANCE REVIEW 2021/22- 2023/24

### 2.1. Review of Sector Programmes Performance- delivery of outputs/ KPI/targets

**Table 2.1: Analysis of Programme Targets and Actual targets**

#### STATE DEPARTMENT FOR MEDICAL SERVICES

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
<b>Programme 1: National Referral Facilities and Specialized Services</b>										
<b>Programme Outcome: Increased access and range of quality specialized health care services</b>										
<b>S.P 1.1 National Referral &amp; Specialized Health Services</b>	Kenyatta National Hospital	Specialized health care services	Number of Heart surgeries done	359	395	491	465	627	609	The planned targets were surpassed. The Hospital established Cardiothoracic Critical Care Unit dedicated for heart surgery patients as well as acquisition of additional specialized equipment
			Number of other cardiothoracic surgeries conducted	1,024	1,127	1,192	1,142	1,238	1,293	Target surpassed due to training of specialized doctors and nurses
			Number of Kidney Transplants conducted.	15	20	20	16	19	19	Target not achieved. This is due to machinery breakdown and the two month industrial action.
			Number of minimally invasive surgeries done	5,756	5,956	6,144	6,044	6,113	6,354	Target surpassed. It's as a result of, patient education on benefits of minimally invasive surgeries were conducted and 2 dedicated operating rooms for minimally invasive procedures were established.

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Number of patients undergoing specialized Burns treatment (OBD)	544	589	570	553	524	589	Target surpassed for FY 1 and 3. The hospital has initiated RRI for reduction of ALOS and allocation of additional specialised dedicated theatre
			Number of oncology sessions on (Chemotherapy and radiotherapy)	41,970	42,068	40,372	38,639	37,772	43,216	Target surpassed for FY 2023/24 due to a high demand for oncology sessions and expansion of 4 chemotherapy centers in the Hospital (2 Paediatrics and 2 Adult) and training of specialized personnel
			Average Length of Stay (ALOS) for trauma patients (days)	36	36	36	40	38	35	Target achieved for FY 2023/24 after the hospital initiated RRI for reduction of ALOS and allocation of additional specialized dedicated theatre
			Average waiting time (days) for radiotherapy	20	19	19	18	22	18	Target achieved for FY 2023/24 after the hospital Implemented the Equipment Replacement Plan is ongoing whereby a brachytherapy machine has been installed and operationalized. Introduced a Three shift system and initiated patient notification and communication system in a bid to improve service delivery to cancer patients.

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Average waiting time (days) for chemotherapy	18	16	13	14	5	3	Target achieved. The hospital introduced 24-hour in-patient chemotherapy services and operationalized two (2) satellite paediatrics chemotherapy centres. In addition, specialized teams and strict adherence to NHIF booking model established.
		Health Research Services	Number of new research projects disseminated	17	18	20	18	34	27	Target surpassed. The hospital has expanded the knowledge repository and provided a platform for research mentorship program and was in the process of establishing the Research unit. Hospital transferred to the Nairobi county
		Multidisciplinary Outreaches services	Number of Multidisciplinary Outreaches with Counties	61	67	379	381	391	373	Target surpassed in the period under review .The outreaches were conducted which included both physical and webinars to various counties
		Mentorship and preceptorship services	Number of staff under mentorship and preceptorship	50	50	50	53	14	10	Target not met for 2022/23 FY due to government austerity measures on training
	Mwai Kibaki Hospital	Specialized health care services	Number of minimally invasive surgeries done	1,800	1,541	1,541	1,698	1,907	1,591	Target surpassed in FY 2022/23 and 2023/24 due to operationalization of the maternity theatre, engaged specialists in obstetrics, orthopaedics, urology,

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										ENT and ophthalmology
			Number of NCD screening sessions	N/A	3	130	N/A	6	98	Target not met for the FY 2023/24 due to operational issues such as doctors strike that affected the hospitals operation for two months
			Number of specialized clinics available in the facility	18	20	23	16	17	16	Target not met due to the Hospital failing to hire a nephrologist, plastic specialist and neurosurgery specialist.
			Average waiting time for chemotherapy services (days)	12	12	10	20	7.6	7.7	Target surpassed for the FY 2022/23 and 2023/24. The Hospital has implemented sessional consultancy for oncology unit and introduced framework contracts for oncology medicines. In addition, the Hospital introduced the KNH visiting doctor model.
			Number of dialysis sessions conducted	3,500	3,323	3,000	4,025	3,514	2,614	Target not achieved in the Fy 2023/24 due to occasional breakdowns of machines that affected optimal operations and the doctors strike.
			Average length of stay for trauma patient (days)	15	14	17.3	17.8	15	16.1	Target achieved for FY 2023/24 as the hospital gave theatre priority for trauma and orthopaedic patients
			Number of oncology sessions (Chemotherapy and radiotherapy)	N/A	N/A	1,056	N/A	N/A	1,091	Target achieved due to availability of oncology medication

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
		Health Research services	Number of research projects on health disseminated	N/A	7	1	N/A	1	2	Target not achieved for 2022/23 FY since the research unit was still under establishment. Target for FY 2023/24 surpassed due to continuous engagement with Cardiac society of Kenya.
		Mentorship and preceptorship for specialized health personnel services	Number of youth internships/industrial attachments/apprenticeship	N/A	130	150	N/A	153	218	Target surpassed due to high demand of students seeking for attachment and internship. Signed MoUs with training institutions.
		Multidisciplinary outreaches services	Number of Multidisciplinary Outreaches with Counties	12	15	27	13	17	23	Target not met for 2023/24 FY due to a prolonged doctors strike. Target for FY 2021/22 and 2022/23 surpassed due to planned outreaches done
	Mama Margaret Uhuru Hospital	Specialized healthcare services	Number of new specialized clinics established	N/A	N/A	4	N/A	N/A	6	Target achieved. Introduced 6 specialized clinics.
			Number of minimally invasive surgeries done	N/A	N/A	104	N/A	N/A	91	Target not achieved. Facility transferred to Nairobi County Government
			Number of oncology sessions on (Chemotherapy and radiotherapy)	N/A	N/A	52	N/A	N/A	27	Target not achieved. Facility transferred to Nairobi County Government
		Health research services	Number of briefs to inform national policy	N/A	N/A	1	N/A	N/A	0	Target not achieved. Facility transferred to Nairobi County Government in April 2024

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
		Multidisciplinary Outreaches services	Number of Multidisciplinary Outreaches with Counties	N/A	N/A	14	N/A	N/A	4	Target not achieved. Facility transferred to Nairobi County Government in April 2024
	Moi Teaching and Referral Hospital	Specialized Healthcare Services	Average Length of Stay for Orthopedic Surgery (Trauma Patients) Days	12	11.7	11.4	11.3	11.1	11.0	Achievement due to timely specialized diagnostic services, adoption of 24-Hour Theatres operations, consistent supply of drugs and non-pharmaceuticals.
Average Length of Stay for Pediatric Burns Patients(days)			34.1	31.3	31.2	30.6	30.3	26.2	Achievement due to timely interventions to patients (Consultant's daily ward rounds), availability of drugs/supplies, and timely discharges	
Average waiting time (days) for Radiotherapy			N/A	90	46	N/A	46	69	None achievement is attributed to none operationalization of the second Radiotherapy Equipment (Linear Accelerator) due lack of funding to hire additional specialized staff (Oncology Specialists, Medical Physicists, , Oncology Nurses and Radiation Technologists/Therapists, and Dosimetrists)	
Number of Kidney Transplants undertaken			17	18	13	18	18	20	Target achieved due to continued screening & recruitment of patients from the Clinics and Wards as well as investment in Specialized HRH, Medical Equipment and Reagents	



Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Number of Minimally Invasive Surgeries	2,500	2,700	2,800	3,118	3,202	3,081	Target surpassed due to continued screening & recruitment of patients from the Clinics and Wards as well as investment in Specialized HRH and Medical Equipment.
			Number of Chemotherapy sessions done	15,350	16,600	16,850	17,536	19,622	20,379	Target surpassed due to Continuous availability of Consultants at the Clinics & adherence to chemotherapy sessions schedules.
			Number of Open-Heart Surgeries conducted	40	44	25	56	92	72	Target surpassed due to continuous investment in specialized Human Resources for Health (HRH), modern equipment, consistent availability of drugs and other medical supplies.
			Number of External Beam Radiotherapy Sessions.	N/A	10200	10100	N/A	14808	17,014	Target surpassed. Achievement is attributed to the scheduling of patients, timely treatment planning, maintenance of equipment. Hiring of 2 more medical physicists, and timely procurement of radiotherapy source.
			Number of Brachytherapy Sessions	N/A	135	137	N/A	283	326	Target surpassed. This was due to training and employment of 2 medical physicist and adequate treatment planning, hence a reduced waiting time and increased efficiency

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Number of Corneal Transplants conducted	10	11	11	12	15	39	Target Surpassed. Achievement is attributed to highly trained staff, corneal tissue (imported), modern equipment, adequate drugs, and essential supplies. MTRH is the only Public Hospital in Kenya doing Corneal Transplants in Kenya.
		Health Research services	Number of Research Papers Published	22	24	28	21	120	100	Target surpassed. Achievement is due to allocation of Research Fund (Intramural Funds) by MTRH and other Research Grants through Academic Model Providing Access to Healthcare (AMPATH)
			Number of Briefs to inform National Policy	N/A	N/A	4	N/A	N/A	4	Policies developed to inform National policy include (Utilization of Community Health promoters (CHPs). Sustainable Healthcare Financing, Community Revolving Pharmacies and Participation in drafting the Kenya Blood and Transplant Bill 2023
		Multidisciplinary Outreach services	Number of Multi-disciplinary Outreaches with Counties	77	81	60	86	93	102	Target surpassed due to continuous engagement with the County Governments. This was done in partnership with the County Health Services.

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
		Specialized Healthcare Services	Average Length of Stay for Orthopedic Surgery (Trauma Patients) Days	12	11.7	11.4	11.3	11.1	11.0	Achievement due to timely specialized diagnostic services, adoption of 24-Hour Theatres operations, consistent supply of drugs and non-pharmaceuticals.
			Average Length of Stay for Pediatric Burns Patients(days)	34.1	31.3	31.2	30.6	30.3	26.2	Achievement due to timely interventions to patients (Consultant's daily ward rounds), availability of drugs/supplies, and timely discharges
	Kenyatta University Teaching, Referral and Research Hospital	Specialized Health care Services	Number of Open Heart Surgeries conducted	4	18	30	13	35	42	The target was exceeded due to increased demand for the service
			Number of Kidney Transplants conducted	0	2	15	0	0	0	Target not achieved. Capacity building was undertaken for the transplants to start in 2024/25
			Number of minimally invasive surgeries conducted	150	750	1000	735	1234	1187	The target was exceeded due to increased demand for the service
			Number of patients on Hemodialysis	6500	7,200	10,200	6,845	7,840	10,311	The target was exceeded due to increased demand for the service
			Number of patients receiving chemotherapy & radiotherapy treatment	18000	19,500	20,500	18,950	19,752	21,640	The target was exceeded due to increased demand for the service
			Number of specialized Gynecology procedures conducted	500	500	600	600	650	650	The target was exceeded due to increased demand for the service
			Average waiting time (days) for radiotherapy	17	18	50	20	28	60	The target was not achieved due to the inability to meet the

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										demand for radiotherapy services
			Average waiting time (days) for Chemotherapy	21	17	6	18	7	6	The target was surpassed as a result introduction of a new shift for chetherapy services
			ALOS for orthopedic patients' (days)	16	14	14	15	11	14	Target achieved as a result of quality improvements in the management of patients
			ALOS (days) for surgery patients (days)	9	7	7	7	6	7	Target achieved as result of operationalization of all theatres thus having more theatre days
			Number of PET Scan examinations conducted	0	4000	4500	0	3,685	5,592	The target was exceeded due to increased demand for the service
			Number of SPECT CT-Scan examinations conducted	0	500	1000	0	570	155	Target was not met because of the industrial action that disrupted services
			Number of Stereotactic Radiosurgeries conducted	0	50	600	0	0	349	Target was not met because of the industrial action that disrupted services
			Number of Brachytherapy sessions conducted		720	900	0	854	373	Target was not met because of the industrial action that disrupted services
		Health research services	Number of research conducted & completed	2	3	6	2	3	3	Target achieved for FY 2021/22 and 22/23 as a result of increased capacity through training of staff on research. Target not achieved for FY 2023/24 due to industrial action.

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
Mathari National Teaching and Referral Hospital	Specialized Mental health and Psychiatric services	Number of Policies, Standards and Regulations developed to operationalize MNTRH	0	1	3	0	2	3	Target achieved. The hospital developed 3 policies in FY 2023/24	
		Re- admission rate (proportion of patients readmitted in a year)	53	52	50	50	48	47	Target achieved. Modern new generation medicines used for treatment	
		Number of Patients receiving in-patients specialized mental health care services/ Number of patients with mental disorders receiving specialized mental health care services	259066	272000	280000	189182	248254	251390	Target was not achieved. In the FY 2023/24 there was a 56 day doctors' strike, which led to a reduction in patient discharges following the industrial action. The failure to achieve targets in the other years was due to staff shortages	
		Average Length of Stay for civil psychiatric inpatients (Days)	55	50	48	48	44	47	Target was achieved due to new generation medication used for treatment	
		Number of community mental health outreaches conducted	2	2	6	16	21	30	Target was surpassed due to increased sensitization campaigns.	
		Number of Forensic outpatients receiving psychiatric patient services	530	580	680	589	602	720	Target achieved due to increased awareness of mental health in correctional services	
		No. of Electroconvulsive Therapy (ECTs) sessions done	0	400	450	0	450	490	The target was surpassed due increased consultant reviews and a fully functional ECT machine	
		Number of Patient with drugs/substance and alcohol addiction receiving rehabilitative	100	250	590	120	264	593	The target was surpassed largely due to enhanced service delivery and	

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			mental health care services							modernization of the rehabilitation unit.
			Percentage of specialized psychiatric medical drugs (psychotropics) acquired	1	1	0.8	0.6	0.65	0.7	Target was not achieved due to a shortage of essential drug supplies from government suppliers, requiring alternative supplier sourcing by the hospital.
			Number of patients receiving out-patient specialized mental healthcare services	296985	312000	320000	254913	322100	343675	Target for was surpassed as a result of expanded service coverage and an increase in patient referrals.
			Number of MNTRH Health Practitioners trained on specialized Mental Health curricula	4	8	10	5	15	3	The target was not achieved due to inadequate government funding and staff shortage
			Percentage of abandoned patients re-integrated into the community	0.9	0.85	0.9	0.8	0.9	0.7	The targets were not achieved due to inadequate government funding and the doctors industrial action
			Number of new research conducted on mental health, psychiatry and behavioural health system needs	1	1	2	0	3	2	Target achieved. Three ongoing research projects in FY 2023/24: 1. A cost-benefit analysis of using long-acting antipsychotic injectable for treating schizophrenia 2. Quality rights study
	Spinal Injury Hospital	Specialized spine services	Out-patient spine services utilization rate	1.5	1.2	2	1.4	1.1	1	The target was not achieved since It is demand driven
			ALOS for spine patients (days)	83.2	83	83	83	83	83	83

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										spine implants and diagnostic services
			Number of in-patients receiving spinal services	150	85	150	150	150	150	Target was met despite the In-patient wards being under renovation
			Number of Plastic surgeries	24	10	24	28	30	32	Target was surpassed due to availability of specialist
			Number of orthopedic spine surgeries	100	30	100	100	100	100	Target was achieved due to availability of specialist
			Number of out-patients receiving spinal services	1654	1600	1654	0	0	0	Target not achieved since the out-patient building under renovation
			Average waiting time for spine services(days)	210	205	180	150	150	120	Target surpassed due to improved staffing levels
			Proportion of patients re-integrated into community	60	30	80	100	100	110	Target surpassed due to enhanced integration programme
<b>SP 1.2. Health Infrastructure and Equipment</b>	MES Equipment services	Health Infrastructure Management services	Percentage of Public hospitals equipped with MES equipment achieving an uptime of 95%	118	118	118	118	118	118	Target achieved as the MES programme was ongoing in the targeted facilities over the 3 year review period. It is important to note that the programme came to an end as 30 <sup>th</sup> , June 2024.
	Kisii level 5		Percentage of completion of Cancer Center at Kisii Level 5	100	100	100	0	0	20	Target not achieved. due to technical and financial constraints that was experienced by the project implementing team
	East African Centers of excellence for skills & Tertiary		Completion rate on construction works at East African Centers of excellence for skills & Tertiary Education	100	100	100	51	63	98	Target not achieved because of pending final accounts from the contractor

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
	Education									
	Kigumo Hospital		Completion rate of the upgrading works at Kigumo Hospital level 4	60	80	100	52	78	95	Target not achieved external civil works pending
	Piny Awacho level 3 Hospital		Percentage of Completion rate at Piny Awacho level 3 Hospital	N/A	N/A	100	N/A	N/A	95	Target not achieved external civil works pending
	Urenga Level 3 Hospital		Percentage of Completion rate at Urenga Level 3 Hospital	N/A	N/A	100	N/A	N/A	60	Target not achieved due to financial and contractual inefficiencies
	Endebees Level 4 Hospital		Percentage of Completion rate at Endebees Level 4 Hospital	N/A	N/A	100	N/A	N/A	20	Target not achieved due to an initial delay in land acquisitions
	Kibugua level 4 Hospital		Percentage of Completion rate at Kibugua level 4 Hospital	N/A	N/A	100	N/A	N/A	40	Target not achieved due to financial and contractual inefficiencies
	Luusigetti level 4 hospital		Percentage of Completion rate at Luusigetti level 4 hospital	N/A	N/A	100	N/A	N/A	5	Target not achieved due to delay in Procurement process
<b>SP 1.3 Health Products &amp; Technologies</b>	Division of Health Products and Technologies	Health products and technologies (Services)	Percentage completion of development of the National Health Products and Technologies Policy	N/A	N/A	22	N/A	NA	22	Target achieved. Situational analysis was done for Kenya National Pharmaceutical Policy, and partial dissemination was done. Full dissemination to be done in 2024/2025 FY
			Proportion of donations made through the HPT donations portal	N/A	N/A	35	N/A	N/A	0	Target not achieved. Awaiting uploading of products through the portal. Donation policy awaiting validation.
			Proportion of Counties with HPT guidelines disseminated	N/A	N/A	70	N/A	N/A	70	Target achieved. Physical dissemination for Kenya Essential Medical Supplies List to all 47 counties; 50%



Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										for KEML & 50% National Formulary that were partially disseminated. Lack of resources hindered physical dissemination meetings.
			Proportion of functional County Health Products and Technologies Units	N/A	N/A	100	N/A	N/A	100	Target achieved. All counties have HPTUs established.
			Number of staff capacity built on HPT supply chain management	N/A	200	200	N/A	217	240	Target exceeded because the directorate managed to secure additional support from partners to train on management of medical oxygen.
			Percentage of completion on development of Local manufacturing roadmap	N/A	N/A	60	N/A	N/A	100	Target achieved. Road map done. The Division has embarked on the development of National LM Strategy.
			Number of health facilities with oxygen machines delivered and commissioned (PSA Plants and with Liquid oxygen tanks)	N/A	20	10	N/A	15	5	Target not achieved. Achievement of target was affected by the long lead times in the procurement process as well as additional works required for installation.
	Pharmacy Services		Proportion of essential HPT lists Disseminated to counties	N/A	N/A	70	N/A	N/A	40	Target partially done due to Lack of resources hindered physical dissemination meetings.
			Number of functional County Medicines Therapeutics Committees	N/A	4	5	N/A	4	4	Committees in place and functional
			Number of county - led supportive supervision done	N/A	1	1	N/A	1	1	Completed JSS for HPT

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Percentage of health facilities with essential tracer medicines	N/A	N/A	50	N/A	N/A	24	Target not achieved. The availability of tracer HPT is low.
			Percentage of health facilities with essential tracer diagnostics	N/A	N/A	50	N/A	N/A	24	Target not achieved. The availability of tracer HPT is low.
			Percentage of health facilities with essential tracer medical supplies	N/A	N/A	50	N/A	N/A	27	Target not achieved. The availability of tracer HPT is low.
			Percent completion of the Traditional & Alternative Medicine Policy guideline	N/A	60	80	N/A	80	90	Target surpassed due to financial support provided by the Ministry
			Percent completion of the Traditional and alternative medicine Bill	N/A	40	80	N/A	80	90	Target surpassed due to additional support from Partners
	Kenya Medical Supplies Authority	Health Products & technologies Services	Percentage of order fill rate for HPTs	90	90	90	68	66	62	Target not achieved: the average performance achieved on this indicator was due to stock outs of HPTs occasioned by supplier delays due to non-payments. The non-payments are due to the illiquidity of the business currently.
			Order turnaround time(days) PHFs	10	10	10	19.8	16.9	20.2	Target not achieved: KEMSA has embarked on the business reengineering journey with the guidance of KAIZEN institute on improving the Order turnaround time. Key activities have seen improvement of OTT for Hospitals. We expect that with continuous implementation of KAIZEN initiatives the
		Order turnaround time(days) Hospitals	7	7	7	14.7	14.4	16.9		

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										OTT will further reduce.
			Percentage of last mile deliveries made to health facilities	N/A	100	100	N/A	100	98	Target not achieved: At the time of this report they were facility orders still in transit.
			Percentage completion rate (Initial Contract) of National Commodities Storage(supply chain) centre	90	100	90	77	81	85	Target not achieved: Lack of sufficient Funding led to delays in completing the warehouse.
			Percentage of completion of operationalization (Equipping, Warehouse Layout, Automation & Operationalization of the New Warehouse	N/A	46.4	64.27	N/A	0	6	<b>Target not achieved:</b> insufficient funding led to delayed implementation of this project . So far racking of the the warehouse is ongoing.
			Percentage of completion of Kisumu Regional Distribution Centre	N/A	N/A	70	N/A	N/A	100	Target achieved. The project is completed and was commissioned on 6th March 2024
			Percentage of completion of Mombasa Regional Distribution Centre	N/A	N/A	50	N/A	N/A	15	<b>Target not achieved:</b> contracting took place in tge FY 2023/24 but , The construction began in June 2024
<b>SP 1.4 National Blood Transfusion Service, Tissue and Human Organ Transplant</b>	Kenya Tissue Transplant Authority	Blood transfusion services	Number of Whole blood units collected	400,000	400,000	450,000	273,349	412,868	449,689	Target was not met due to dwindling donor support
			Proportion of blood and blood components collected and screened for HIV, HBV,HCV and Syphilis.	100	100	100	100	100	100	Target achieved since all blood and blood components for transfusion must be screened for HIV, HBV, HCV and Syphilis
			Proportion of whole blood units collected and converted to safe blood components for transfusion	60	70	70	65	67	70	Target achieved since it's a requirement that 80% of whole blood should be separated into blood components

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										for appropriate clinical use
			Number of Satellite Blood Transfusion Centres with Capacity to prepare blood components	N/A	N/A	30	N/A	N/A	36	Target was surpassed due to donor support
			Number of transfusing facilities with Hemovigilance surveillance reporting capacity	N/A	N/A	350	N/A	N/A	400	Target was surpassed due to donor support
			Proportion of blood donors notified on their status of Transfusion Transmissible Infections (TTIs) serological results	N/A	N/A	60	N/A	N/A	65	Target surpassed because 100% of blood donors should be notified of their status on Transfusion Transmissible Infections (TTIs) serological results and blood group testing to maintain safe blood donor pools
			Number of Satellite Blood Transfusion Centres and transfusing facilities using the Damu-KE platform for Accountability and Traceability of blood and blood products	N/A	N/A	150	N/A	N/A	200	Target was surpassed. The deployment of Damu-KE BBMS is complete in all Regional and Satellite Blood Banks. Blood is issued to transfusing facilities through the System. Vein 2 coverage through integration with other HMIS and deployment is ongoing
		Human Cells, Tissue and Organ Transplant Services	Percentage of the guidelines and standards completed and disseminated	N/A	N/A	50	N/A	N/A	50	Target achieved since the standards, guidelines (9), frameworks (3) were developed and reviewed in the FY 2023/2024 awaiting

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										validation, printing and dissemination
			Percentage of mapped and registered human cells, Tissue and organ transplant centres	N/A	N/A	100	N/A	N/A	50	Target was not achieved since the policy on blood, cells, tissues, organs and other substances of human origin has not been approved.
	Forensic and Pathology Division	Forensic, Histology and Pathology services	Proportion of Clinical and forensic autopsies performed	30	30	100	100	100	100	Target achieved. All clinical Autopsies requested during this period were done
Proportion of Expert opinions given			100	100	100	100	100	100	100	Target achieved. All expert opinion requested during this period were given
Proportion of exhumations performed for medical forensics			100	100	100	100	100	100	100	Target achieved. All exhumations requested during this period by the courts were executed
Proportion of Criminal related death scenes viewed.			100	100	100	100	100	100	100	Target achieved. All criminal scenes that Retain- were presented to the Directorate of criminal investigations were visited by DCI together with the Forensic pathologists
Percentage of Histo-cytopathology examination for cancer diagnosis carried out			45	45	70	60	60	70	70	Target was surpassed due to increased histo cytopathology examination for cancer diagnosis requested
Proportion of scientific interpretations of pathology results for clinical decisions			45	45	100	100	100	100	100	Target was achieved as a result of pathology results for clinical decisions were conducted .
<b>Programme 2: Curative and RMNCAH</b>										
<b>Programme Outcome: Increased access to quality curative health care services</b>										

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
<b>SP 2.1 Communicable disease control</b>	NACC	HIV Prevention and Management Services	Proportion of new HIV infections among adolescents and young people (10- 24 Years)	N/A	N/A	50%	N/A	N/A	30%	Target surpassed because NSDCC initiated the Triple Threat campaign to catalyze the efforts towards reduction of New HIV infections, SGBV and unintended pregnancies.
			Number of condoms distributed in non-health settings	20,000,000	15,000,000	6,600,000	6,451,258	5,871,526	4,542,355	Target not achieved due to national and global supply chain challenges of essential commodities including condoms.
			Mother to child transmission Rate (MTCT)	N/A	N/A	8.3	N/A	N/A	7.3	Target surpassed The combination of improved service delivery, community engagement, and policy-level interventions has driven the reduction in the MTCT rate, contributing to better health outcomes for mothers and children in Kenya.
			Proportion of counties visualizing real time HIV and Health Dashboards through Situation Room for decision making	N/A	N/A	60	N/A	N/A	100	Target surpassed. The system underwent major enhancements to address concerns that had been raised regarding accessibility and usability to better support decision-making, hence the indicator was not tracked. Initially, the Situation Room platform system operated on a license-based model.

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Proportion of implementing partners reporting on HIV management and prevention interventions	N/A	N/A	65	N/A	N/A	58	The target was not fully achieved as the system was rolled out in June 2024, with 174 out of the expected 300 organizations successfully registering and reporting on interventions conducted.
			Number of adolescents and young people reached with HIV prevention and SRH information through peer-to-peer approach	350,000	1,250,000	10,500,000	723,755	10,479,542	10,600,000	Target surpassed as young people across the country were sensitized on ending the triple threat, Sexual reproductive health and menstrual health, and Ajira digital program as captured within the County AYP Plans increased message reach to adolescents and young people
			Number of men reached with information on HIV prevention and SRH and UHC information	300,000	610,000	900,000	361,176	805,569	1,404,000	Target surpassed due to interventions for Boda Boda riders, fisher folk, community gate keepers dialogue meetings
			Number of people Currently on ART	1,254,840	1,287,890	1,319,871	1,299,152	1,330,565	1,362,515	Target surpassed due to enhance program interventions
			Percentage of newly identified HIV positive and breastfeeding women initiated on highly active antiretroviral therapy	95	88.2	88	93	94	96.3	Target surpassed in the last 2 years due to highly active antiretroviral therapy uptake among HIV+ pregnant & breastfeeding women
<b>SP 2.2 Non-Communicable diseases</b>	National Cancer Control Programme	Cancer Prevention and Control Services	Number of women of reproductive age screened for cervical cancer	400,000	500,000	700,000	670,109	345,576	723,058	Target surpassed due to increased awareness on early

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
prevention and control										cervical cancer screening
		Proportion of those with pre-cancerous lesions or invasive disease receiving treatment	N/A	0	35	N/A	1	27.82	Target has not been achieved due to stigma arising from cancer perception	
		Proportion of health facilities providing cancer screening and early diagnosis services	N/A	N/A	30	N/A	N/A	47.20	Target surpassed due to increased access and facilities having state of the art equipment.	
		Proportion of eligible people screened for colorectal cancer (people aged 45-75 years)	N/A	0	15	N/A	0	1	Target not achieved due to funding gap in colorectal cancer screening .	
		Number of cancer patients receiving radiotherapy services	N/A	N/A	3,160	N/A	N/A	5,580	Target surpassed due to increased cancer centers in the country.	
		Proportion of the essential cancer medicines available at cancer centers	N/A	20	30	N/A	0	0	Target not achieved due to delayed Procurement ongoing at KEMSA.	
		Number of cancer centers established	3	4	5	3	2	0	Target not achieved due to funding gap for the Regional cancer centers in kakamega and meru.	
		National Cancer Institute Kenya	Number of policy briefs generated from cancer data and research	N/A	3	2	N/A	0	3	Target not achieved in the 2nd year due to insufficient budgetary allocations
		Number of people reached with cancer Prevention & Control messages in (Millions)	8	15	30	12	19	45	Target surpassed. Conceptualised cancer messages were aired on ten local FM radio stations, including and not limited to, Gulf Radio FM, Mutongoi FM, Radio Isikuti FM, Bulala FM, Mo Radio, Osotua, Getembe, Kass FM, North Rift FM and NTV	



Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										Customised IEC materials to local dialect Enhanced publicity through website and Social Media platforms
			Proportion of counties with county specific cancer control frameworks	N/A	10	55	N/A	10	64	Target surpassed due to additional financial support. Cumulatively, 30 Counties have been engaged and supported to develop county specific cancer action plans within their workplans
			Number of MDAs trained to implement workplace cancer prevention and control programs	9	22	44	12	22	47	Target surpassed due to increased sensitization fora. Sensitization done to all County Health Directors, Chief Officers of Health and representatives from County Health Management Team of all the 47 Counties
			Number of cancer treatment facilities that have met the minimum standards of care	N/A	5	6	N/A	5	3	Target not achieved due to budgetary constraints. Inspection and certification process ongoing.
			Number of Cancer Care Centers certified	N/A	30	80	N/A	78	80	Target surpassed in FY 2022/23 as a result of increased number of cancer centres established and reinspection of established cancer centres
			Number of Cancer Diagnostic Centers certified	N/A	N/A	30	N/A	N/A	30	Target achieved. 30 cancer centres were certified in the period under review.

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Number of cancer registry hubs established	17	8	10	21	8	5	Target surpassed in FY 2021/22 due to enhanced cancer surveillance and establishment of special cancer registries ie Hospital Based Cancer Registries and Childhood Cancer Registries. However not achieved in FY 2023/24 due to budgetary constraints.
			Number of Officers recruited	N/A	32	75	N/A	0	29	Target not achieved due to inadequate budgetary allocation
Division of Mental Health	Management of mental health services		Number of counties supported to develop mental health action plans	N/A	2	4	N/A	2	1	Target not achieved in FY 2023/24 due to austerity measures.
			Number of counties supported to develop mental health promotion and prevention programme.	N/A	2	8	N/A	2	9	Target achieved due to donor support.
			Number of mental health units inspected against WHO Quality Rights standards	N/A	1	8	N/A	0	3	Target not achieved due to delay in processing funds
Kenya Board of Mental Health										
Non-Communicable Diseases (NCD) Prevention and Control Unit	Diabetes and hypertension curative services		Number of diabetes patients receiving treatment	150,000	226,310	250,000	142,223	179,028	220,036	Target not achieved due to low awareness and poor reporting
			Number of hypertensive patients receiving treatment	250000	1,100,000	350,000	240000	513805	411627	Target was surpassed in FY 2023/24. However the previous years showed failure to achieve the target due to lack of technical and financial resource
Violence and Injuries Prevention	Trauma Prevention and control services		Percentage completion of Trauma registry	N/A	100	75	N/A	0	75	Target not achieved for FY 2022/23 due lack of adequate

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
	and Control Division									resources to support programme activities
	Geriatrics Medicine	Geriatrics services	Proportion of counties with HCPs trained on integrated care of older persons.	N/A	5	10	N/A	0	4	Target not met due to lack of resources to support the programme.
			Percentage completion of Parkinson's Disease registry	N/A	50	75	N/A	0	0	Target not achieved due lack of adequate resources to support programme activities
<b>SP 2.3 Reproductive Maternal Neonatal Child and Adolescent Health</b>	Department of Family Health	Family Planning Services	Proportion of Women of reproductive age receiving FP commodities	50	55	53	52.4	74	53	Target achieved. The program has been receiving donor support in commodity security.
		Maternal Neonatal and Child Health Services	Proportion of pregnant women attending at least 4 ANC visits	57	57	65	52.8	51.9	55.2	Target not achieved due to reduced focus on 4 visits tracking and capture
			Proportion of women receiving post-natal care within 2-3 days of delivery	50	50	58	12	37.9	64.5	Target achieved in FY 2023/24. There has been sensitization on the importance of tracking PNC within 48hours instead of 2 to 3 days which was not in line with the summary tool.
			Proportion of mothers delivered by Skilled Birth Attendant	N/A	80	88	N/A	76	75.2	Target not achieved. There has been continued turnover of reproductive health coordinators due to change in county leadership in several counties they are a key focal point for RH
			Facility based maternal mortality rate per 100,000 deliveries	103	100	97	110.3	86	96.6	Target achieved due to improved maternal child and neonatal services..
			Facility based neonatal deaths per 1000 live births	23	11	8	9.3	10	9.5	Target not met due despite scaling-up of high interventions,

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										supplies and equipment's, dissemination of quality of care standards & data review meetings
			Under five mortality rate per 1,000 live births	N/A	52	40	N/A	41	42	Target achieved due to improved maternal child and neonatal services..
			Proportion of children under age 5 developmental milestones on track in health, learning, and psychosocial wellbeing.	N/A	70	82	N/A	78	79	Target achieved due to improved maternal child and neonatal services..
			Number of Pre-school and school going children de-wormed in Millions	6	6	6	5.4	4.5	6.4	Target achieved in FY 2023/24 due to administration of deworming medicine
<b>SP 2.4 Immunization Management</b>	Division of National Vaccines and Immunization program	Vaccines and Immunization Services	Proportion of fully immunized children under 1year (Proxy Penta 3)	84	86	89	88	84.7	84	Target for FY 2022/23 and 2023/24 not achieved due to Shortage of vaccines
			Proportion of Health Facilities with Functional Cold Chain Equipment	92	94	90	88	85	92	Target achieved in FY 2023/24 due to additional cold chain equipment procured through partners
<b>SP 2.5 Curative Services</b>	Orthopedics and Trauma Unit	Orthopedic services	Percentage of completion of Orthopedics & Trauma bill	40	40	60	10	10	20	Target not achieved due to lack of resources.
	Clinical Division	Clinical Services	guideline for operationalization of Wellness Centre developed	1	1	1	0	0	0	Target not achieved due to financial constraints.
			Number of Health and wellness clients screened at the MoH health and wellness center	N/A	N/A	400	400	400	0	Target not achieved due to lack of staffing at the MoH clinic.

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
	Radiology & Medical Diagnostic Division	Radiology & Medical Diagnostic Services	Percentage of implementation of the Radiographers Act	30	30	60	0	0	75	Target not achieved since gazettelement of the Board members by the CS has been delayed.
			Service Access Index	N/A	N/A	88	N/A	N/A	88	Target achieved and Financial mobilization ongoing
	Rehabilitative Division	Rehabilitative services	Proportion of counties supported to implement Disability Medical Categorization	10	10	20	0	0	10	Target not met due to lack of resources 10 Counties trained 2023/24
			Number of Assistive Technology (AT) policies developed	2	2	1	1	1	0	Target not achieved. However, a draft policy for AT is in place and external validation ongoing
	Oral health Division	Dental amalgam phase down	National plan developed for amalgam phase down	1	1	1	1	1	1	Target was met and a National Plan for amalgam phase down is in place.
			Number of amalgam phase down tools developed	4	4	4	0	0	0	TWG is working to develop tools
	Nursing Division	Critical care services	Number of nurses sponsored for critical care services training	200	200	250	150	150	150	150 nurses enrolled nursing specialty courses but under self-sponsorship model
			Draft Nurses act CAP 257 presentation to parliament health committee	1	1	1	0	0	0	Draft presented but returned for further consultations
	Ophthalmic Division	Eye care services	Number of New Diabetic eye care centers established in 10 facilities	3	3	6	1	1	2	Target not achieved due to lack of funds
			Number of Centers offering Refractive Low Vision Services	5	5	10	5	5	0	Target achieved in the First 2 years due to support from the eye care partners under review but the final year it failed to achieve the target due

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks	
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24		
										to inadequate Budgetary allocations	
			Number of eye Health Facilities Rehabilitated	2	2	4	2	2	0	Target not met in FY 2023/24 due to inadequate Budgetary allocations	
<b>Programme 3: Health Research and Innovations</b>											
<b>Programme Outcome: Increased Health Research and Innovations</b>											
<b>SP:3.1 Health Innovations</b>	Digital Health	National health registries established	Total number of national health registries		N/A	0	6	N/A	0	The function was transferred to Digital Agency	
		National data center resource utilized	Percentage of HMIS utilizing data center resources		N/A	0	10	N/A	0		
		National Health Information Exchange established	Proportion of health systems with capacity for health information exchange		N/A	0	30	N/A	0		
		Comprehensive Integrated Health Information Management System established	Proportion of public health facilities with an integrated health information system		N/A	0	30	N/A	0		
	Kenya Biovax Institute	Human vaccine and research services	Percentage completion rate of human vaccine fill-and-finish facility		N/A	50	50	N/A	16.5	14	Target not achieved due to protracted procurement delays in technical staff recruitment and onboarding due to limited skill sets
			Percentage completion rate of Research & Development centre		N/A	N/A	5	N/A	N/A	2	Progress impacted by limited resources( Human and financial) to accelerate the progress
			Number of technology transfers agreements		N/A	1	1	N/A	0	1	BioVax has signed MoUs with BioFarma

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										Indonesia, Hayat Biotech UAE and SK Bioscience South Korea. Further, one Technology Transfer Agreement processing is ongoing
			Number of personnel trained in administrative and specialized HPTs manufacturing	N/A	20	30	N/A	20	11	2 staff trained in technical functions and nine staff trained in administrative functions. Limitations on the number of staff available for training
			Number of staff recruited	N/A	23	30	N/A	1	18	Target not achieved. Staff on boarding began in June 2024. 7 positions did not attract suitable candidates and 8 positions - shortlisting conducted, pending a waiver to proceed with recruitment
			Percentage completion rate of quality management systems established	N/A	5	60	N/A	2.5	0	Target not achieved due to limited staff to establish the QMS. Ongoing engagements with QMS specialists has began
			Number of partnerships and collaborations	N/A	4	3	N/A	1	4	The Institute signed MoUs with 2 research organisations, KEMRI and KIPRE to support vaccines and biotherapeutics R&D and MoUs with three global vaccine manufacturers
<b>SP 3.2 Medical Research</b>	Kenya Medical Research Institute	Health Research and Innovation services	Number of New research protocols approved	224	178	196	162	246	174	The reduction in the FY 2021/22 and 2023/24 is due to the reduced research funding from exchequer that has

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										impacted the research development output.
			Number of ongoing Research Projects	520	522	550	522	514	534	Target not met for FY 2022/23 and 2023/24 due to reduced exchequer funding that has impacted the research development output. This is the cumulative number of ongoing multi-year projects including the new ones formulated within the reporting period
			Number of research Papers published	350	475	524	432	533	431	Target not met in FY 2023/24 due to reduced funding for research impacting research synthesis and publications
			Number of research Abstracts presented	166	191	212	174	227	272	Target surpassed. The positive increase is due to the successful KASH conference and East Africa Scientific conferences which are local and regional platforms for scientists to present their findings
			Number of Scientific & Health Conferences held	2	4	3	3	2	3	Target met in FY2021/22 and 2023/24. This is because the institute supported the 2nd Health and Scientific Climate Change Conference, EAHSC 9th East Africa Health Science Conference, and the 14th (KASH) KEMRI Annual Scientific and Health



Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Number of Evidence briefs developed	14	18	17	18	24	8	Target not met for FY2023/24. The reduction in number of evidence briefs is due to reduced COVID-19 impact and need for response.
			Number of Students enrolled MSc & PhDs	60	88	105	88	90	117	Target surpassed. The positive variance is due to the increased visibility and scope of courses offered as we drive towards the attainment of a full charter
			Number of Diagnostic kits produced	768,471	293,000	180,484	499,433	169,213	204,923	Target not met for FY2021/22 and 2022/23. The positive variance in FY2023/24 is attributed to increased product ranges and commercialization of the same. The products include diagnostic kits that aim to improve quality of diagnosis and support service delivery within the health sector.
			Number of Specialized laboratory tests conducted	1,625,582	563,242	650,001	634,685	1,081,169	843,552	Target achieved for FY2022/23 and 2023/24. Despite reduced funding and personnel capacity as many have retired without replacement.
			Number of partnerships and collaborations	90	89	86	90	89	86	The reduction in number of partnerships over the period is due to lapse of some agreements on completed projects

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Completion rate	100	100	100	55	72	40	Target not achieved. The low completion rate was due to delays in disbursement of exchequer funding, that facilitates completion of projects..
<b>Programme 4:General Administration, Planning and Support Services</b>										
<b>Programme Outcome: Strengthen Governance and Leadership in the State Department</b>										
<b>4.1 General Administration</b>	General Administration Department	Administrative services	Number of workplace policies developed and implemented	N/A	5	5	N/A	5	5	Target achieved. Five Policies developed and finalize in previous quarters
			Proportion of complaints addressed within 21 days from lodge	N/A	N/A	100	N/A	N/A	100	Target achieved. Complaints lodged to institution were addressed within the 21 days
			Client satisfaction index	N/A	N/A	80	N/A	N/A	10	Survey on client satisfaction on family planning services was administered to sampled health facilities in the counties when assessing the quality of care.
			Guideline for donations management developed and implemented	N/A	1	1	N/A	1	1	Target achieved. Donations guideline developed
	ICT Department	ICT Services	Ratio of staff to functional computers/laptops	N/A	3:01		N/A	3:01	1.01	Target achieved. The Ministry staff have either a computer/ laptop
			Proportion of institutions with functional LAN and WAN	N/A	N/A	50	N/A	N/A	1.01	The Ministry in collaboration with MOICT continues to ensure all the institution have functional LAN and WAN in all areas.

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
	Human Resource Management & Development division	Human Resource Services	Number of health care workers recruited	1119	0	146	0	0	0	Target not achieved. Recruitment of health care workers is awaiting PSC Approval
			Percentage of in-post employees trained	6	15	26	10	0	0	Target not achieved. Austerity measures on training budget affected implementation.
			Percentage of state corporations Organization structures reviewed.	N/A	15	15	N/A	37	26	The ministry structure is out awaiting implementation
			Proportion of Kenya Health Sector Caucus recommendations implemented	N/A	N/A	100	N/A	N/A	N/A	Target not achieved due to inadequate funds which hampered the implementation of recommendations.
			Proportion of Regional and International health governance forums Resolution implemented	N/A	N/A	100	N/A	N/A	100	Target achieved. The Ministry attended the regional and international forums.
			Number of publications on Medically Certified Cause of Death (MCCoD) statistics	N/A	N/A	2	N/A	N/A	2	Target achieved due to donor support in the development of the publications
			Publish annual health statistics	N/A	N/A	1	N/A	N/A	1	Target achieved. Annual Health Statistics done yet to be published.
<b>SP4.2: Financing, planning, Monitoring and Evaluation</b>	Finance division	Finance services	Percentage of allocated funds utilized as per plan	100	100	100	89	96	95	Absorption of the budget was up to 95%
			Number of quarterly budget reports submitted	4	4	4	4	4	4	Target achieved. All reports were submitted to controller of Budget
			Total AIA collected (KSH.B)	10.8	16	18	14.8	17.3	0.048	AIA collected amounted to KES. 48 Million
	Central Planning & Projects Monitoring Unit	Planning and support services	Number of policy briefs prepared	4	4	10	9	1	5	In the 2022/23 FY a total of 5 policy briefs were developed. This cumulatively gave an achievement of 15

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										policy briefs against a target of 18 in the review period
			Number of capital projects monitored for progress	NA	2	4	NA	0	0	Target not achieved due to financial constraints there was no capital project monitored despite a detailed monitoring plan in place
			Number of Counties trained on planning, budgeting and M & E	NA	47	47	NA	0	30	Target was not achieved due to lack of resources. With the Support of Global fund RSSH Programme, 3 officers each from 30 counties were trained on programme based budgeting course that was held in collaboration with Kenya School of government. The remaining 17 counties is targeted for the next financial period
			Number of SAGAs and regulatory bodies sensitized on planning, budgeting and M & E	NA	N/A	15	NA	N/A	0	Target was not achieved due to financial constraints, this activity was not undertaken but is planned to be undertaken in the subsequent year.
<b>SP4.3 Social Protection in Health</b>	Division of Health-Care Financing	Resource Mobilization services	Number of Counties sensitized on FIF guideline.	47	47	24	47	23	23	Target for the FY 2022/23 and 2023/24 was not met due to austerity measures however, the remaining counties have a copy of FIF
			Number of health care providers trained in strategic purchasing for health care services	100	100	100	0	0	0	Target not achieved due to inadequate resources for capacity building

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Proportion of Costing of Healthcare services done for Levels 1 - 6	N/A	N/A	50	N/A	N/A	50	Target achieved. Costing was done for PHC level facilities. From level 4 to 6 to be completed in quarter in the next financial year
			Kenya Household and Health Expenditure and Utilization Survey conducted	N/A	1	1	N/A	1	0	Target not achieved. KHHEUS was not conducted due to inadequate resources.
			The Essential Benefit Package reviewed and operationalized	N/A	1	1	N/A	1	1	Target achieved. EBP was reviewed during the period.
			Social Health Insurance Fund operationalized	N/A	1	1	N/A	1	1	Target achieved. SHIF has been operationalized
			National FIF Bill and regulations developed enacted and disseminated	N/A	1	1	N/A	1	1	Target achieved. FIF Bill is in place
	NHIF	Increased access to healthcare	Number of indigents accessing government health insurance subsidies in Millions	1	1.5	1.5	1	1	1	Target not achieved due to underfunding by GoK
			Number of indigents accessing healthcare through HISP	253,400	253,400	253,400	253,400	253,400	253,400	Targets achieved due to payment of premiums for the indigents
			Households of elderly & Persons with severe disabilities covered	58,800	58,800	58,800	58,800	58,800	58,800	Targets achieved due to payment of premiums for the indigents
			Number of elderly persons accessing Inua Jamii Subsidy program	484,086	484,086	484,086	0	0	0	Target not achieved. NHIF has registered 484,086 members but their premiums were not received from the exchequer hence the population was not covered

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
<b>Programme 1: Preventive and Promotive Health Services</b>										
<b>Programme Outcome: Reduced disease burden due to preventable causes</b>										
<b>SP 1.1 Communicable disease control</b>	National TB, Leprosy and Lung Disease Control Programme	TB, Leprosy and lung health control services	Number of TB cases notified (All forms)	100,617	99,226	99,878	82,517	82,302	97,126	Targets were not achieved due erratic supply of diagnostic commodities
			Number of MDR-TB cases notified	N/A	800	1,085	N/A	924	706	There was overachievement in 2022/23 FY due to support from development partners, while the underachievement in 2023/24 FY was due to erratic supply of diagnostic commodities affecting the surveillance
			Proportion of successfully treated TB cases (all forms of TB)	90	90	88	84	85	89	There is a steady improvement though yet still falling short of the targets, due to lost follow ups and deaths before completing treatment
			Proportion of Multi drug resistant TB successfully treated	N/A	70	81.5	N/A	79	78	During 2022/23 FY there was support from development partners although concomitant malnutrition in

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										TB patients and delayed diagnosis contributed to adverse treatment outcomes in 2023/24 FY
			Number of people in contact with TB patients who began preventive therapy treatment	N/A	31,747	75,184	N/A	29,635	167,776	During 2022/23 FY there was disruption due to Covid 19 measures but in 2023/24 FY there was scale up of preventative therapy treatment to all 47 counties, expanded population to include under 5 year olds, health care workers and prisoners.
	National Malaria Programme	Malaria promotive, preventive and curative services	Number of Artemisinin Combination Therapy (ACTs) doses distributed to public health facilities (millions)	7.0	6.3	6.9	5.0	6.5	5.7	The stock levels for key malaria commodities were greatly affected by delayed delivery of consignments. Low antimalarial stocks experienced in the period negatively affected the distribution of ACTs to public health facilities. There was stockout for MRDTs hence an increase in

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										presumptive treatment which utilized more of the ACTs in 2022/2023.
			Malaria incidence per thousand population	N/A	80	82	N/A	105	88.5	The increase in malaria incidences in 2022/23 FY and 2023/24 FY was attributable to the reduced efficacy and increased attrition of the LLINs distributed, there was also reported insecticide resistance to pyrethroid deployed in the standard ITNs.
			Proportion of Confirmed Malaria Cases treated (%)	100	100	100	97	99	99	Availability of diagnosis equipment and treatment, Artemisinin Combination Therapy (ACTs) enabled the achievements
			Proportion of suspected cases tested (microscopy or Rapid Diagnosis kit)	100	100	100	88	89	87.1	Low RDT and antimalarial stocks recorded affected delivery of malaria services.
			Proportion of Confirmed Malaria Cases treated	100	100	100	97	95	89	Low RDT and antimalarial stocks recorded in the months of Oct 2023 to Jan 2024 affecting



Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										delivery of malaria services
			Number of Routine Long Lasting Insecticidal Nets distributed (millions)	2.2	2.3	2.2	1.48	1.8	1.7	There was reduced stocks in the routine ANC/CWC channels which resulted in reduction of the number of nets distributed to MCH clients
<b>SP 1.2 Disease Surveillance and Epidemic Response</b>	Division of Disease Surveillance and Response	Disease Surveillance and Response Services	Non Polio Acute Flaccid Paralysis Detection rate (NPAFP) per 100,000	2.5	2.5	3	2.5	2.8	3.47	Target surpassed due to routine active case search at facility and community levels. Polio SIAs that are an opportunity for active case search as teams reach hard to reach areas that routine surveillance does not.
			Number of counties with functional Community Events Based Surveillance (CEBS)	4	6	8	4	6	8	Targets achieved
			Number of hospitals with Functional Events Based Reporting System	N/A	62	20	N/A	84	463	The targets were over achieved due to low cost of rollout within the 8 trained counties is as they were being done through Continuous Medical Education
	Division of Health		Number of counties with functional command and	N/A	1	1	N/A	0	0	No budgetary allocation

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
	Emergencies and Disaster Management		control centres linked to ambulance dispatch							
			Number of centres for management of CBRN Incidents established	N/A	15	15	N/A	0	0	
	Public Health Emergency Operations Centre	Public Health Emergency services	Number of County PHEOC staffs trained on Rapid Response	N/A	50	100	N/A	100	123	The PHEOC conducted rapid response training for PHEOC staff in all the counties. PHEOC managers were also trained on Public Health Emergency Management. The target was surpassed due to additional resources from development partners
			Number of Counties with Functional PHEOCs	17	18	23	17	18	24	The target was surpassed in 2023/24 FY due to additional resources from development partners
			Proportion of Public Health Emergencies responded to.	100	100	100	100	100	100	Targets achieved
	Field Epidemiology & Laboratory Training Program (FELTP)	Health Care training services	Number of Health care trained on FELTP	20	20	20	20	20	20	Targets achieved
	Division of Vector Borne & Neglected Tropical Diseases	Vector Borne & Neglected Tropical Diseases Treatment Services	Number of people treated for trachoma (Millions)	N/A	1.4	1.2	N/A	2.4	1.8	A total of 1.8 million people were treated (1.2 Million people treated for lymphatic filariasis and

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										559,000 for trachoma). The trachoma treatment was scaled down the targeted amount after a number of endemic sub counties passed impact surveillance and were dropped from the treatment.
			Number of people treated for Bilharzia. (Millions)	N/A	3.5	6	N/A	6	1.9	There was donation by WHO in 2022/23 FY which led to the overachievement . However, the available donation only reached 1.9 million people in 2023/24 FY following WHO temporal withdrawal of donation due to uncoordinated deworming within the Ministry.
			Number of people treated for intestinal worms. (Millions)	N/A	7	12	N/A	12	5.1	There was donation by WHO in 2022/23 FY which led to the overachievement . However, the available donation only reached 5.1 million people following WHO temporal

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										withdrawal of donation due to uncoordinated deworming within the Ministry.
	Division of Zoonotic Diseases	Zoonotic Diseases Surveillance Services	Number of people diagnosed with Rabies	N/A	10	5	N/A	5	2	The target was under achieved due low diagnosis cases reported
			Number of counties supported to investigate and respond to priority zoonotic diseases	N/A	4	7	3	12	5	Counties supported to investigate and respond to zoonotic outbreaks depend on the occurrence of the outbreaks.
	Division of National Laboratory Services	National Laboratory Services	Number of medical laboratories with capacity to detect and report on Antimicrobial Resistance	10	21	20	6	17	22	Target not achieved in 2021/22 and 2022/23 FYs due to insufficient funding. Targets exceeded due to extra support technical from ASLM, CDC and Global fund in 2023/24 FY
			Number of accredited laboratories in the ASAL categorized cohort	2	2	4	3	3	4	Targets achieved and exceeded due to extra support technical from ASLM, CDC and Global fund
			Number of certified laboratories in the Laboratory Continuous Quality Improvement (LCQI) program	12	12	30	12	28	31	
			Number of External Quality Assurance (EQA) scopes in the Kenya National External Quality Assurance Scheme (KNEQAS)	2	2	10	4	3	11	Targets achieved and exceeded due to extra support technical

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										from ASLM, CDC and Global fund
			Number of facilities with molecular testing platforms linked to a functional incinerator for healthcare waste management referral	N/A	N/A	65	N/A	N/A	0	No budgetary allocation
<b>SP 1.3: Public Health Services</b>	Environmental Health	Sanitation and hygiene services	Proportion of Villages certified as open defecation free	N/A	31	37	N/A	30	6	Not achieved as a result of some counties not reporting using the current CLTS RTMIS and lack of adequate funding to support some counties in sanitation and hygiene intervention
			Proportion of population accessing safely managed sanitation facilities	N/A	25	30	N/A	30	29.93	Target surpassed in 2022/23 FY due to support form development partners, while the underachievement in 2023/24FY was due to insufficient funds
		Waste management and climate change mitigation	Number of health facilities with installed and compliant waste treatment equipment	N/A	11	11	N/A	11	10	Equipment installed in all facilities however Nyeri County Hospital is not operational due to delay in installing a dedicated power supply line
		Number of health facilities reporting on greenhouse gas emissions	N/A	N/A	16	N/A	N/A	0	The reporting tool was developed.	

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										However the health workers require capacity building on the utilization of the tool and subsequent reporting.
		Occupational Health and Safety standards	Number of healthcare facilities implementing occupational health and safety standards	N/A	15	5	N/A	5	5	Target not achieved in 2022/23 FY due to insufficient funds.
			Number of the healthcare workers exposed to workplace occupational health hazards	N/A	5	5	N/A	0	0	Targets not achieved since the facilities implementing occupational safety and health standards lack a well-defined reporting system to report incidences of exposure to occupational health hazards
			Center of excellence for monitoring air pollution fully established and operationalized	N/A	20	60	N/A	20	100	The centre of excellence for monitoring air pollution level of operation was established due to support from development partners
			MoH HAP control Strategy developed and launched	N/A	N/A	20	N/A	N/A	100	The MoH HAP control strategy was developed with support from GIZ and is awaiting to be launched

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
		Vector and vermin infestations control services	Number of POEs capacity build to undertake vector and vermin control services	N/A	10	8	N/A	8	2	Targets were not achieved due to insufficient funds
	Tobacco Control Board	Tobacco control and enforcement services	Number of Enforcement officers trained	N/A	400	400	N/A	200	0	The planned capacity building did not take place due to no budgetary allocation
			Number of Tobacco Control advisories developed and submitted to the Cabinet Secretary	N/A	5	4	N/A	2	3	Targets not achieved due to austerity measures
	Division of Family Wellness, Nutrition and Dietetics	Malnutrition prevention & Nutrition promotion services	Proportion of children 6-59 months who received 2 doses of Vitamin A Supplementation (VAS)	N/A	80	80	N/A	86	85	Targets were surpassed as a result of accelerated coverage during malazi bora campaign done bi-annually
			Number of children 6-23 months receiving Micronutrient Powders (MNPS)	N/A	N/A	218,977	N/A	N/A	254,115	Target surpassed due to introduction of a retail model in Nairobi where MNPs could be accessed from local kiosks. There was support from Development Partners in Kilifi County
			Number of healthcare workers trained on high impact nutrition interventions	N/A	7323	6800	N/A	7141	3,570	Target not realized due to inadequate budgetary allocation for capacity building.
			Treatment cure rate of acutely malnourished children 6-59 months	N/A	80	83	N/A	83	83	Target Cure rate is set at >75% based on

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										international Sphere standards. Target surpassed due to improved emergency preparedness and response, availability of commodities for IMAM, continued capacity development for health care provided and increased outreach. Severe Acute Malnutrition 83.3% Moderate Acute Malnutrition 82.2%.
			Treatment cure rate of acutely malnourished pregnant and lactating women	N/A	100	90	N/A	86	85.8	Targets not achieved due to reduced donor support for coverage of 15 to 10 counties
			Number of guidelines, Strategic Plans and legislations developed	N/A	5	7	N/A	3	4	Targets not achieved due inadequate budgetary allocation
	Kenya National Public Health Institute	Operational Kenya National Public Health Institute	Human Resource Instruments Developed	N/A	N/A	100	N/A	N/A	100	Human Resource Instruments, which include a comprehensive organizational structure, career guidelines, and a staff establishment framework successfully



Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										completed and submitted to the board.
			Strategic plan developed	N/A	N/A	100	N/A	N/A	20	Only 20% of the process was completed due to the shift of focus to responding to the MAM and El Niño rains, compounded by the late deployment of technical officers in the second quarter of FY 2023/24.
	Division of Port Health	Port Health Services	Number of travellers screened for notifiable diseases	N/A	7,361,622	6,000,000	N/A	5,694,927	5,877,048	Targets not achieved due to relaxing of the screening guidelines following reduction in COVID-19 pandemic.
			Number of travellers issued with vaccination certificates as per travel requirements	N/A	249,600	30,000	N/A	23,440	110,365	Target not achieved in 2022/23 FY since only one antigen (Yellow fever) was reported. During 2023/34 FY additional antigens (IPV, TT and hepatitis) were independently reported hence the overachievement
			Number of tonnes of cargo cleared as per health requirements at POEs	N/A	1,460,000	2,500,000	N/A	2,214,892	6,960,420	Targets surpassed since the POEs enhanced their

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										reporting system based on the reviewed reporting tool
			Number of conveyances inspected and issued with disinfection/disinfection certificates	N/A	265,000	500,000	N/A	423, 989	57, 329	Target surpassed in 2022/23 FY as a result of mandatory inspection and disinfection due to Covid 19. However, with the relaxing of Covid 19 containment measures, not all vessels were inspected and disinfected leading to the underachievement in 2023/24 FY.
			Number of POEs implementing digitized services	N/A	N/A	26	N/A	N/A	32	7 POEs that had been clustered together were separated during digitization, yielding additional 6 hence the coverage of 32 from the initial
			Number of food handlers medically examined at the POEs	N/A	N/A	4000	N/A	N/A	8091	The overachievement is attributed to revision of reporting tool under food safety and more POEs reporting promptly.
<b>SP 1.4- Radiation Safety and</b>	Kenya Nuclear Regulatory Authority-	Nuclear and Radiation Safety,	Number of draft nuclear power programme regulations developed	N/A	N/A	3	N/A	N/A	3	Target achieved.

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
Nuclear Security		and Security services	Number of nuclear security regulations developed	N/A	N/A	2	N/A	N/A	2	Target achieved.
			Cumulative percentage of enforcement officers qualified and able to respond to nuclear security events	10	20	30	10	10	30	Target for 2022/23 FY was not achieved due to lack of training.
			Cumulative percentage of nuclear safety and security detection at ports of entry	10	20	30	10	20	20	Target not achieved during 2023/24 FY due to inadequate staff at the points of entry
			Proportion of category I and II radiation facilities complying with physical protection measures	100	100	100	100	100	100	Target achieved.
			Number of draft regulations on radiation devices and sources	N/A	9	9	N/A	9	12	The target for 2023/24 FY was surpassed due to collaboration between MOH legal team and Office of the Attorney general
			Percentage of radiation contamination tests performed on consumer products	N/A	50	50	N/A	50	50	Target achieved
			Percentage of compliant radiation facilities	80	70	80	50	70	80	Target not achieved during 2021/22 FY due to insufficient funds for inspections
			Percentage of development and implementation of the national radiation workers database	N/A	20	50	N/A	20	30	Target not achieved during 2023/24 FY due to insufficient funds
			Proportion of environmental radiological mapping and characterization of High	N/A	N/A	20	20	N/A	10	Target not achieved during 2023/24 FY due

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Background Radiation Areas							to insufficient funds
			Number of persons who have completed the International Atomic Energy Agency postgraduate educational certificate in radiation protection	N/A	N/A	25	N/A	N/A	25	Target achieved
			Percentage of radioactive waste collected and conditioned at the central radioactive waste processing facility	30	30	30	20	30	20	Target not achieved during 2023/24 and 2021/22 FYs due to inadequate budgetary allocation
<b>SP 1.5 Primary Health Care</b>	Primary Health Services Division	Primary Care Networks	Number of hospitals mapped as hubs for the PHC Networks	N/A	100	47	N/A	2	191	Targets were not achieved in 2022/23 FY due to insufficient funding. During 2023/24 FY targets were surpassed since there was more support from Government (both National and County) and development partners
			Number of functional primary care networks (PCNs)	N/A	47	150	N/A	19	191	
		Community Health Services	Number of CHPs paid	N/A	N/A	100,000	N/A	N/A	94,390	

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
<b>SP 1.6 Health Promotion and Education</b>	Division of Health Promotion and Advocacy	Health Promotion and Advocacy Services	Number of health promotion and advocacy policies/strategies and guidelines developed	N/A	N/A	3	N/A	N/A	3	Target achieved
	Division of Information, Education and Communication (IEC)		Percentage of health promotion call centers operationalization	N/A	N/A	40	N/A	N/A	40	Target achieved
			Percentage of WhatsApp Chatbot operationalization	N/A	N/A	40	N/A	N/A	80	Out of 20 health topics, so far we have 16 topics configured in the chatbot
<b>Programme 2: Health resource development and innovation</b>										
<b>Programme Outcome: Enhanced health human resources for quality healthcare</b>										
<b>SP 2.1 Capacity Building and Training</b>	Kenya Medical Training College	Capacity Development and Training services	Number of students enrolled	16,800	18,250	17,200	21,700	25,889	27,426	Targets were surpassed over the 3 year period due to infrastructure upgrade in existing campuses and opening of new campuses that increased training capacity.
			Number of CHAS trained	600	1,000	700	700	3,519	3,934	The program was introduced in more campuses over the years hence increasing uptake
			Proportion of health professionals(cohort) certified	97	98	99	96	95	98	The target over the years could not be achieved due to discontinuation, suspension and natural attrition.
			No. of evidence based policies developed	8	9	10	8	8	8	The target could not be achieved due to inadequate

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										budgetary allocation.
<b>SP 2.2 Research and innovation on Health</b>	Kenya Institute of Primate Research	Biomedical Research and innovation Services	No. of peer reviewed scientific publications	N/A	N/A	34	N/A	N/A	46	Target exceeded due to increased research effort on infectious diseases
			No. of people trained on biomedical knowledge and skills	N/A	25	52	N/A	52	99	Target exceeded due to efforts to increase research in human resource for health
			No. of candidate drugs and vaccines tested	N/A	6	6	N/A	6	11	Target exceeded in 2023/24 FY due to additional drug target on leishmania in addition to malaria and snakebite antivenom
			No. of community outreach education forums conducted on ecosystem health & primate conservation	N/A	2	5	N/A	5	5	Target was exceeded in 2022/23 FY due to inclusion of Samburu, Tana-River, Laikipia on community ecosystem health outreach programs
			No. of colony bred non-human primates	N/A	25	40	N/A	46	40	Target surpassed due to donor support for the programme
			No. of humans samples at wildlife, livestock interface tested	N/A	N/A	300	N/A	N/A	1,296	Target exceeded due to increased efforts to survey emerging infectious diseases driven by scare of emerging and re-

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										emerging infections
			No. of vector-borne samples at high-risk interface tested	N/A	N/A	1500	N/A	N/A	812	Target not achieved in 2023/24 FY on vector-borne sample testing due to delayed sample testing
		Snakebite rescue & intervention services	No. of victims successfully rescued from snake bites	N/A	120	265	N/A	265	288	Target exceeded in 2023/24 FY due to increased snakebite incidences, increased community awareness on importance of reporting and seeking medical treatment
			No. of anti-venom generated for preclinical testing	N/A	N/A	2	N/A	N/A	2	Target achieved
<b>SP 2.3 Health Professional services</b>	Public Health Sector Coordination & IGR	International Health Relations Services	Number of MOUs developed	3	3	3	3	3	2	Only two MoUs were signed (Kenya-UK and Kenya-India). The others were still undergoing the negotiation process
			Guidelines to operationalize MOUs	1	1	3	1	1	1	Only guidelines for Kenya -UK Nurses were developed. Guidelines to operationalize other MOUs not developed due to insufficient funding

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Number of treaties ratified and domesticated	1	1	1	1	1	1	Target achieved. WHO Pandemic Treaty ratified
		Intergovernmental Health Coordination Services	Number of meetings coordinated	10	10	11	10	10	9	Target not achieved due to insufficient budget allocation
			Number of health sector intergovernmental forums held	4	4	4	2	2	2	Target not achieved due to insufficient budget allocation
			Proportion of resolutions from IGF implemented	10	10	10	7	5	3	Target not achieved due to insufficient budget allocation
	Division of Global Health Security		Number of health workers trained	N/A	N/A	20	N/A	N/A	0	No budgetary allocation
<b>Programme 3: Health Policy Standards and Regulations</b>										
<b>Programme Outcome: Strengthened quality health standards and regulations</b>										
<b>SP:3.1 Health Standards and Quality</b>	Kenya Health Professions Oversight Authority	Health Professional Regulatory Services	Percentage of health facilities inspected for compliance to norms and standards of healthcare delivery	N/A	20	30	N/A	22	22	During the FY 2022/23, the target was surpassed due to concerted efforts between the national and county governments. However, the target for 2023/24 FY was not met due to budgetary constraints
			Percentage of Health profession training institutions assessed for compliance to norms and standards of training	N/A	50	50	N/A	0	95	During the FY 2022/23, institutions training previously unregulated professionals were not assessed due to



Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										austerity measures. However, during the FY 2023/24, the target was surpassed as 76 health professions training institutions out of targeted number of 80 were inspected.
			Number of unregulated health professionals registered	N/A	500	1500	N/A	998	2098	The targets were surpassed as the Authority intensified efforts to ensure all health professionals are regulated
			Percentage of complaints and disputes received and handled	N/A	100	100	N/A	100	100	Target achieved.
	Kenya Health Resource Advisory Council (KHRAC)	Health Professionals Management and Advisory Services	Percentage master register for all health practitioners developed	N/A	N/A	55	N/A	N/A	20	Master Register being developed in stages and based on other systems. Slowed down due to inadequate funds to hold meetings and collect data
			Number of Health Workers (HWs) trained on Integrated Human Resource Information System (iHRIS)	N/A	100	100	N/A	100	120	Targets accomplished and surpassed due to combined support from development partners: -
			Number of Health Care Workers (HCWs) trained on National Health Workforce Accounts (NHWA)	N/A	100	100	N/A	100	120	USAID, WHO

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Number of HWs implementing (Integrated Human Resource Information System) iHRIS	N/A	100	100	N/A	100	120	
			Number of HWs implementing National Health Workforce Accounts (NHWA)	N/A	100	100	N/A	100	120	
			Number of faith based and private health facilities implementing National Health Workforce Accounts (NHWA) guidelines and practises	N/A	N/A	30	N/A	N/A	0	Target not achieved since data sharing agreements with individual organizations were not finalized
			Number of HWs trained on Workload Indicators of Staffing Needs (WISN)	N/A	100	100	N/A	100	100	Targets achieved as planned
			Number of facilities where WISN has been carried out	N/A	N/A	350	N/A	N/A	0	WISN not undertaken due to delayed release of funds by supporting partners and lack of exchequer
			Number of facilities implementing WISN	N/A	N/A	350	N/A	N/A	0	Implementation not done due to delay in undertaking the WISN exercise
			No of Framework for Management of Specialist health care workers Developed	N/A	N/A	1	N/A	N/A	0	Draft framework being revised with input received during various intergovernmental fora
			No of guidelines developed to implement Kenya health workforce migration policy	N/A	N/A	1	N/A	N/A	0	Draft guidelines development awaiting policy finalization and Launch by Ministry of Labour

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			KHHRAC Strategic Plan	N/A	N/A	1	N/A	N/A	0	Strategic Plan not developed due to delayed release of funds by supporting partners and lack of exchequer
	Kenya Medical Practitioners and Dentist Council	Health Professional Regulatory Services	Number of Medical and Dental Officer Interns placed	1,300	900	912	691	912	466	Target surpassed during 2022/23 FY since the number received from the training institutions was higher. In 2021/22 and 2023/24 FYs Target was not achieved since the number received was lower.
Number of new Medical, Dental and Community Oral Health Officers practitioners registered.			1,300	1,300	1,325	754	1,325	1,025	Target was not achieved in 2021/22 and 2023/24 FYs due to delay in posting of Medical, Dental and COHO Interns, creates a ripple effect in registration. During 2022/23 FY more practitioners were registered.	
Number of Medical, Dental and Community Oral Health Officers practitioners with active annual practice licenses.			10,400	10,200	11,960	10,837	10,638	12,507	Target surpassed due to The Council's relentless effort in conducting regular compliance checks and creating Public	
Number of health facilities with active annual operating licenses.			6,227	7,000	8,000	7,161	7,124	12,406		

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										awareness including introduction of SMS short code service where members of the public are encouraged to verify the licensure status of the practitioners and this created a surge in licensure renewal and publishing the register of all licensed practitioners.
			Number of compliance inspections carried out	2,500	2,720	3,560	2,826	3,560	5,025	Target surpassed due to The Council's approach of conducting both singular and joint inspections with other regulatory bodies.
			Proportion of Medical, dental internship and specialist training centers inspected.	40	47	100	100	100	100	Target achieved and surpassed due to the Council's commitment to quality training through conducting annual inspection of all the internship training centres and making recommendation on areas that require improvement.

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Number of new accredited Continuous Professional Development (CPD) providers.	N/A	N/A	10	N/A	N/A	17	Target surpassed since the Council undertook awareness creation to enhance accreditation of all the Continuous Professional Development (CPD) providers within the medical and dental space.
Nursing Council of Kenya	Health Professional Regulatory Services	Number of nurses and midwives newly registered	4000	4,533	6,238	6,639	6,341	12,583	The numbers have grown due to the double in KMTC student's intake and increased demand for nursing courses over time	
		Number of eligible candidates examined	7,000	7,205	11,418	4191	10,937	19,383		
		Number of eligible candidates Indexed	6,000	6,400	10,000	6,200	19,249	13,678		
		Percentage of nurses and midwives retained	53	50	49	53.61	48.6	58.96	The retention targets for FYs 2021/22 and 2023/24 were achieved due to enhance compliance audits, with an underachievement reported during FY 2022/23 which was attributed to inadequate budgetary allocation to undertake compliance audits.	

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Proportion of training institutions that are audited for compliance	100	100	100	88	88.3	89	The target were not achieved over the period due to low compliance standards in Public Medical training colleges
			Proportion of health facilities audited for compliance	N/A	N/A	100	N/A	N/A	100	All the facilities audited met compliance criteria.
	Clinical Officers Council	Health Professional Regulatory Services	Number of Clinical Officers trainees Indexed	N/A	3,000	2,500	N/A	1,799	4,958	Target not achieved during 2022/23 FY since the number that sought indexing depended on the courses offered by KMTC. However, target was surpassed in 2023/24 FY due to backlog from the previous years
			Number of Clinical Officers Registered	N/A	2,500	3,000	N/A	2,790	777	Target was surpassed during 2022/23 FY since more clinical officers passed the exams. However, during 2023/24 FY, there was late posting of interns in the financial year hence most of the interns were not registered.
			Number of Clinical Officers Licensed	N/A	23,949	15,000	N/A	16,764	19,851	During 2022/23 FY some clinical officers went for further studies and thus they

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										seek licencing in other regulatory bodies. However in 2023/24 FY, the licensure period was reduced from 2 to 1 year
	Public Health Officers and Technicians Council - Kenya	Health Professional Regulatory Services	Number of candidates assessed	600	500	400	520	408	438	During the 2021/22 and 2022/23 FYs the targets were not achieved since less number of public health officers paid for the assessment. However, in 2023/24 FY more public health officers paid
Number of interns placed			450	400	400	323	390	0	Targets were not achieved less interns sort the posting. However, there was no internship placement done in the 2023/24 FY due the strike	
Number of practitioners licensed			1,290	1,320	1,420	1,138	1,215	200	The targets were not achieved due to low transition from the internship.	
Number of newly accredited internship centers			2	1	2	0	0	2	During 2021/22 and 2022/23 FYs, the internship centres had not the met the conditions necessary for accreditation.	
Number of H/F inspected for compliance			70	80	90	40	50	0	Targets were not achieved in	

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										2021/22 and 2022/23 FYs due to insufficient funds. Similarly, there were no budgetary allocation in 2023/24
			Number of training institutions inspected	5	10	15	3	6	3	Targets were not achieved since most institutions were not ready for inspection
			Number of newly CPD providers accredited	5	5	5	1	0	0	Targets were not achieved since only one CPD provider sort for accreditation
	Counsellors and Psychologist Board	Health Professional Regulatory Services	Number of Counsellors & Psychologist trainees Indexed	N/A	N/A	4,000	N/A	N/A	0	Target not achieved due to the grace period of registration without examination according to the Acts requirements
			Number of Counsellors & Psychologist Registered	N/A	N/A	5,000	N/A	N/A	4,000	Targets not achieved due to inadequate sensitizing clients on its existence.
			Number of Counsellors & Psychologist Licensed	N/A	N/A	5,000	N/A	N/A	1,250	
			Number of clinical facilities registered and licensed	N/A	N/A	20	N/A	N/A	2	Target was not achieved due to inadequate human resource capacity.
			Number of training institutions inspected	N/A	N/A	35	N/A	N/A	0	Target not achieved due to inadequate budgetary allocation
			Number of institutions accredited to offer CPD	N/A	N/A	5	N/A	N/A	5	Target achieved



Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Number of Available Rules & Regulation formulated	N/A	N/A	2	N/A	N/A	2	Target achieved
			Number of policies developed	N/A	N/A	1	N/A	N/A	1	Target achieved
			Number of Human resource instruments developed	N/A	N/A	1	N/A	N/A	1	The HR instruments were approved in the next financial year.
	Occupational Therapy Council of Kenya	Health Professional Regulatory Services	Number of clinical facilities registered and licensed	N/A	N/A	5	N/A	N/A	0	Target not achieved due to inadequate budgetary allocation
			Number of training institutions licensed	N/A	N/A	1	N/A	N/A	0	Target not achieved due to inadequate budgetary allocation
			Number of Occupational Therapists Registered and licensed	N/A	N/A	200	N/A	N/A	350	Target surpassed due to enhanced advocacy
			Number of Available Rules & Regulation formulated	N/A	N/A	1	N/A	N/A	0	Rules and regulations are in draft awaiting external stakeholder input, validation, and gazettelement
			Number of SOPs developed	N/A	N/A	1	N/A	N/A	0	No budgetary allocation
			Number of scopes of practice developed	N/A	N/A	1	N/A	N/A	0	No budgetary allocation
			Number of Human resource instruments developed	N/A	N/A	1	N/A	N/A	0	No budgetary allocation
			Number of new accredited Continuous Professional Development (CPD) providers.	N/A	N/A	2	N/A	N/A	0	Council developing the necessary structures required to

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										accredit new CPD providers
	Physiotherapy Council of Kenya	Health Professional Regulatory Services	Number of physiotherapy facilities inspected	N/A	100	150	N/A	80	124	Not achieved due to inadequate budgetary allocation
			Number of scopes of practice developed	N/A	N/A	3	N/A	N/A	0	The third SOP developed awaiting stakeholders' validation before finalization.
	National Quality Control Laboratory	HPTs Quality Assurance services	Proportion of medical drugs tested for quality and safety of the citizens	N/A	100	100	N/A	70	63	Targets not achieved due to insufficient chemical reference substances, specialized equipment, reagents and accessories as well as delayed equipment calibrations
			Proportion of medical devices tested for quality, safety of the citizens.	N/A	100	100	N/A	100	100	All the medical devices brought to the lab for testing were tested and certificates issued
			Percentage of the laboratory completed	N/A	30	30	N/A	0	0	Delay in the approvals and pre-feasibility
			Number of research activities	N/A	50	100	N/A	0	10	Targets not achieved due to no budgetary allocation.
			Number of method Developed/validated/verified	N/A	N/A	5	N/A	N/A	5	Target achieved

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
	Health Records and Information Managers Board	Health Professional Regulatory Services	Number of training institutions accredited and regulated	N/A	N/A	20	N/A	N/A	2	Target not achieved due to insufficient funds
			Proportion of training institutions who have adopted the standard curriculum	N/A	N/A	50	N/A	N/A	7	The process of bringing all the training institutions including TVETs was slow due to legal instruments framework requirements
			Number of HRIM professionals entered in the register	N/A	N/A	3000	N/A	N/A	1263	Delayed registration process
			Proportion of HRIM professional registered, licensed and entered in the roll register	N/A	N/A	50	N/A	N/A	42	
			Number of policy documents developed	N/A	N/A	3	N/A	N/A	2	Target not achieved due to insufficient funds
			Number of institutions using the board's policies	N/A	N/A	20	N/A	N/A	0	By the end of 2023/24 FY, one institution was at stakeholder engagement level
Pharmacy and Poisons Board	Health Professional and HPTs Regulatory Services	Numbers of new product registered	N/A	10000	8000	N/A	8000	1538	Target not achieved due to queries on challenges arising from the e-citizen payment system	
		Number of Pharmacists and Pharmaceutical technologists licensed	N/A	1000	1000	N/A	800	1040	Target not achieved in 2022/23 FY due to low registration of practitioners. However, more pharmacists and pharmaceutical	

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										technologists sat for the exams and passed in 2023/24 FY
			Number of Joint market surveillance and regulatory inspections done	N/A	24	36	N/A	24	8	Intelligence gathering and multi-agency approach on presidential directive on elimination of drug, alcohol and substance abuse made efforts and focus to multi agency market surveillance and inspections so the Board only did 8.
			Number of new clinical trials approved	N/A	50	50	N/A	42	4	Reduced number of new applications recorded
			Number of pharmaceutical import and export permits approved	N/A	32000	33000	N/A	30000	7388	Targets not achieved due to decline in the number of import and export permits applications during the transition to e-citizen payment platform
	Kenya Medical Laboratory Technicians and Technologists Board	Health Professional Regulatory Services	Number of students indexed	N/A	1,000	1,200	N/A	755	1,246	Target not achieved during 2022/23 FY since some training institutions did not admit students. However, in 2023/24 FY, there was a

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
									higher allocation of students by KUCCPS to training institutions	
			Number of eligible candidates examined for MLS licensure examinations	N/A	1,600	1,700	N/A	1,287	692	Targets not achieved because there was only one exam series.
			Number of Medical Lab Technologists registered	N/A	1,500	1,300	N/A	1,283	597	Targets not achieved due to lower number of graduating graduates
			Number of MLS licenses issued	N/A	13,000	15,000	N/A	12,348	12,814	Targets not achieved due to low turn up of technicians.
			Number of labs registered	N/A	4,100	4,500	N/A	3,667	5,094	Targets not achieved in 2022/23 FY due to low number of inspectors. However, target was surpassed in 2023/24 FY because more inspections were carried out.
			Number of laboratory facilities licensed	N/A	4,100	3,500	N/A	2,614	3,503	
			Number of IVDs registered	N/A	100	83	N/A	70	3	
<b>SP 3.2 Health Policy and Regulations</b>	Directorate of Health Standards, Regulation and Quality Assurance	Health Policy, Regulatory and Quality Assurance	Number of Bills /Regulations developed	N/A	3	3	N/A	4	0	There was additional funding from GoK and development partners for key legislations that were drafted to support UHC implementation in the FY 2022/23 and later assented to in 2023/24 FY including Primary Healthcare Act, 2023, Digital

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										Health Act, 2023, Social Health Insurance Act, 2023 and the Facility Improvement Financing Act, 2023. For 2023/24 FY the Quality of care Bill developed, awaiting finalization and Cabinet approval. Delayed funding hence delayed Drafting of a Quality-of-Care Bill that will establish the Kenya Quality of Care Authority.
			Number of Health Norms and Standards developed	N/A	1	1	N/A	0	0	Draft Leadership and Governance Norms and Standards was developed in 2022/23 FY and still awaits stakeholder participation and consensus. Review of health infrastructure Norms and Standards planned for 2023/24 was deferred due to lack of funds
			Number of Guidelines developed	N/A	1	1	N/A	0	1	Clinical Guidelines for management and referral of common health

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										conditions developed. Review of the Kenya Essential Package for Health (KEPH) was initiated within the review period.
			HRH policy and Strategy developed	N/A	N/A	1	N/A	N/A	0	Review of the Internship Policy for Healthcare Workers, which will form part of the HRH Policy, was completed in 2023/24 Development of the HRH Policy was deferred to 2024/25 FY due to lack of funds.
			Health professionals' Migration policy developed	N/A	N/A	0	N/A	N/A	0	A draft policy in place
<b>Programme 4: General Administration, Planning and Support Services</b>										
<b>Programme Outcome: Effective governance and administration strengthened</b>										
<b>SP4.1: General Administration and Human Resource management and development</b>	General Administration	General Administration Services	Number of CCTV installed in Afya House and Afya Annex Campuses	N/A	100	50	N/A	0	0	No budgetary allocation
			Number of biometric logs installed	N/A	500	400	N/A	20	0	No budgetary allocation
			Number of Strategies developed	N/A	N/A	8	N/A	N/A	8	Target achieved
			Number of staff sensitized on HIV Prevention and NCDs; citizen service delivery charter/process; resolution of public complaints; Alcohol and drug abuse; disability, gender, road safety mainstreamed	N/A	N/A	500	N/A	N/A	500	Target achieved
	ICT Division	ICT Services	Number of Information Communication	N/A	N/A	2	N/A	N/A	2	Target achieved

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
			Technology (ICT) Systems deployed							
			Workplace Digitalization and Automation Strategy developed	N/A	N/A	1	N/A	N/A	0	Draft concept note done
	Human Resource Management & Development division	Human Resource Management Services	Number of health care workers professional interns engaged	N/A	9,308	8,159	N/A	8,706	4,156	Target not achieved in 2022/23 FY due to insufficient funds. Target not achieved as recruitment for the interns was only done for cohort I as the budget wasn't available for on boarding Cohort II for 2023/24 FY
			Number of Health workers trained	N/A	130	261	N/A	121	0	No budgetary allocation
	Public Communication	Public Communication Services	Number of press releases, media briefing and engagements, official statements, media briefings and social media/ website posts	12	15	20	10	14	18	The number depends with the need for the press releases
			Number of articles published/photos/videos	N/A	N/A	30	N/A	N/A	30	Target achieved
			Number of social media campaigns and social media reach	N/A	N/A	20	N/A	N/A	20	Target achieved
			Number of public communication plan	N/A	N/A	1	N/A	N/A	0	No budgetary allocation
	Records Management	- Records Management Services	Number of records Digitized	N/A	N/A	40	N/A	N/A	10	Target not achieved due to inadequate funds
			No. of Records Management Policies developed	N/A	N/A	45	N/A	N/A	10	Target not achieved due to delayed separation of records from



Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
										state department of medicals services
			Percentage level of establishment of Records Management Unit	N/A	N/A	30	N/A	N/A	30	Target achieved
	Supply Chain Management Unit	Supply Chain Management Services	List Of Registered Suppliers updated	N/A	N/A	1	N/A	N/A	1	Target achieved
			Annual Procurement Plan developed	N/A	N/A	1	N/A	N/A	1	Target achieved
			Asset register	N/A	N/A	1	N/A	N/A	1	Target achieved
			Percentage of obsolete/surplus assets disposed	N/A	N/A	100	N/A	N/A	0	There were no obsolete/ surplus assets in the State Department
<b>SP4.2: Financing and planning</b>	Finance division	Financial Management Services	Number of budget reports submitted	N/A	4	4	N/A	4	4	Target achieved
			Absorption Rate determined	N/A	100	100	N/A	89	87	Delay in exchequer releases
	Tax Exemption Unit		Number of tax exemption application process digitized	N/A	1	2	N/A	0	1	Targets not achieved due no budgetary allocation in 2022/23 FY. Only one tax exemption application process was digitized due to insufficient funds in 2023/24 FY
			Number of tax exemption applications recommended	N/A	400	420	N/A	420	502	Target surpassed since more clients were sensitized and hence more tax exemption applications were recommended

Programme	Delivery Unit	Key Outputs	Key Performance Indicators	Planned Targets			Achieved Targets			Remarks
				2021/22	2022/23	2023/24	2021/22	2022/23	2023/24	
	Central Planning & Project Monitoring Unit	Planning Services, and Monitoring and evaluation services	Number of monitoring and evaluations on capital projects carried out	N/A	4	4	N/A	4	4	Target achieved as planned
			Number of officers trained on planning, budgeting and M&E	N/A	N/A	300	N/A	N/A	0	No budgetary allocation
			Number of surveys conducted	N/A	N/A	2	N/A	N/A	2	Target achieved
			MOH Facts and Figures booklet	N/A	1	1	N/A	1	0	No budgetary allocation
			Number of officers sensitized	N/A	N/A	300	N/A	N/A	0	No budgetary allocation

## 2.2. Analysis of expenditure trends for the F Y 2021/22- 2023/24 (Summarize as indicated in Table 2.2 to 2.6)

Table 2.2 shows the details for the health sector recurrent vote for the period under review.

**Table 2.2: Analysis of Recurrent Expenditure (Ksh.Million)**

Economic Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>Gross</b>	<b>65,972</b>	<b>72,074</b>	<b>88,832</b>	<b>65,944</b>	<b>67,601</b>	<b>83,405</b>
AIA	18,448	21,644	28,603	18,370	18,716	19,426
NET	47,524	50,430	60,229	47,574	48,885	63,979
Compensation to Employees	13,718	14,354	15,295	13,717	14,137	14,486
Transfers	49,841	55,161	68,800	49,836	50,907	65,673
Other Recurrent	2,413	2,559	4,737	2,391	2,557	3,247
<b>Of which</b>						
<i>Insurance Costs</i>	0	-	-	0	0	-
<i>Utilities</i>	0	114	109	0	86	99
<i>Rent</i>	0	1	4	0	0	4
<i>Contracted Professionals (Guards &amp; Cleaners)</i>	0	70	75	0	62	73
<i>Others</i>	2,413	2,374	3,240	2,391	2,411	2,052

Further, the breakdown is shown for each State Department as follows;

The approved Gross Recurrent estimates for the State Department of Medical Services were KSh. 65,972 Million and KSh. 66,220 Million, in FY 2021/22 and FY 2023/24 respectively and the actual expenditures were KSh. 65,944 million and KSh. 64,147 million for the FY 2021/22 and FY 2023/24 as shown below.

**Table 2.2a: SDMS Analysis of Recurrent Expenditure (KSh. Million)**

Economic Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Gross	65,972	69,199	66,220	65,944	65,620	64,147
AIA	18,448	20,466	20,627	18,370	17,550	19,426
NET	47,524	48,733	45,593	47,574	48,070	44,721
Compensation to Employees	13,718	14,354	8,716	13,717	14,137	8,367
Transfers	49,841	52,520	54,146	49,836	49,111	53,614
Other Recurrent	2,413	2,325	3,358	2,391	2,372	2,166
<b>Of which</b>						

Economic Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<i>Insurance Costs</i>		-	-		0	-
<i>Utilities</i>		104	109		78	99
<i>Rent</i>		1	4		0	4
<i>Contracted Professionals (Guards &amp; Cleaners)</i>		70	75		62	73
<i>Others</i>	2,413	2,150	3,170	2,391	2,232	1,990

The approved Gross Recurrent estimates for the State Department of Public Health and Professional Standards were KSh. 2,875 million and KSh. 22,612 million, in FY 2022/23 and FY 2023/24 respectively and the actual expenditures were KSh. 1,981 million and KSh. 19,258 million for the FY 2022/23 and FY 2023/24 as shown below;

**Table 2.2b: SDPH&PS Analysis of Recurrent Expenditure (KSh. Million)**

Economic Classification	Approved Budget Allocation			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Gross		2,875	22,612		1,981	19,258
AIA		1,178	7,976		1,166	-
NET		1,697	14,636		815	19,258
Compensation to employees			6,579		-	6,119
Transfers		2,641	14,655		1,796	12,059
Other Recurrent		234	1,378		185	1,081
<b><i>Of which</i></b>						
<i>Insurance</i>					-	-
<i>Utilities</i>		10			8	-
<i>Rent</i>					-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>						
<i>Others</i>		224	70		179	62

Table 2.3.below shows the details for the Health Sector Development vote for the period under review.

**Table 2.3: Analysis of health sector Development Expenditure (KSh. Million)**

Description	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>Gross</b>	<b>63,809</b>	<b>44,323</b>	<b>45,606</b>	<b>43,456</b>	<b>31,057</b>	<b>27,019</b>

GOK	35,479	27,898	34,050	29,406	22,567	21,707
Loans	19,524	8,180	6,092	10,442	5,041	3,508
Grants	8,805	8,245	5,464	3,608	3,449	1,804
Local AIA	0	0	0	0	0	0

Further, the breakdown is shown for development budget for State Departments is as follows;

The table below shows the approved gross development budget for the State Department for Medical Services, with a gross KSh. 63,809 million, KSh. 41,986 million and KSh. 39,104 million in FY 2021/22, FY 2022/23 and FY 2023/24 and actual expenditure of KSh. 43,456 million, KSh. 31,057 million and KSh. 21,032 million in FY 2021/22, FY 2022/23 and FY 2023/24.

**Table 2.3a: Analysis of SDMS Development Expenditure (KSh. Million)**

Description	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>Gross</b>	<b>63,809</b>	<b>41,986</b>	<b>39,104</b>	<b>43,456</b>	<b>31,057</b>	<b>21,032</b>
GOK	35,479	25,561	27,548	29,406	22,567	15,720
Loans	19,524	8,180	6,092	10,442	5,041	3,508
Grants	8,805	8,245	5,464	3,608	3,449	1,804
Local AIA	-			-		

The table below shows the approved gross development budget for the State Department for Public Health and Professional Standards, KSh. 2,337 million and KSh. 6,502 million and actual expenditure of KSh 5,987 in the FY 2023/24, translating to an absorption rate of 92.1% with no actual expenditure in FY 2022/23. The lack of spending in FY 2022/23 was the non-release exchequer.

**Table 2.3b: Analysis of SDPH&PS Development Expenditure (KSh. Million)**

Description	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Gross	0	2,337	6,502	0	0	5,987
GOK	-	2,337	6,502	-	-	5,987
Loans	-	-	-	-	-	-
Grants	-	-	-	-	-	-
Local AIA						

**Table 2.4: Analysis of Programme Expenditure (Ksh. Million)**

**Table 2.4a: SDMS Analysis of Programme Expenditure (KSh. Million)**

Programme	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>Programme 1 – Curative and Reproductive Maternal New Born Child Adolescent Health</b>						

SP1.2 - Non-communicable disease prevention & control	535	670	1,521	394	529	1,151
SP1.3 - Government Chemist	7,648	7,155	-	3,232	3,040	-
SP1.4 - Radiation Protection	235	191	0	235	108	0
SP1.5 - Communicable Disease Control	6,391	7,140	5,734	3,774	5,019	2,463
SP1.8- Disease Surveillance and Response	15,139	4,684		7,773	2,989	
SP1.6 Environmental Health	128	500		75	463	
SP1.7 - Reproductive Maternal and New Born			1,984			1,163
SP1.9 - Immunization Management			7615			3371
<b>Total Expenditure Programme 1</b>	<b>30,076</b>	<b>20,340</b>	<b>16,854</b>	<b>15,483</b>	<b>12,148</b>	<b>8,148</b>
<b>Programme 2 - National Referral and specialized Services</b>						
SP2.1 - National Referral Services	37,098	41,799	49,641	35,887	41,370	49,987
SP 2.2 Mental Health	-	125	-	-	111	-
SP 2.4 Forensics and Diagnostics	-	2,067	-	-	1,483	
SP2.5 - Free Primary Healthcare	-	-	-	-	-	-
SP 2.6 Specialized Medical Equipment	7,205	3,795	2,796	7,205	3,712	2,097
SP2.8 - National Blood Transfusion Service	1,988	129	2,194	985	125	1510
SP2.9 - Health Products and Technologies	3,990	2,907	5,701	3,934	1,325	1,055
<b>Total Expenditure Programme 2</b>	<b>50,281</b>	<b>50,822</b>	<b>60,332</b>	<b>48,011</b>	<b>48,126</b>	<b>54,649</b>
<b>Programme 3 - Health Research and Development</b>						
SP3.1 - Medical Research	7,860	6,701	3,907	7,760	4,894	3,287
SP3.2 - Health Innovations	3,493	3,315	882	3,461	3,013	351
<b>Total Expenditure Programme 3</b>	<b>11,353</b>	<b>10,016</b>	<b>4,789</b>	<b>11,221</b>	<b>7,907</b>	<b>3,638</b>
<b>Programme 4 - General Administration</b>						
SP 4.1 General Administration & Human Resource Management	6,574	6,893	3,572	6,571	6,928	3,234
SP 4.2 - Finance & Planning	1,527	1,958	1,039	963	1,425	545
SP 4.3 - Social Protection In Health	29,970	19,922	18,738	27,151	19,706	14,965
SP4.4 - Health Standards, Quality Assurance & Standards	-	1,116		-	644	
SP4.5 - National Quality Control Laboratories	-	118		-	117	
<b>Total Expenditure Programme 4</b>	<b>38,071</b>	<b>30,007</b>	<b>23,349</b>	<b>34,685</b>	<b>28,820</b>	<b>18,744</b>
<b>Total Expenditure Health Vote</b>	<b>129,781</b>	<b>111,185</b>	<b>105,324</b>	<b>109,400</b>	<b>97,001</b>	<b>85,179</b>

**Table 2.4b: SDPH&PS Analysis of Programme Expenditure (KSh. Million)**

Programme	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>Programme:1 Preventive and Promotive Health Services</b>						
Sub-Programme 1.1: Communicable diseases control	-	1,350	3,605	-	52	3,106
Sub-Programme 1.2: Disease surveillance and response	-	100	154	-	-	127
Sub-Programme 1.3: Public Health Services	-	-	1,212	-	-	657
Sub-Programme 1.4: Radiation safety and nuclear security	-	64	339	-	36	174
Sub-Programme 1.5: Primary Health Care	-	-	826	-	-	662
SP1.1 Non-communicable Disease Prevention & Control	-	2	-	-	1	-
SP2.1 Reproductive Maternal Neo-natal Child & Adolescent Health-RMNCAH	-	975	-	-	26	-
SP6.1: Environmental Health	-	32	-	-	11	-
<b>Total Programme 1</b>	<b>-</b>	<b>2,523</b>	<b>6,136</b>	<b>-</b>	<b>126</b>	<b>4,727</b>
<b>Programme 2: Health Resource Development and Innovation</b>						
Sub-Programme 2.1: Capacity building and training (Preservice and In-service training)	-	2,154	11,619	-	1,361	10,379
Sub-Programme 2.2: Research and Innovation on health	-	25	598	-	25	598
Sub-Programme 2.3: Health Profession Services	-	-	5,955	-	-	5,560
<b>Total for Programme 2</b>	<b>-</b>	<b>2,179</b>	<b>18,173</b>	<b>-</b>	<b>1,386</b>	<b>16,537</b>
<b>Programme 3: Health Policy, Standards and Regulations</b>						
Sub-Programme 3.1: Health Standard Quality Assurance	-	-	3,962	-	-	3,262
Sub-Programme 3.2: Healthy Policy and Regulations	-	-	99	-	-	95
SP4.1 Health Policy, Standards and Regulations	-	21	-	-	17	-

Programme	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
SP4. 2: Health Policy, Planning & Financing		10	-	-	11	-
<b>Total for Programme 3</b>	-	<b>31</b>	<b>4,060</b>	-	<b>28</b>	<b>3,356</b>
<b>Programme 4: General Administration and Human Resource Management</b>						
Sub-Programme 4.1: General administration Human resource management and development	-	-	697	-	-	598
Sub-Programme 4.2: Finance and Planning	-	-	48	-	-	27
SP3.1 Health Standards, Quality Assurance & Standards		365	-	-	336	-
SP3.2 Human Resource Management and Development		65	-	-	60	-
SP3. 3: Health Administration		50	-	-	45	-
<b>Total for Programme 4</b>	-	<b>480</b>	<b>745</b>	-	<b>441</b>	<b>625</b>
<b>GRAND TOTAL</b>	-	<b>5,213</b>	<b>29,114</b>	-	<b>1,981</b>	<b>25,245</b>

This section shows the breakdown of approved and actual expenditures in FY 2021/22 to FY 2023/24 disaggregated by economic classifications.

#### Analysis by Category of Expenditure: Economic Classification

Table 2.5a: SDMS Analysis by Category of Expenditure: Economic Classification (KSh. Million)

Expenditure Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>Programme 1: National Referral and specialized Services</b>						
<b>Current Expenditure</b>	<b>37,524</b>	<b>41,471</b>	<b>49,532</b>	<b>37,620</b>	<b>41,011</b>	<b>48,290</b>
Compensation to Employees	1,152	1,117	1,120	1,152	1,049	872
Use of Goods and Services	640	826	1491	637	693	847
Subsidies						
Current Govt Agencies	35,631	39,186	46,798	35,737	39,012	46,448
Social Benefits		100	49		100	49
Other Recurrent- Non-financial	102	242	74	94	157	74
<b>Capital Expenditure</b>	<b>12,757</b>	<b>9,351</b>	<b>10,801</b>	<b>10,391</b>	<b>7,115</b>	<b>6,360</b>
Compensation to Employees						
Use of Goods and Services	8,355	4,618	2,431	7,872	4,367	1,851



Expenditure Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Subsidies						
Capital Govt Agencies	1,943	2,751	6,186	1,486	1,792	3,937
Other Development (Non-financial)	2,459	1,982	2,184	1,032	956	572
<b>Total Programme 1</b>	<b>50,281</b>	<b>50,822</b>	<b>60,333</b>	<b>48,011</b>	<b>48,126</b>	<b>54,650</b>
<b>Programme 2: Curative and Reproductive Maternal &amp; Newborn Child Adolescent Health</b>						
<b>Current Expenditure</b>	<b>3,077</b>	<b>2,005</b>	<b>1,398</b>	<b>3,069</b>	<b>1,854</b>	<b>1,316</b>
Compensation to Employees	1,667	712	98	1,667	690	43
Use of Goods and Services	231	242	133	227	232	107
Subsidies						
Current Govt Agencies	1,179	1,051	1,167	1,175	932	1,166
Social Benefits						
Other Recurrent						
<b>Capital Expenditure</b>	<b>27,000</b>	<b>18,339</b>	<b>15,455</b>	<b>12,414</b>	<b>10,294</b>	<b>6,832</b>
Compensation to Employees	17	-		15	-	
Use of Goods and Services	4,611	1,690	3,387	1,141	1,180	635
Subsidies						
Capital Govt Agencies	22,131	15,615	11,565	11,018	8,452	5,739
Other Development (Non-financial)	240	1,034	503	240	662	458
<b>Total Programme 2:</b>	<b>30,077</b>	<b>20,344</b>	<b>16,853</b>	<b>15,483</b>	<b>12,148</b>	<b>8,148</b>
<b>Programme 3: Health Research and Innovations</b>						
<b>Current Expenditure</b>	<b>10,066</b>	<b>8,688</b>	<b>3,457</b>	<b>10,061</b>	<b>6,679</b>	<b>3,237</b>
Compensation to Employees			0			
Use of Goods and Services			0			
Subsidies						
Current Govt Agencies	10,066	8,688	3,457	10,061	6,679	3,237
Other Recurrent-						
<b>Capital Expenditure</b>	<b>1,287</b>	<b>1,328</b>	<b>1,332</b>	<b>1,160</b>	<b>1,228</b>	<b>401</b>
Compensation to Employees						
Use of Goods and Services						
Subsidies						
Capital Govt Agencies	1,136	1,096	600	1,009	1,026	200
Other Development	151	232	732	151	202	201
<b>Total Programme 3:</b>	<b>11,353</b>	<b>10,016</b>	<b>4,789</b>	<b>11,221</b>	<b>7,907</b>	<b>3,638</b>
<b>Programme 4: General Administration</b>						
<b>Current Expenditure</b>	<b>15,303</b>	<b>17,035</b>	<b>11,832</b>	<b>15,192</b>	<b>16,076</b>	<b>11,305</b>
Compensation to Employees	10,898	12,525	7,498	10,898	12,398	7,497
Use of Goods and Services	1,415	1,190	1,551	1,408	979	1,030
Subsidies	0	0		0	0	
Current Govt Agencies	2,966	2,989	2723	2,862	2,488	2723
Other Recurrent-	24	331	60	24	211	55
<b>Capital Expenditure</b>	<b>22,765</b>	<b>12,972</b>	<b>11,516</b>	<b>19,492</b>	<b>12,744</b>	<b>7,438</b>
Compensation to Employees	0	0	0	0	0	-
Use of Goods and Services	1,420	306	803	1,366	299	676
Subsidies	0	0		0	0	

Expenditure Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Capital Govt Agencies	20,365	12,480	5,713	17,162	12,389	4,144
Other Development	980	186	5000	964	56	2,618
<b>Total Programme 4:</b>	<b>38,068</b>	<b>30,007</b>	<b>23,348</b>	<b>34,684</b>	<b>28,820</b>	<b>18,743</b>
<b>Total Expenditure for the programme</b>	<b>129,779</b>	<b>111,189</b>	<b>105,323</b>	<b>109,399</b>	<b>97,001</b>	<b>85,179</b>

**Table 2.5b: SDPH&PS Analysis by Category of Expenditure: Economic Classification (K\$ Million)**

Economic classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>Programme 1: Preventive and Promotive Health Services</b>						
<b>Current Expenditure</b>	-	<b>374</b>	<b>2,565</b>	-	<b>126</b>	<b>1,670</b>
Compensation of Employees	-	-	246	-	-	228
Use of Goods	-	44	703	-	36	549
Transfers	-	309	1,616	-	69	893
Other Recurrent	-	21	-	-	21	-
<b>Capital Expenditure</b>	-	<b>2,148</b>	<b>3,571</b>	-	-	<b>3,057</b>
Acquisition of Non-Financial Assets	-	-	40	-	-	15
Capital Transfers Govt. Agencies	-	2,148	3,531	-	-	3,041
Other Development	-	-	-	-	-	-
<b>Total Programme 1</b>	<b>-</b>	<b>2,522</b>	<b>6,136</b>	<b>-</b>	<b>126</b>	<b>4,727</b>
<b>Programme 2: Health Resource Development and Innovation</b>						
<b>Current Expenditure</b>	-	<b>1,990</b>	<b>15,492</b>	-	<b>1,386</b>	<b>13,857</b>
Compensation of Employees	-	-	5,786	-	-	5,381
Use of goods	-	-	167	-	-	177
Currents and other Transfers Govt. Agencies	-	1,990	9,537	-	1,386	8,297
Other Recurrent	-	-	2	-	-	2
Capital Expenditure	-	189	2,680	-	-	2,680
Acquisition of Non-Financial Assets	-	-	-	-	-	-

Economic classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Capital Transfers Govt. Agencies	-	189	2,680	-	-	2,680
Other Development	-	-	-	-	-	-
<b>Total Programme 2</b>	<b>-</b>	<b>2,179</b>	<b>18,173</b>	<b>-</b>	<b>1,386</b>	<b>16,537</b>
<b>Programme 3: Health Policy, Standards and Regulations</b>						
<b>Current Expenditure</b>	<b>-</b>	<b>31</b>	<b>3,810</b>	<b>-</b>	<b>28</b>	<b>3,106</b>
Compensation of Employees	-	-	227	-	-	211
Use of Goods	-	14	74	-	11	18
Currents and other Transfers Govt. Agencies	-	12	3,502	-	12	2,869
Other Recurrent	-	5	8	-	5	8
<b>Capital Expenditure</b>	<b>-</b>	<b>-</b>	<b>250</b>	<b>-</b>	<b>-</b>	<b>250</b>
Acquisition of Non-Financial Assets	-	-	-	-	-	-
Capital Transfers Govt. Agencies	-	-	250	-	-	250
Other Development	-	-	-	-	-	-
<b>Total Programme 3</b>	<b>-</b>	<b>31</b>	<b>4,060</b>	<b>-</b>	<b>28</b>	<b>3,356</b>
<b>Programme 4: General Administration and Human Resource Management</b>						
Current Expenditure	-	480	745	-	441	625
Compensation of Employees	-	-	320	-	-	298
Use of goods	-	132	364	-	102	274
Currents and other Transfers Govt. Agencies	-	329	-	-	329	-
Other Recurrent	-	19	61	-	10	53
<b>Capital Expenditure</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
Acquisition of Non-Financial Assets	-	-	-	-	-	-
Capital Transfers Govt. Agencies	-	-	-	-	-	-

Economic classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Other Development	-	-	-	-	-	-
<b>Total Programme 4</b>	-	<b>480</b>	<b>745</b>	-	<b>441</b>	<b>625</b>
<b>Total vote</b>	-	<b>5,212</b>	<b>29,114</b>	-	<b>1,981</b>	<b>25,245</b>

## Expenditure analysis by SAGAs

### 1. Social Health Authority/ National Health Insurance Fund

Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)

Economic Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>Gross</b>	<b>94,590</b>	<b>93,072</b>	<b>94,914</b>	<b>79,684</b>	<b>82,165</b>	<b>73,142</b>
AIA	94,590	93,072	94,914	79,684	82,165	73,142
NET	-	-	-	-	-	-
Compensation to Employees	5,083	6,044	5,610	4,862	5,289	5,354
Transfers	-	-	-	-	-	-
Other recurrent	89,507	87,028	89,304	74,822	76,876	67,789
<b>Of which:</b>						
<i>Utilities</i>	15	15	15	15	13	14
<i>Rent &amp; Rates</i>	286	294	467	257	262	441
<i>Insurance</i>	405	417	594	380	347	549
<i>Subsidies</i>	-	-	-	-	-	-
<i>Gratuity</i>	19	19	19	2	2	10
<i>Contracted Guards &amp; Cleaners</i>	123	135	132	98	100	91
<i>Others (Member Benefits &amp; other expenses)</i>	88,658	86,148	88,078	74,071	76,152	66,683

NHIF/SHA faced revenue challenges in FY 2023/24, collecting 23% less than projected. This was due to:

- **Low retention:** Especially in the informal sector, likely due to people choosing to only pay when they need healthcare.
- **Payment challenges:** The shift to a centralized government pay bill made it harder for self-employed members to contribute.
- **Uncertainty around SHA transition:** People were hesitant to join, anticipating changes to contribution amounts.

Despite lower revenue, benefit payouts were high (88% of collected premiums), exceeding the projected ratio. This was partly due to the end of enhanced schemes under the new SHI Act. Operating expenses were lower than budgeted, likely due to government austerity measures and a focus on the transition to SHA.

### 2. National Cancer Institute of Kenya

**Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)**

	Approved Budget Allocation			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>Gross</b>	<b>163</b>	<b>140</b>	<b>200</b>	<b>165</b>	<b>161</b>	<b>215</b>
Net	163	140	200	165	161	215
Compensation to Employees		45	45			3
Transfers						
Other Recurrent						
<b>Of which</b>						
<i>Utilities</i>						
<i>Rent</i>			12			11
<i>Insurance</i>						
<i>Subsidies</i>						
<i>Gratuity</i>						
<i>Contracted Guards Cleaners Services</i>						
<i>Others</i>	163	95	143	160	176	140

The increase in actual expenditure in the FY 2022/23 and FY 2023/24 is attributed to a significant rise in externally mobilized funds from donors and partners by the institution .

### 3. Moi Teaching and Referral Hospital

**Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)**

Economic classification	APPROVED BUDGET			ACTUAL EXPENDITURE		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>GROSS</b>	<b>11,205</b>	<b>11,653</b>	<b>12,774</b>	<b>11,529</b>	<b>11,803</b>	<b>13,256</b>
AIA	3,434	3,605	3,785	3,758	3,755	4,267
Net Exchequer	7,771	8,048	8,989	7,771	8,048	8,989
Compensation of Employees	8,104	8,018	8,989	8,570	8,792	8,989
Other Recurrent			-			-
<b>Of Which</b>						
<i>Utilities</i>	149	167	197	152	166	197
<i>Rent</i>	3.0	1.6	2	1.0	1.6	2
<i>Insurance</i>	326	361	367	314	361	367
<i>Subsidies</i>						
<i>Gratuity</i>	43		17	43		17
<i>Contracted Guars &amp; Cleaners</i>						
<i>Others</i>	2,913	3,075	3,684	3,248	3,226	3,684

During the FY 2022/23 and FY 2023/24 MTRH had positive performance on its AIA. The approved Budget under AIA for FY 2022/23 was Kshs. 3,605 Million and for FY 2023/24 is 3,785 Million, while the Actual performance was for FY 2022/23 is Kshs. 3,755 Million and for FY 2023/24 was Kshs. 4,267 Million respectively. However, these amounts are not fully realized, due to indigent patients, that incur an average amount of Kshs.450

Million that not collectable annually. The other together aspect is the loss which relates to underpayment of medical bills for patients who are members to NHIF where the rebate reimbursed by the Fund based on the existing medical service contract is lower than the actual cost incurred.

#### 4. Kenyatta University Teaching and Referral Hospital

**Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)**

Economic classification	APPROVED BUDGET			ACTUAL EXPENDITURE		
	2021/22	2022/23	2023/2024	2021/22	2022/23	2023/2024
GROSS	4,293	5,429	6,138	4,462	5,511	6,634
AIA	1,700	2,836	3,152	1,869	2,918	3,648
Net Exchequer	2,593	2,593	2,986	2,593	2,593	2,986
Compensation of Employees	2,141	3,020	3,339	2,177	3,215	3,538
Other Recurrent	2,152	2,409	2,799	2,285	2,296	3,096
<b>Of which</b>						
<i>Utilities</i>	154	154	314	156	216	364
<i>Rent</i>	-	-				
<i>Insurance</i>	216	216	312	204	265	307
<i>Subsidies</i>						
<i>Gratuity</i>	220	194	192	220	194	286
<i>Contracted Professional</i>	258	258	198	224	250	212
<i>Others</i>	1,304	1,588	1782	1,481	1,371	1927

Kenyatta University Teaching, Referral, and Research Hospital's (KUTRRH) actual expenditure for the medium term exceeded the approved budget due to the operationalization of additional services. These included the operationalization of new specialized clinics, the opening of additional wards and theatres, and the implementation of key facilities such as the Integrated Molecular Imaging Centre (IMIC) and the CyberKnife technology.

The hospital was not adequately funded in the medium term for personnel emoluments, which led to over-expenditure in this area. This shortfall in personnel funding also impacted the allocation for Operations and Maintenance, as revenue generated through Appropriations-in-Aid (AIA) meant to support hospital operations had to be redirected to cover the personnel emoluments gap.

#### 5. Kenyatta National Hospital (KNH)

**Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)**

Economic Classification	APPROVED BUDGET			ACTUAL EXPENDITURE		
	2021/22	2022/23	2023/24	2021/2022	2022/2023	2023/24
<b>Gross</b>	<b>15,202</b>	<b>18,092</b>	<b>22,374</b>	<b>18,327</b>	<b>18,385</b>	<b>21,226</b>
AIA - Internally Generated Revenue	5,382	7,651	9,853	8,507	7,944	8,756
NET - Exchequer	9,820	10,441	12,521	9,820	10,441	12,469

Compensation to Employees	11,484	12,415	13,927	13,042	12,766	13,866
Other Recurrent	3,718	5,677	8,447	6,556	7,882	9,055
<b>Of which</b>						
<i>Insurance</i>	11	97	12	3	105	12
<i>Utilities</i>	438	395	398	642	574	386
<i>Rent</i>	0	0		0	0	
<i>Contracted Professionals (Guards, Cleaners etc)</i>	121	131	194	103	155	194
<i>Others specify (Clinical and Administrative costs)</i>	3,148	5,054	7,842	5,808	7,048	8,462
<i>Deficit</i>	0	0		-1,271	-2,263	-1,695

During the FY 2023/24 KNH had a negative variance on its actual performance which was attributed to the industrial unrest country wide which lasted for more than 75 days, implementation of the National Referral Policy & System and delayed review & implementation of rental lease agreement.

The Hospital was forced to pay Corporation tax, interest and penalty levied on the Hospital by KRA relating to rental and interest income earned for the period 2015 to 2019 which had been accrued in the FY 2022/23. The Hospital made a provision for bad and doubtful debts owed to the hospital by indigent patients who are accorded medical care services but are unable to settle the medical bills on discharge. Medical service contracts loss which relates to medical bills for patients who are members to NHIF where the rebate reimbursed by the Fund based on the existing medical service contract is lower than the actual bills.

## 6. Kenya Medical Supplies Authority

**Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)**

Economic Classification	Approved Budget			Actual Expenditure		
	2021/2022	2022/23	2023/24	2021/22	2022/23	2023/24
<b>Gross</b>	<b>3,027</b>	<b>3,931</b>	<b>4,452</b>	<b>3,083</b>	<b>6,731</b>	<b>5,157</b>
AIA	2,927	3,811	4,032	2,983	4,671	4,767
NET	100	120	420	100	120	390
Compensation to Employees	1,256	1,276	1,218	1,224	1,209	1,018
Transfers	-			-	1	2
Other Recurrent	1,770	2,656	3,234	1,860	5,523	4,139
<b>Of which</b>						
<i>Utilities</i>	15	25	36	14	23	32
<i>Rent</i>	88	15	14	86	15	11
<i>Insurance</i>	150	179	231	150	179	222

<i>Subsidies</i>	-	-	-	-	-	-
<i>Gratuity</i>	-	-	-	-	-	-
<i>Contracted Guards and Cleaners Services</i>	199	163	344	199	161	330
<i>Others</i>	1,319	2,274	2,609	1,411	5,144	3,544

In the FY 2022/23 and FY23/24 The total expenditure has been reported as kshs. 6,731M & Ksh. 5,157M against a total budget of kshs. kshs. 3,931M &Ksh. 4,452M respectively. this reflecting a budget overrun of 16%. However, the Authority's operating expenses for the period amounted to Ksh. 3,875 M, indicating that it remained within the budget allocation of Ksh. 4,452 M. Further, the Authority incurred accounting losses, including a foreign exchange loss of Ksh. 701 M, an impairment loss of Ksh. 481M, a loss on the disposal of assets amounting to Ksh. 0.18M, and corporation tax of Ksh. 0.71M. This resulted in a cumulative expenditure of Ksh. 5,157 M. These are accounting entries that could not have been anticipated in the budget but had to be recorded.

## 7. National Syndemic Diseases Control Council (NSDCC)

**Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)**

<b>Economic classification</b>	<b>Approved Budget</b>			<b>Actual Budget</b>		
	<b>2021/22</b>	<b>2022/23</b>	<b>2023/24</b>	<b>2021/22</b>	<b>2022/23</b>	<b>2023/24</b>
Gross	714	951	967	747	691	967
AIA	-			-		
Net	714	951	967	747	691	967
Compensation to employees	517	517	494	501	438	435
Transfers						-
Other recurrent	198	434	473	246	253	532
<b><i>Of which</i></b>						-
<i>Insurance</i>	2	45	54	4	5	54
<i>Utilities</i>	4	63	60	10	47	60
<i>Rent</i>	71	73	77	78	72	57
<i>Subsidies</i>			-			-
<i>Gratuity</i>		74	99		74	68
<i>Contracted Professionals (Guards and Cleaners)</i>	6	25	27	13	25	28
<i>Others</i>	116	154	156	141	29	266

The budget for personnel emoluments (PE) was Ksh 494 million, but only Ksh 435 million was spent. This underspending occurred because the organization is understaffed compared to the approved staffing levels. This also affects gratuity payments. The money saved on salaries and gratuity was used to fund other program activities.

## 8. Kenya Medical Research Institute (KEMRI)



**Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)**

Economic Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Gross	2,787	2,966	3,307	2,823	3,047	3307
AIA -	184	184	220	220	240	220
NET - Exchequer	2,603	2,782	3,087	2,603	2,807	3087
Compensation to Employees	2,342	2,342	2,713	2,431	2,768	2769
Other Recurrent	445	623.5	594	867	622	722
<b>Of which</b>						
<i>Insurance</i>	16	16	16	17	15	14
<i>Utilities</i>	110	110	101	112	120	123
<i>Rent &amp; Rates</i>	2	2	2	2	3	5
<i>Contracted Professional (Guards &amp; Cleaners)</i>	64	64	52	55	59	59
<i>Others</i>	252.5	431.5	423	681	440	521

During FY.2023/24 the Institute had an over expenditure of Kshs. 184 M in other Recurrent Expenditure. This was due to non-remittance of Kshs.300M by exchequer.

## 9. Mwai Kibaki Teaching and Referral Hospital

**Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)**

	Approved Allocation			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Gross	1,253	1,318	1,381	1,226	1,266	1,230
AIA	484	523	593	457	471	442
NET	769	795	788	769	795	788
Compensation to Employees	797	876	883	796	876	824
Transfer						
Other Recurrent	407	386	436	389	334	444
<b>Of Which</b>						
<i>Utilities</i>	30	34	41	26	34	38
<i>Rent</i>						
<i>Insurance</i>						
<i>Subsidies</i>						
<i>Gratuity</i>						
<i>Contracted Guards &amp; Cleaners Service</i>	19	22	21	15	22	20
<i>Other Specify.</i>						

During the FY 2023/24 KNH-Mwai Kibaki Hospital had a negative variance on its actual performance which was attributed to the industrial unrest country wide which lasted for more than 75 days.

The Hospital made a provision for bad and doubtful debts owed to the hospital by indigent patients who are accorded medical care services but are unable to settle the medical bills on discharge. Medical service contracts loss which relates to medical bills for patients who are members to NHIF where the rebate reimbursed by the Fund based on the existing medical service contract is lower than the actual bills.

## 10. Kenya Biovax Institute

**Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)**

Economic Classification	Approved Budget Allocation			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>Gross</b>	<b>90.60</b>	<b>150.00</b>	<b>150.00</b>	<b>91.00</b>	<b>70.38</b>	<b>198.07</b>
AIA	-	-	-	0.40	12.05	48.07
NET	90.60	150.00	150.00	90.60	58.33	150.00
Compensation to Employees	-	20.00	82.00	-	11.52	98.55
Transfers	-	-	-	-	-	-
Other Recurrent	-	-	-	-	-	-
<b>Of which</b>						
<i>Utilities</i>	-	-	0.09	-	-	-
<i>Rent</i>	-	-	5.20	-	-	10.23
<i>Insurance</i>	-	-	-	-	-	-
<i>Subsidies</i>	-	-	-	-	-	-
<i>Gratuity</i>	-	-	-	-	-	10.00
<i>Contracted Guards &amp; Cleaners</i>	-	-	1.50	-	-	0.94
<i>Others</i>	-	130.00	61.21	18.71	50.3	93.28

The over absorption in receipts was brought about by Bank Interest income that the Institute received in the second half of the FY. 2023/24 arising from negotiations with its Bankers to invest surplus funds in its bank accounts not immediately in use.

The over expenditure was as result of acceleration of absorption on activities arising from carry overs in the previous two Financial Years,top-up allowances and increase in depreciation in FY.2023/24.

## 11. Kenya Medical Practitioners & Dentists Council

**Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)**

Economic Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
GROSS	840.22	810.46	899.33	836.63	792.94	897.17
AIA	340.22	350.46	389.00	336.63	332.94	388.21

Economic Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
NET	500.00	460.00	510.33	500.00	460.00	508.96
Compensation to Employees	160.28	180.43	205.00	163.09	172.56	202.84
Transfers	-	-	-	-	-	-
Other Recurrent	679.94	630.03	694.33	673.53	620.37	694.33
<b>Of Which</b>	-	-	-	-	-	-
<i>Utilities</i>	2.16	3.50	2.98	2.13	3.18	2.97
<i>Rent</i>	-	5.00	8.90	-	3.97	8.86
<i>Insurance</i>	17.00	21.00	27.50	16.69	18.71	27.43
<i>Subsidies</i>	-	-	-	-	-	-
<i>Gratuity</i>	50.00	25.00	-	47.19	23.35	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	2.60	2.35	3.96	2.50	2.33	3.95
<i>Others</i>	608.19	573.18	651.00	605.02	568.84	651.11

## 12. Kenya Medical Training College

Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)

Economic Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Gross	7,179	7,859	9,263	8,378	7,862	9,073
AIA	3,640	3,640	4,240	4,806	4,348	4,050
NET	3,539	4,219	5,023	3,572	3,514	5,023
Compensation to Employees	4,279	4,315	4,719	4,118	4,303	4,636
Transfers	-	-	-	-	-	-
Other Recurrent	2,900	3,544	4,544	4,260	3,559	4,437
<b>Of Which</b>						
<i>Utilities</i>	164	160	150	154	156	138
<i>Rent</i>	4	4	4	3	4	3
<i>Insurance</i>	700	650	660	403	605	600
<i>Subsidies</i>	-	-	-	-	-	-
<i>Gratuity</i>	65	120	80	33	114	75
<i>Contracted Guards &amp; Cleaners Services</i>	350	350	367	307	345	355
<i>Others Specify-</i>	1,617	2,260	3,283	3,360	2,335	3,266

The actual AIA grew substantially in relation to the budgeted amount for FY 2021/22 because of the exogenous factors occasioned by closure of the College due to COVID-19 pandemic and the resumption of studies in January 2021. This led to double sessions that is the classes that were to finish in different semesters all came to finish at the same time and also another intake for the academic year joined in March 2021. This is projected to normalize in the subsequent years as the recurring programmers have normalized.

## 13. Nursing Council of Kenya

Economic Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24

Gross	425	441	723	414	441	723
AIA	346	391	538	346	391	538
NET	79	50	185	68	50	185
Compensation to Employees	109	103	117	111	103	113
Transfers						
Other Recurrent	316	337	607	303	337	611
<b>Of Which</b>						
<i>Utilities</i>	17	27	43	17	27	46
<i>Rent</i>	-	-	-	-	-	-
<i>Insurance</i>	13	19	22	11	19	21
<i>Subsidies</i>	-	-	-	-	-	-
<i>Gratuity</i>	12	14	15	12	13	13
<i>Contracted Guards &amp; Cleaners Services</i>	3	3	4	2	3	4
<i>Others Specify</i>	272	275	523	260	275	527

#### 14. Kenya Nuclear Regulatory Authority (KNRA)

Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)

Economic Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Gross	241	285	274	254	285	265
AIA	100	140	100	119	140	91
NET	141	145	174	135	145	174
Compensation to Employees	22	22	60	18	30	63
Transfers						
Other Recurrent	219	263	214	236	255	202
<b>Of Which</b>						
<i>Utilities</i>	6	7	6	5	6	4
<i>Rent</i>	21	22	19	16	16	18
<i>Insurance</i>	2	3	4	1	2	2
<i>Subsidies</i>	-	-	-	-	-	-
<i>Gratuity</i>	-	-	-	-	-	-
<i>Contracted Guards &amp; Cleaners Services</i>	5	22	7	5	10	9
<i>Others Specify</i>	185	209	178	209	221	170

#### 15. Pharmacy and Poisons Board

Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)

Economic Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>Gross</b>	<b>1,190</b>	<b>1,372</b>	<b>1,610</b>	<b>1,759</b>	<b>1,692</b>	<b>1,353</b>
AIA	1,190	1,372	1,610	1,759	1,692	1,353
NET	-	-	-	-	-	-
Compensation to Employees	115	120	140	81	95	105
Transfers	-	-	-	-	-	-

Other Recurrent	1,075	1,252	1,470	1,678	1,598	1,248
<b>Of Which</b>	-	-	-	-	-	-
<i>Utilities</i>	10	12	8	5	7	8
<i>Rent</i>	10	10	10	8	16	4
<i>Insurance</i>	42	57	55	46	46	48
<i>Subsidies</i>	-	-	-	-	-	-
<i>Gratuity</i>	-	-	-	-	-	-
<i>Contracted Guards &amp; Cleaners Services</i>	67	44	64	67	47	24
<i>Others Specify</i>	946	1,129	1,333	1,552	1,482	1,164

## 16. Kenya Institute of Primate Research

Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)

Economic Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Gross	-	73.80	273.80	-	73.80	273.80
AIA	-	-	-	-	-	-
NET	-	73.80	273.80	-	73.80	273.80
Compensation to Employees	-	-	-	-	-	-
Transfers	-	-	-	-	-	-
Other Recurrent	-	73.80	273.80	-	73.80	273.80
<b>Of Which</b>						
<i>Utilities</i>	-	7.90	7.90	-	7.90	7.90
<i>Rent</i>	-	-	-	-	-	-
<i>Insurance</i>	-	-	44.00	-	-	44.00
<i>Subsidies</i>	-	-	-	-	-	-
<i>Gratuity</i>	-	-	-	-	-	-
<i>Contracted Guards &amp; Cleaners Services</i>	-	-	12.00	-	-	12.00
<i>Others Specify-</i>	-	65.90	209.90	-	65.90	209.90

## 17. Kenya Health Professions Oversight Authority

Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)

Economic Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Gross	-	-	65.56	-	-	65.56
AIA	-	-	15.00	-	-	15.00
NET	-	-	50.56	-	-	50.56
Compensation to Employees	-	-	3.63	-	-	3.63
Transfers	-	-	-	-	-	-
Other Recurrent	-	-	61.93	-	-	61.93
<b>Of Which</b>						
<i>Utilities</i>	-	-	0.76	-	-	0.76
<i>Rent</i>	-	-	2.70	-	-	2.70
<i>Insurance</i>	-	-	-	-	-	-
<i>Subsidies</i>	-	-	-	-	-	-
<i>Gratuity</i>	-	-	-	-	-	-

Economic Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<i>Contracted Guards &amp; Cleaners Services</i>	-	-	1.08	-	-	1.08
<i>Others Specify</i>	-	-	57.40	-	-	57.40

## 18. Clinical Officers Council

**Table 2.6: Analysis of SAGAs Recurrent Budget Vs Actual Expenditure (KSh Million)**

Economic Classification	Approved Budget			Actual Expenditure		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Gross	125.00	111.31	182.28	80.90	118.41	180.80
AIA	125.00	111.31	132.28	80.90	118.41	140.79
NET	0.00	0.00	50.00	0.00	0.00	40.01
Compensation to Employees	11.37	15.58	19.80	12.96	8.39	8.92
Transfers	-	-	-	-	-	-
Other Recurrent	113.63	95.73	162.48	67.94	110.02	171.88
Of Which						
Utilities	4.96	4.80	5.00	4.00	4.00	4.20
Rent	-	-	-	-	-	-
Insurance	0.60	0.60	0.80	0.55	0.50	0.57
Subsidies	-	-	-	-	-	-
Gratuity	-	-	-	-	-	-
Contracted Guards & Cleaners Services	-	-	-	-	-	-
Others Specify	108.07	90.33	156.68	63.39	105.52	167.11

**2.3. Analysis of performance of capital projects for the FY 2021/22- 2023/24**

## 2.7 ANALYSIS OF PERFORMANCE OF CAPITAL PROJECTS FY 2021/21 - 2023/24 (KSHS MILLION)

No.	Project Code & Project Title	Total Est. Cost of Project or Contract Value (a)	Est Cost of the Project (Financing)		Timeline		FY 2021/22				FY 2022/23				FY 2023/24				Remarks		
			GOK	Foreign Financed	Start Date	Exp Completion Date	Approved Budget		Actual Cumulative Exp up to 30th June 2022 (%)	Completion stage as at 30th June 2022 (%)	Approved Budget		Actual Cumulative Exp up to 30th June 2023 (%)	Outstanding Balance as at 30th June 2023 (%)	Completion stage as at 30th June 2023 (%)	Approved Budget		Actual Cumulative Exp up to 30th June 2024 (%)		Outstanding Balance as at 30th June 2024 (%)	Completion stage as at 30th June 2024 (%)
							GoK	Foreign			GoK	Foreign				GoK	Foreign				
			KSh Million				KSh Million				KSh Million										
1	1082100100 KNH Burns and Paediatrics Centre	5,459.0	3,482.0	1,977.0	03/03/2018	20/08/2026	250	928	1,334.24	24	540.0	502.0	1,829.2	3,629.8	34	701	1242	2218	3241	41	Delayed payment from the donor resulting in withdrawal of the contractor from the site. KNH has engaged the National Treasury to devise a mechanism to unlock the stalemate.
2	1082100200 National Commodities Warehousing Center (KEMSA)	3,977.9	3,004.8	973.1	26/01/2018	30/9/2023	333.1		3,667.10	92	310.0	-	3,841.1	136.8	97	300	0	3996			The new supply chain centre will ensure that medical supplies are handled effectively and efficiently country wide. This will improve access to essential medicines by ensuring regular, shorter supply chains and continuous availability of medicines in the public health facilities.
3	1082100300 East Africa's Centre of Excellence for Skills & Tertiary Education	3,674.0	334.0	3,340.0	2/18/16	18/02/2024	200	960	1,866.40	51	118.0	1,082.0	2,075.4	1,598.6	56	105	520	2,485	1,189	68	The project is on establishment of a regional (EA) centre of excellence in Urology and Nephrology
4	1082100500 Managed Equipment Service-Hire of Medical Equipment for 98 Hospital	79,502.0	79,502.0		10/07/2013	10/07/2026	7205	0	52,672.60	66	3,375.0	-	56,047.6	23,454.4	70	1,000	-	57,048	22,454	72	Under the MES project, 5 contractors were contracted to provide specialized services for theatre, renal and radiology. The contracts are expiring on varied dates ranging from December 2022 and May 2023. The survey of MES equipment conducted between May-June 2022 recommended for a 3year extension of the MES contract
5	1082100600 Free Maternity Program (Strategic Intervention)	70,088.0	70,088.0		10/07/2013	10/07/2026	4098		38,537.25	55	4,098.0		42,635.3	27,452.8	61	4,098	-	44,635	25,453	64	Funds disbursed to NHIF to facilitate Linda mama Programme as strategic intervention.
6	1082100700 Modernize Wards & Staff house- Mathari Teaching & Referral Hospital	1,650.0	1,650.0		30/07/2013	30/06/2025	300		236.40	14	110.0		317.9	1,332.1	19	550	-	486	1,164	29	The project has renovated 4 wards, equipped the kitchen, created a new ablution block, pathways and loading and offloading bays
7	1082100800 Construct a Wall, renovation & Procure Equipment at National Spinal Injury Hospital	791.3	791.3		30/07/2014	30/06/2026	100		72.50	9	53.0		125.5	665.8	16	103	-	212	580	27	The project is on-going for procurement of Medical Equipment to support spine services by reducing the waiting time for the patients to access spine surgeries and reduce the average length of stay in the hospital. Spine rehabilitation process include reintegrating the patient back to the community of which the procurement of the van will be done to enhance this.
8	1082100900 Procurement of Equipment at the	8,396.3	8,396.3		07/02/2015	07/02/2026	600		1,540.90	18	619.0		2,140.9	6,255.4	25	920		2,981	5,415	36	The program continues to provide access to safe blood and blood components across the country in the year 2022/23. The program had a financial gap of 1.4B.



No.	Project Code & Project Title	Total Est. Cost of Project or Contract Value (a)	Est Cost of the Project (Financing)		Timeline		FY 2021/22			FY 2022/23				FY 2023/24				Remarks			
			GOK	Foreign Financed	Start Date	Exp Completion Date	Approved Budget			Approved Budget				Approved Budget							
							GoK	Foreign	Actual Cumulative Exp up to 30th June 2022 (%)	Go K	Foreign	Actual Cumulative Exp up to 30th June 2023	Outstanding Balance as at 30th June 2023	Completion stage as at 30th June 2023 (%)	Go K	Foreign	Actual Cumulative Exp up to 30th June 2024		Outstanding Balance as at 30th June 2024	Completion stage as at 30th June 2024 (%)	
KSh Million			KSh Million			KSh Million															
	National Blood Transfusion Services																				
9	1082101000 Establishing of Regional Cancer Centres	8,000.0	8,000.0		07/01/2016	30/06/2026	350.00		994.40	12	383.0	1,377.4	6,622.6	17	155	-	1,527	6,473	19	The project for procurement of chemotherapy drugs distributed to regional cancer treatment centres ;Garissa, Mombasa and Nakuru, which were completed in June 2021. Cu	
10	1082101100 Cancer & Chronic Disease Management Centre – MTRH	1,843.0	1,393.0	450.0	07/01/2013	07/06/2026	104.00		1,192.00	65	93.0	1,267.5	575.5	69	102	0	1319	525	72	To procure two Radiotherapy Machines (2 Linear Accelerators with 3D Conformational Treatment Unit, CT Simulator, Treatment Plan and all other accessories)	
11	1082101200 Construction and Equipping Children Hospital- MTRH	1,080.0	830.0	250.0	01/01/2014	30/06/2026	120.00		436.30	40	93.0	498.3	581.7	46	75	0	573	507	53	To equip the children hospital with medical equipment for the Paediatric Burns Unit, ICU, HDU and Theatre	
12	1082101300 Equipping Maternity Unit(Mother & Baby Unit)	350.0	350.0		10/01/2019	30/06/2026	30.00		50.00	14	45.8	80.5	269.5	23	139	0	150	200	43	To equip the maternity unit with equipment for the delivery rooms, maternity theatre, Maternity ICU & HDU and Equipment for the neonatal unit (Nursery).	
13	1082101400 Expansion and Equipping of ICU- MTRH	484.0	484.0		01/07/2015	06/06/2025	16.00		214.00	44	52.3	249.0	235.0	51	70	-	284	200	59	To equip the unit with ICU & HDU beds complete with cardiac monitors, defibrillators, suction machines and syringe pumps	
14	1082101500 Construction and upgrading of KEMRI Laboratories (Nairobi, Kwale,Busia Kirinyaga)	635.0	635.0		01/07/2016	01/07/2026	55.10		180.37	28	57.0	232.4	402.6	37	200	0	282	353	44	Funds for upgrading research laboratories out of which thirty (30) labs are accredited. Forty-seven (47) labs require upgrading to international standards in order to provide reliable quality data and enhance biosecurity levels.	
15	1082101600 Rollout of Universal Health Coverage	100,000.0	100,000.0		10/07/2018	10/07/2026	7,765.00		26,879.72	27	6,412.8	33,292.5	66,707.5	33	10,100	-	38,730	61,270	39	Funds geared for universal healthcare indexing, and improving accessibility and affordability of healthcare in the country	
16	1082101700 Construction of a Cancer Center at Kisii Level 5 Hospital	2,280.0	280.0	2,000.0	10/08/2016	10/08/2024	50.00	530.00	110.87	5	100.0	195.0	288.7	1,991.3	13	50	400	634	1,646	28	The project has been delayed by the requirement under the loan terms for MoH to get a no objection to implementation processes which take long to obtain. Currently designs have been completed and approved and construction has been initiated
17	1082101800 Strengthening of Cancer Management at KNH	2,000.0	2,000.0		23/8/2018	09/06/2025	140.00		371.24	19	100.0	471.2	1,528.8	24	300	0	521	1479	261	Phase one of the project is completed, equipping and operationalization of phase 1 ongoing	
18	1082101900 Research and Development - KEMRI	6,400.0	6,400.0		01/07/2014	01/07/2025	151.00		1,208.10	19	292.0	1,410.8	4,989.2	22	400	0	1,561	4,839	24	This project aims at providing funding for conducting research to address National Health priority areas including COVID-19,	

No.	Project Code & Project Title	Total Est. Cost of Project or Contract Value (a)	Est Cost of the Project (Financing)		Timeline		FY 2021/22			FY 2022/23					FY 2023/24				Remarks		
			GOK	Foreign Financed	Start Date	Exp Completion Date	Approved Budget			Approved Budget					Approved Budget						
							GoK	Foreign	Actual Cumulative Exp up to 30th June 2022	Completion stage as at 30th June 2022 (%)	Go K	Foreign	Actual Cumulative Exp up to 30th June 2023	Outstanding Balance as at 30th June 2023	Completion stage as at 30th June 2023 (%)	Go K	Foreign	Actual Cumulative Exp up to 30th June 2024		Outstanding Balance as at 30th June 2024	Completion stage as at 30th June 2024 (%)
KSh Million			KSh Million			KSh Million															
																				non-communicable diseases, drug discovery and vaccine development, neglected diseases and emerging and re-emerging diseases	
19	1082102000 Integrated Molecular Imaging Centre	2,332.0	2,332.0		07/01/2020	06/01/2024	-	-	2,032.00	0	250.0	-	2,132.0	200.0	91	150	0	2132	200	91	Funds were utilized to construct and equip the Integrated Molecular Imaging Centre to offer specialized diagnostic and treatment services to Cancer Patients
20	1082102100 renovation & Improvement for Gatundu Level 5 Hospital	770.0	770.0		07/01/2020	30/06/2026	276.00		376.00	49	276.0		376.0	394.0	49	74	0	400	370	52	Renovation and Improvement of facilities was completed. Construction of the second tower comprising an Accident & Emergency Center, Outpatient Clinics, Pharmacy, Radiology, Plaster Room, Laboratory and wards is in progress
21	1082102200 Infrastructural Support to Kigumo Hospital	400.0	400.0		07/01/2020	30/06/2026	100.00		100.00	25	100.0	-	150.0	250.0	38	103	0	222	178	56	Funds for upgrading Kigumo Hospital
22	1082102300 Procurement of Cyberknife Radiotherapy Equipment for KUTRRH	685.0	685.0		07/01/2021	30/06/2024	350.00		350.00	51	300.0		650.0	35.0	95	150	0	400	285	58	Funds to procure a stereotactic radiosurgery treatment technology for patients with inoperable/tumours in the Kenya
23	1082102400- Refurbishment/Renovation of Infrastructure -KNH	8,059.0	8,059.0		01/01/2022	30/06/2027	150.00		150.00	2	-	-	150.0	7,909.0	2	1,100	-	1,200	6,859	15	Funds for renovation and rehabilitation of Tower Block; civil, electrical, replacement of plumbing system and installation of the solar system, fresh piping for medical gases, mechanical ventilation, structured cabling, power backup, and power protection system, replacement of old and obsolete service lifts and replacement of obsolete equipment and working tools.
24	1082102500- Expansion of Comprehensive Cancer Centre - KUTRRH	300.0	300.0		01/01/2022	30/06/2022	100.00		100.00	33	100.0		100.0	200.0	33	100		150	150	50	The oncology extension building will have additional beds, doctors and nurses offices and patient consultation rooms to meet the demand for oncology services in the hospital. Construction of the Center is ongoing
25	1082102700 Emergency Medical Treatment Fund	3,000.0	3,000.0		01/07/2023	06/30/2026	-	-	-	0	50.0	-	-	3,000.0	0	100	0	0	3000	0	Seed money to support the Social Health Authority
26	1082103000 Digital Health Platform	10,000.0	10,000.0		01/07/2023	06/30/2026	-	-	-	0	-	-	-	10,000.0	0	180	0	51	9949	1	Funds for DHP for purchase of ICT and software to program UHC
27	1082103100 Procurement of Family Planning &	12,215.0	12,215.0		13/08/2014	13/08/2026	863		1,488.00	12	428.0		1,916.0	10,299.0	16	500	-	1,916	10,299	16	The programme aims to ensure the availability of family planning commodities of reproductive age using a modern contraception for prevention of

No.	Project Code & Project Title	Total Est. Cost of Project or Contract Value (a)	Est Cost of the Project (Financing)		Timeline		FY 2021/22			FY 2022/23					FY 2023/24				Remarks		
			GOK	Foreign Financed	Start Date	Exp Completion Date	Approved Budget			Approved Budget					Approved Budget						
							GoK	Foreign	Actual Cumulative Exp up to 30th June 2022	Completion stage as at 30th June 2022 (%)	Go K	Foreign	Actual Cumulative Exp up to 30th June 2023	Outstanding Balance as at 30th June 2023	Completion stage as at 30th June 2023 (%)	Go K	Foreign	Actual Cumulative Exp up to 30th June 2024		Outstanding Balance as at 30th June 2024	Completion stage as at 30th June 2024 (%)
KSh Million			KSh Million			KSh Million															
	Reproductive Health Commodities																			unplanned pregnancies. In the FY 2021/22, 50% of the funds were disbursed.	
28	1082103400 Transforming Health Systems for Universal care Project	25,290.0	-	25,290.0	15/09/2016	30/06/2024	-	4,459.00	24,340.00	96	-	500.0	24,491.8	798.2	97	0				The project ended, it supported all counties in the health systems strengthening, procurement of family planning commodities and capacity building having an absorption of 81%	
29	1082103500 Beyond Zero Campaign-NACC	566.0	566.0		06/01/2016	30/06/2023	49.90		179.70	32	39.0		218.7	347.3	39	26	0	245	321	43	Funds integrated the Kenya HIV Situation Room and Maisha Digital Platform to enhance data quality, efficiency, and accountability in HIV response and in the health sector.
30	1082103600 Kenya COVID-19 Emergency Response Project	15,240.0	3,000.0	12,240.0	01/02/2020	30/06/2024	400.00	5,632.00	2,983.00	20	200.0	2,501.0	4,764.4	10,475.7	31	0	2444	6444	8796	42	Funds to Prevent, detect and respond to COVID-19 and strengthen national systems for public health emergency preparedness having absorbed only 26.3% of the funds
31	1082103800 (Vaccines and Immunizations)	61,487.0	61,487.0		02/07/2016	02/07/2028	1300		7,690.80	13	1,708.0	1,800.0	7,690.8	53,796.2	13	2,000	2,600	8,941	52,546	15	This programme aims to improve the immunization coverage of children by procuring, distributing, maintenance of the quality chain equipment and vaccines commodities across the country. In FY 2021/21, all the funds were fully utilized
32	1082103900 Supply of Medical Equipment and Associated Services	4,118.0		4,118.0	01/01/2021	30/06/2025		2,398.00	3,033.26	74		1,000.0	3,920.3	197.7	95		400	4,095	23	99	Funds towards rehabilitation of the maternal and baby care units at MTRH and to support COVID-19 Emergency Response having consumed 71% of the allocated funds.
34	1082104000 GESDeK COVID-19 Response Project	3,860.0		3,860.0	01/01/2021	30/06/2025	-	975.00	1,093.20	28	-	1,414.0	1,722.7	2,137.3	45		45	1768	2092	46	Funds geared towards control and prevention of COVID-19 in the country having consumed 28.3% of the funds
35	1082104100 Special Global Fund HIV Grant NFM3-(GLOBAL FUND)	38,120.0	25,000.0	13,120.0	01/01/2018	30/06/2027	-	25.70	12,945.70	99	-	-	12,945.7	25,174.3	34	3100	675	13,709	24,411	36	The programme aims to increase access of ARVs and awareness creation to prevent spread of HIV/AIDS. The Main grant activities ended in June, 2021 with closure processes by DEC 2021
36	1082104300 Primary Health Care in the Devolved Context	1,735.0		1,735.0	01/07/2021	30/06/2026	-	434.00	326.00	19	495.0	1,102.6	1,233.1	501.9	71		767	1705	30	98	Funds to cater for level II and III public hospitals and National Level activities having consumed 75% of the allocated funds
37	1082104400 Human Vaccine Production (KBVI)	6,400.0	6,400.0		01/01/2021	30/06/2026	400.00	-	400.00	6	-	-	400.0	6,000.0	6	150		550	5850	9	Funds for refurbishment and operationalization of the BIOVAX warehouse in Embakasi
38	1082104500 Upgrading of Maternal & New Born Units Project Vamed	3,185.0	-	3,185.0	07/07/2022	30/06/2025		-	3,185.00	0		-	-	3,185.0	0		1200	1,147	2,038	36	Ongoing Project to support, maternal and new born units across the country

No.	Project Code & Project Title	Total Est. Cost of Project or Contract Value (a)	Est Cost of the Project (Financing)		Timeline		FY 2021/22				FY 2022/23				FY 2023/24				Remarks		
			GOK	Foreign Financed	Start Date	Exp Completion Date	Approved Budget			Approved Budget			Approved Budget								
							GoK	Foreign	Actual Cumulative Exp up to 30th June 2022 (%)	Go K	Foreign	Actual Cumulative Exp up to 30th June 2023	Outstanding Balance as at 30th June 2023	Completion stage as at 30th June 2023 (%)	Go K	Foreign	Actual Cumulative Exp up to 30th June 2024	Outstanding Balance as at 30th June 2024		Completion stage as at 30th June 2024 (%)	
KSh Million			KSh Million			KSh Million															
39	1082104600 Support for Health Sector to Combat COVID -19 pandemic- BADEA	79.5		79.5	01/07/2023	6/30/2024		-	-	0	-	-	-	79.5		0	80	68	12	85	The project ended.
40	1082104700 EA's Centres of Excellence for Skills and tertiary education in Biosciences II	3,200.0	-	3,200.0	07/01/2023	6-30-2025			-	-			3,200.0			10	2	3,198	0		The project is for equipping the EAKI complex
41	1082104800 GoK/ UNFPA County Programmes	3,500.0		3,500.0	07/01/2021	30/06/2027	-	1,096.00	1,100.00	31	-	800.0	1,100.0	2,400.0	31	10	1,104	2,396	32		Funds to support procurement of family planning commodities in the country
42	1082104900 Integrated Reproductive Health Programme	3,550.0	-	3,550.0	01/07/2023	6/30/2026			-	0	-	-	-	3,550.0	0	0	10	-	3,550	0	Ongoing project to support family planning
43	1082105000 Upgrading of Children Ward - Kibugua level 3	500.0	500.0	-	07/01/2023	30/06/2026	-	-	-	0	-	-	-	-	0	150		26	474	5	Funds to upgrade the children hospital at Kibugua
44	1082105100 Upgrading and Equipping of Maternal and New born Ward Endebeess Hospital	500.0	500.0	-	07/01/2023	30/06/2026	-	-	-	0	-	-	-	-	0	100	0	38	463	8	Funds to support maternal and newborn ward in Endebeess
45	1082105200 Construction of Private Wing Inpatient Complex-MTRH	500.0	500.0	-	07/01/2023	30/6/2027							500.0			100		25	475	5	Ongoing project
46	1082105300 Procurement of Specialized Medical equipment-MTRH	500.0	500.0	-	07/01/2023	30/6/2028							500.0			75		25	475	5	Ongoing project
48	1080105500 Supply of Medical Supplies and Commodities	500.0	500.0	-	02/07/2023	06/30/2027										500		500	-	100	Project ended
49	1082105600 upgrading and Equipping of Lusigetti Hospital Kikuyu	100.0	100.0		01/07/2023	30/06/2024										28		-	100	0	Project is yet to start
50	1080105700 Construction of Ugenya Hospital	60.0	60.0		01/07/2023	30/06/2025										60		60	-	100	Project ended
51	1082105800 Construction of Uriri Hospital	40.0	40.0		01/07/2023	30/06/2025										40		24	16	60	Ongoing project
52	1082105200 Customized	60.0	-	60.0	07/01/2020	30/06/2024		40.00	-	0		100.0	28.2	31.8	47		40	52	-8	87	Funds were to procure ten Customized Ambulances for COVID-19 Response. To

No.	Project Code & Project Title	Total Est. Cost of Project or Contract Value (a)	Est Cost of the Project (Financing)		Timeline		FY 2021/22				FY 2022/23				FY 2023/24				Remarks			
			GOK	Foreign Financed	Start Date	Exp Completion Date	Approved Budget			Approved Budget				Approved Budget								
							GoK	Foreign	Actual Cumulative Exp up to 30th June 2022	Completion stage as at 30th June 2022 (%)	Go K	Foreign	Actual Cumulative Exp up to 30th June 2023	Outstanding Balance as at 30th June 2023	Completion stage as at 30th June 2023 (%)	Go K	Foreign	Actual Cumulative Exp up to 30th June 2024		Outstanding Balance as at 30th June 2024	Completion stage as at 30th June 2024 (%)	
KSh Million			KSh Million			KSh Million																
	Ambulances For COVID - 19 Response																		be considered in FY 2022/23 Supplementary Estimates			
54	1082103300 Situation Room for Real Time Data & Information on HIV & AIDS - NACC	891.0	891.0		17/09/2016	30/06/2026	75.60		272.88	31	75.0		302.9	588.1	34	28		303	588	34	eMTCT is a vital component for reducing paediatric HIV cases and elimination of mother to child transmission of HIV, the prevention of mother-to-child transmission of HIV program initiated 48,382 HIV-positive mothers into ART to prevent the vertical transmission of HIV to unborn babies.	
55	1081110200 Support to Universal Health Care in the Devolved system in Kenya	3,192.0		3,192.0	02/01/2017	30/06/2021	-	-		0	-	-		3,192.0	0							The project was completed
56	1082111900 PHG-Case Study on Integrated Delivery of Selected NCD-MTRH	250.0		250.0	01/10/2019	30/06/2022		57.90	250.00	100		57.9	250.0	-	100							The project is complete to carry out research on 4 NCDs (diabetes, cervical cancer, breast cancer and hypertension) in two counties (Busia & Trans Nzoia)
57	1081120100 Monitoring and Evaluation of KIDDP Projects	10.0	10.0		01/01/2021	30/6/2021	-	-		0	-	-		10.0	0							The project was completed
58	108119301 Special Global Fund HIV Grant NFM3-NASCOP	28,441.0	25,906.0	2,535.0	07/01/2021	30/06/2024	1,200.00	510.00	716.70	3	2,315.3	1,015.0	2,916.5	25,524.5	10							The programme aims to increase access of ARVs and awareness creation to prevent spread of HIV/AIDS having an absorption of 41.9%. The GoK component was not disbursed partially due to exchequer issues
59	1081119400 Special Global Fund Malaria Grant NFM3 - DOMC	12,021.0	6,400.0	5,621.0	07/01/2021	30/06/2025	800.00	837.00	1,386.00	12	675.0	1,025.0	2,778.0	9,243.0	23							Programme seeks interventions towards control of Malaria scourge by enhancing availability of diagnosis and treatment services, and investment in prevention at 84.6% absorption level. The GoK allocation for contracted preventive services through KEMSA and they are ongoing
60	1081119800 9TH GoK/ UNFPA County Programmes	3,500.0		3,500.0	07/01/2021	30/06/2024	-	1,096.00	1,100.00	31	-	800.0	1,100.0	2,400.0	31							Funds to support procurement of family planning commodities in the country
61	10811200 Supply of Medical Equipment for Covid - 19	1,000.0		1,000.0	01/01/2022	30/06/2022	-	1,000.00	1,000.00	100	-	1,000.0	1,000.0	-	100							Funds to support COVID 19 interventions that were transferred to Crown Agents
62	1081120200 Infrastructure Support to Diff Hospital in Wajir	50.0	20.0		07/01/2021	30/6/2022	50.00		-	0	19.0		19.0	31.0	38							Funds for infrastructural support at Diff Hospital in Wajir. These funds were not disbursed in the FY 2021.22 due to exchequer issues
63	1081120400 Nueropsychiatric	10,000.0	10,000.0		01/01/2021	30/06/2025	400.00	-	400.00	4	79.2	-	400.0	9,600.0	4							Construction of a new mental health hospital to offer specialized psychiatry services and training for mental health

No.	Project Code & Project Title	Total Est. Cost of Project or Contract Value (a)	Est Cost of the Project (Financing)		Timeline		FY 2021/22			FY 2022/23					FY 2023/24				Remarks		
			GOK	Foreign Financed	Start Date	Exp Completion Date	Approved Budget			Approved Budget					Approved Budget						
							GoK	Foreign	Actual Cumulative Exp up to 30th June 2022	Completion stage as at 30th June 2022 (%)	Go K	Foreign	Actual Cumulative Exp up to 30th June 2023	Outstanding Balance as at 30th June 2023	Completion stage as at 30th June 2023 (%)	Go K	Foreign	Actual Cumulative Exp up to 30th June 2024		Outstanding Balance as at 30th June 2024	Completion stage as at 30th June 2024 (%)
KSh Million			KSh Million			KSh Million															
	National Teaching & Referral Hospital																				
64	1081205000- Construction of New Level III Hospitals	3,100.0	3,100.0		01/01/2021	30/06/2025	500.00	-	500.00	16		-	500.0	2,600.0	16						Funds to undertake the Presidential Directive of constructing 50 new level III hospitals in line with third financial stimulus programme targeting strategic interventions
65	1081120600 Infrastructure Support to Narok Hospital	200.0	200.0		01/01/2022	30/06/2022	200.00		200.00	100			200.0	-	100						Funds to improve infrastructural support at Narok Hospital
66	1081120900- Construction and equipping of children Hospital at KUTRRH	220.0	220.0	-	01/07/2022	30/06/2023	-	-	-	0	120.0		100.0	120.0	45						
67	1081121100- Infrastructure Support to Khwisero Level 4 Hospital - Khwisero	50.0	50.0	-	01/07/2022	30/06/2023					50.0		50.0	-	100						The oncology extension building will have additional beds, doctors and nurses offices and patient consultation rooms to meet the demand for oncology services in the hospital. Construction of the Center is ongoing
68	1081121200- Framework for return of Assets from Crime & Corruption - Kenya (FRACCK)	420.4	-	420.4	01/07/2022	30/06/2023	-		-	0	420.4		-	420.4	0						The oncology extension building will have additional beds, doctors and nurses offices and patient consultation rooms to meet the demand for oncology services in the hospital. Construction of the Center is ongoing
69	1081121300- Technical Assistance to finance support for health sector to combat Covid 19	50.0	-	50.0	01/07/2022	30/06/2023	-		-	0	-	50.0	-	50.0	0						The oncology extension building will have additional beds, doctors and nurses offices and patient consultation rooms to meet the demand for oncology services in the hospital. Construction of the Center is ongoing
70	1081121400-Health Infrastructure services	500.0	500.0		01/07/2022	30/06/2023			-	0	500.0		150.2	349.8	30						The oncology extension building will have additional beds, doctors and nurses offices and patient consultation rooms to meet the demand for oncology services in the hospital. Construction of the Center is ongoing
71	1081121500-Health Infrastructure services	500.0	500.0		01/07/2022	30/06/2023			-	0	500.0		500.0	-	100						The oncology extension building will have additional beds, doctors and nurses offices and patient consultation rooms to meet the demand for oncology services in the hospital. Construction of the Center is ongoing

State Department for Public Health and Professional Standards

TABLE 2.7: ANALYSIS OF PERFORMANCE OF CAPITAL PROJECTS FOR THE FY 2021/22 – 2023/24

Project Code & Project Title	Timeline					FY 2021/22				FY 2022/23				FY 2023/24				Remarks
	Estimated Cost of the Project (Financing)					Approved Budget				Approved Budget				Approved Budget				
	Total Estimated Cost of Project	GOK	Foreign	Start Date	Estimated Completion Date	GOK	Foreign	Cumulative Expenditure as at 30th June, 2022	Completion Status as at 30th June 2022 %	GOK	Foreign	Cumulative Expenditure as at 30th June, 2023	Completion Status as at 30th June 2023 %	GOK	Foreign	Cumulative Expenditure as at 30th June, 2024	Completion Status as at 30th June 2024 %	
1083100100 Dietetics Services Improvement.	6,174	6,174	-	7/11/2011	6/30/26	80.00	-	26.70	0.43	60.00	-	43.70	0.71	100.00	-	500	8.10	The State Department is implementing several nutrition interventions with an aim of eradicating malnutrition in all its form as captured in the BETA
1083100400 Procurement of Anti TB Drugs Not covered under Global fund TB Program	10,678	10,678	-	8/13/14	6/30/30	200.00	-	878.00	8.22	154.00	-	1,032.00	9.66	300.00	-	1,478	13.84	The State Department is in working towards eradicating TB as per the UNHLM declaration through investment in TB prevention therapy medication and diagnostics commodities.
1083101600 Special Global Fund Malaria Grant NFM3 - DOMC	12,021	6,400	5,621	7/1/2021	6/30/24	800.00	837.00	1,386.00	11.53	675.00	1,025.00	2,778.00	23.11	542.00	1,500.00	4,522	37.62	GOK allocation is for procurement of Malaria commodities not met by Global Fund
1083101701 Special Global Fund	2,998	-	2,998	7/1/2021	6/30/26	-	1,060.00	847.00	28.25	-	874.71	1,247.48	41.61	-	889.1	1,650	55.04	The funding will cover Gaps for procurement of

Project Code & Project Title	Timeline					FY 2021/22				FY 2022/23				FY 2023/24				Remarks
	Estimated Cost of the Project (Financing)					Approved Budget				Approved Budget				Approved Budget				
	Total Estimated Cost of Project	GOK	Foreign	Start Date	Estimated Completion Date	GOK	Foreign	Cumulative Expenditure as at 30th June, 2022	Completion Status as at 30th June 2022 %	GOK	Foreign	Cumulative Expenditure as at 30th June, 2023	Completion Status as at 30th June 2023 %	GOK	Foreign	Cumulative Expenditure as at 30th June, 2024	Completion Status as at 30th June 2024 %	
TB Grant NFM3.																		diagnostic, nutrition and TB preventive Therapy.
1083101702 Department of Health Systems Strengthening	1,500	-	1,500	7/1/2021	6/30/2026				-				-	-	200.0	547	36.47	RSSH supports the treatment and prevention of HIV, TB, malaria, and the country to respond to these diseases, while also improving overall health systems by boosting the quality of care, data tracking, accountability and governance, and service delivery
1083100200 Clinical Waste Disposal System	1,256	60	1,196	7/1/2021	6/30/2024	-	200.00	200.00	15.92	-	600.00	217.00	17.28	20.0	10.0	801	63.77	The State Department through a grant from Belgium government is implementing phase II of the Clinical waste treatment project in 15 sites in the country.
1083100300 Clinical Laboratory and Radiology Services	1,052	-	1,052	7/1/2016	6/30/2024	-	500.00	552.80	52.55	-	500.00	552.80	52.55	-	10.0	552	52.47	The CRWPF will provide safe management, secure temporary storage and physical protection of radioactive waste generated within



Project Code & Project Title	Timeline					FY 2021/22				FY 2022/23				FY 2023/24				Remarks
	Estimated Cost of the Project (Financing)					Approved Budget				Approved Budget				Approved Budget				
	Total Estimated Cost of Project	GOK	Foreign	Start Date	Estimated Completion Date	GOK	Foreign	Cumulative Expenditure as at 30th June, 2022	Completion Status as at 30th June 2022 %	GOK	Foreign	Cumulative Expenditure as at 30th June, 2023	Completion Status as at 30th June 2023 %	GOK	Foreign	Cumulative Expenditure as at 30th June, 2024	Completion Status as at 30th June 2024 %	
Improvement																		the country, disused radioactive sources, as well radioactive and nuclear materials intercepted in illicit trade.
1083100700 Construction of Tuition Blocks and Laboratories at KMTC	1,800	1,800	-	9/21/17	6/30/27	127.50	-	696.50	38.69	324.00	-	994.50	55.25	682.00	-	1,526	84.78	The project is in its first phase of implementation. It involves construction of tuition blocks in the various campuses spread within the country.
1083100800 Equipping of Laboratories and Classrooms at KMTC	4,799	4,799	-	3/4/2018	9/18/27	553.80	-	1,819.00	37.90	483.00	-	2,282.00	47.55	1,614.00	-	3,211	66.91	This project involves the purchases of new and updated medical/teaching equipment's in relation to the changing market dynamics.
1083102400 Construction of an Examination Centre	960	960	-	1/1/2024	30/06/2026	-	-	-	-	-	-	-	-	250.00	-	350	36.46	This KMPDC conducts examinations under three categories: Qualifying Examination (Medical and Dental), Pre-registration examination (Medical &

Project Code & Project Title	Timeline					FY 2021/22				FY 2022/23				FY 2023/24				Remarks
	Estimated Cost of the Project (Financing)					Approved Budget				Approved Budget				Approved Budget				
	Total Estimated Cost of Project	GOK	Foreign	Start Date	Estimated Completion Date	GOK	Foreign	Cumulative Expenditure as at 30th June, 2022	Completion Status as at 30th June 2022 %	GOK	Foreign	Cumulative Expenditure as at 30th June, 2023	Completion Status as at 30th June 2023 %	GOK	Foreign	Cumulative Expenditure as at 30th June, 2024	Completion Status as at 30th June 2024 %	
																		Dental), and Peer Review Examinations (Medical and Dental Specialists) for purposes of internship, registration and Licensure for those who have Met the set requirements. Exams are done twice in a calendar year in the month of April/May and Oct./Nov.
1083102100 Public Participation	500	500		7/1/2023	06/30/2028	-	-	-	-	-	-	-	-	60.0		30	6.00	
1083102200 Infrastructure upgrade at Kenya Institute of Primate Research	280.1	210.1	70	3/1/2011	6/30/2026				-				-	24.3	-	173	68.63	The requested funds will be used to support the ongoing construction of the fence/perimeter wall to secure the working environment to enhance biosecurity of these pathogens; prevent high-risk research animals from escape; provide physical security for research staff and;

Project Code & Project Title	Timeline					FY 2021/22				FY 2022/23				FY 2023/24				Remarks
	Estimated Cost of the Project (Financing)					Approved Budget				Approved Budget				Approved Budget				
	Total Estimated Cost of Project	GOK	Foreign	Start Date	Estimated Completion Date	GOK	Foreign	Cumulative Expenditure as at 30th June, 2022	Completion Status as at 30th June 2022 %	GOK	Foreign	Cumulative Expenditure as at 30th June, 2023	Completion Status as at 30th June 2023 %	GOK	Foreign	Cumulative Expenditure as at 30th June, 2024	Completion Status as at 30th June 2024 %	
																		finally secure the infrastructural investment (i.e. archives, resource centre, ablution block, animal cages) that has already been developed by the previous funding under this project. Finally, the fence will prevent encroachment by the surrounding communities and additionally support conservation of Ololua forest
1083102601 Research and commercialization of Snake Antivenom to support Universal Health Care	1,829	1,829	-	4/1/2024	6/30/2027	-	-	-	-	-	-	-	-	300.0	-	300	15.86	Snakebite is a neglected tropical disease (NTD) with a significant public health impact in Kenya. Kenya records 15,000 to 20,000 snake bites cases and 1,000 deaths annually. Snake bites are prevalent in 40 counties and mainly affects school going children,

Project Code & Project Title	Timeline					FY 2021/22				FY 2022/23				FY 2023/24				Remarks
	Estimated Cost of the Project (Financing)					Approved Budget				Approved Budget				Approved Budget				
	Total Estimated Cost of Project	GOK	Foreign	Start Date	Estimated Completion Date	GOK	Foreign	Cumulative Expenditure as at 30th June, 2022	Completion Status as at 30th June 2022 %	GOK	Foreign	Cumulative Expenditure as at 30th June, 2023	Completion Status as at 30th June 2023 %	GOK	Foreign	Cumulative Expenditure as at 30th June, 2024	Completion Status as at 30th June 2024 %	
																		agricultural workers and nomadic pastoralist. This project will contribute to UHC treating snakebite victims, health care financing due to commercialization of snakebite anti venom leading to increased income generation, food security; there's a considerable loss in livestock due to snakebite.
1083102700 Central Radioactive waste processing facilities	10,000	10,000	-	1/7/2023	30/06/2027	-	-	-	-	-	-	-	-	-	-	-	0.00	The CRWPF will provide safe management, secure temporary storage and physical protection of radioactive waste generated within the country, disused radioactive sources, as well radioactive and nuclear materials intercepted in illicit trade. The facility also safeguards the

Project Code & Project Title	Timeline					FY 2021/22				FY 2022/23				FY 2023/24				Remarks
	Estimated Cost of the Project (Financing)					Approved Budget				Approved Budget				Approved Budget				
	Total Estimated Cost of Project	GOK	Foreign	Start Date	Estimated Completion Date	GOK	Foreign	Cumulative Expenditure as at 30th June, 2022	Completion Status as at 30th June 2022 %	GOK	Foreign	Cumulative Expenditure as at 30th June, 2023	Completion Status as at 30th June 2023 %	GOK	Foreign	Cumulative Expenditure as at 30th June, 2024	Completion Status as at 30th June 2024 %	
																		environment against radiation contamination, especially from radioactive waste and disused radioactive sources.
1083102800 Public Participation - Construction of dispensaries, clinics, wards	2,000	2,000	-	1/1/2024	31/12/2027	-	-	-	-	-	-	-	-	-	-	-	0.00	Construction of dispensaries, laboratories, maternity wards to boot Universal Health Care as one of the main thematic areas in the Bottom Up Transformative Agenda.
TOTAL						1,761.30	2,597.00	6,406.00	193.51	1,696.00	2,999.71	9,147.48	247.72	3,892.30	2,609.10	15,639.60	545.94	

## 2.4. Analysis of pending bills for the FY 2021/22- 2023/24

The Tables below present a summary of pending bills by nature and type during the period under review. In FY 2023/24, the Medical Services Sub-sector had total pending bills amounting to KSh 33,633 Million comprising KSh 7,731 Million due to lack of Exchequer and KSh 25,903 Million due to lack of budgetary provision.

**Table 2.8. Summary of Pending Bills by nature (KSh Million)**

ENTITY	Due to Lack of Exchequer			Due to Lack of Provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
NCI-K	-	0	8.1	-	-	0
MTRH	438	1,456.00	1,252.00	1,077.00	1,262.00	1,483.00
KEMSA	-	-	-	3,441.30	4,928.90	4,607.70
KEMRI	339	456	300	2,108.00	2,087.00	2,087.00
NHIF/SHA	-	-	-	899.3	908.6	1,966.30
NSDCC	-	186	-	-	-	-
MOH-SDMS	5,009.00	967	5,054.80	40,890.00	39,613.00	-
KNH-Mwai Kibaki Hospital Othaya	1,112.00	1,084.00	-	8,800.00	11,493.00	1.8
KNH-Mama Margaret	-	346	-	-	-	-
KNH	1,112.00	1,084.00	1,116.00	8,800.00	11,493.00	15,756.70
<b>TOTAL</b>	<b>8,010.00</b>	<b>5,579.00</b>	<b>7,730.90</b>	<b>66,015.60</b>	<b>71,785.50</b>	<b>25,902.50</b>

Further, the details for the pending bills can be summarized in the tables below;

### State Department for Medical Services

**Table 2.8. Summary of Pending Bills by nature (KSh Million)**

Type/Nature	Due to Lack of Exchequer			Due to Lack of Provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>1. Recurrent</b>						
Compensation of Employees	-	-	-			
Use of Goods and Services	1	367.4	519.5			
Social Benefits	-	-	-			
Other expenses	-	-	-	40,890		
<b>2. Development</b>						
Acquisition of Non-Financial Assets	5,008	584	-			

Type/Nature	Due to Lack of Exchequer			Due to Lack of Provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Use of Goods and Services	-	15.4	4,535.2			
Others		-	-		39,613	
Total Pending Bills	5,009.0	967.0	5,054.8	40,890	39,613	-

## 2.NHIF/Social Health Authority (SHA)

**Table 2.8. Summary of Pending Bills by nature (KSh Million)**

TYPE/NATURE	Due to Lack of exchequer			Due to lack of provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
1. Recurrent						
Advertising & Publicity				29.0	29.0	29.0
Overseas Claims				19.1	19.1	19.1
Consultancy Services				15.3	15.3	15.3
Security Services				-	9.3	9.3
Tax expense				-	-	1,057.7
				-	-	-
2. Development				-	-	-
ICT Infrastructure				819.5	819.5	819.5
Office Partitioning				16.4	16.4	16.4
Total Pending Bills	0	0	0	899.3	908.6	1,966.3

## 3.Kenya Medical Supplies Authority

**Table 2.8. Summary of Pending Bills by nature (KSh Million)**

TYPE/NATURE	Due to Lack of exchequer			Due to lack of provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
1. Recurrent						
Compensation of Employees				15	16	
Use of goods and services				3,427	4,913	4,608
Social benefits				-		
Other expense				-		
2. Development				-		
Acquisition of Non financial assets				-		
Use of goods and services				-		
Other Specifics				-		
<b>Total Pending bills</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>3,441.33</b>	<b>4,928.85</b>	<b>4,607.70</b>

## 4.Kenya Medical Research Institute

**Table 2.8. Summary of Pending Bills by nature (KSh Million)**

TYPE/NATURE	Due to Lack of exchequer			Due to lack of provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>1.Recurrent</b>	<b>292.0</b>	<b>292.0</b>		<b>2,037.0</b>	<b>2,037.0</b>	<b>2,037.0</b>
Compensation of Employee	292.0	317.0				
Social benefits-pension				2,037.0	2,037.0	2,037.0
Other expenses	-	-	-			
<b>2.Development</b>	<b>47.0</b>	<b>139.0</b>	<b>300.0</b>	<b>71.0</b>	<b>50.0</b>	<b>50.0</b>
Acquisition of non-financial assets (Development grant)	47.0	139.0	300.0			
Others specify (CDC vendors and debts)				71.0	50.0	50.0
<b>Total Pending Bills</b>	<b>339.0</b>	<b>456.0</b>	<b>300.0</b>	<b>2,108.0</b>	<b>2,087.0</b>	<b>2,087.0</b>

Under recurrent, the pending bill was due to capitation for two months not remitted to KEMRI in the Financial year 2017/18 (139M), 2018/19 (153M) and (25M) in the FY 2022/23. KEMRI has Retirement Benefits scheme (DB) which was established in 1983 with actuarial valuation deficit of KSh 2.037 Million as at 30th June 2021. The Institute has not been able to settle outstanding benefits amounting to Kes 597 Million. As a result, retirees have taken the Institute to court demanding payment of their benefits.

Under development, the pending bill refers to development grant of KSh. 20 Million not remitted to KEMRI in the FY 2017/18, 27 Million in the FY 2021/22 and 92Million in the year 2022/23. In the year 2023/24 the institute did not receive KSh 300M for research and development.

The Institute committed to pay vendor debts and the interest that accrued over the years following the collapse of the CDC/Kisumu CoAg in 2015.

## 5. National Syndemic Disease Control Council

**Table 2.8. Summary of Pending Bills by nature (KSh Million)**

TYPE/NATURE	Due to Lack of exchequer			Due to lack of provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
1. Recurrent						
Compensation of Employees	-	87	-	-	-	-
Use of Goods and Services e.g Rent, Utilities, Insurance, Contracted Services	-	99	-	-	-	-
Social Benefits	-		-	-	-	-
Other expenses	-	0	-	-	-	-
2. Development	-	-	-	-	-	-
Acquisition of Non financial assets (ICT Infrastructure)	-	-	-	-	-	-



TYPE/NATURE	Due to Lack of exchequer			Due to lack of provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Use of goods and services	-	-	-	-	-	-
Other Specifics	-	-	-	-	-	-
<b>Total Pending Bills</b>	<b>0</b>	<b>186</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## 6.Moi Teaching & Referral Hospital

**Table 2.8. Summary of Pending Bills by nature (KSh Million)**

TYPE/NATURE	Due to Lack of exchequer			Due to lack of provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
1. Recurrent						
Compensation of employees	438.0	1,456.0	1,252.0	-	-	
Use of goods and services e.g utilities, domestic or foreign travel e.t.c	-	-		1,077.0	1,262.0	1,483.0
Social Benefits e.g NHIF, NSSF	-	-		-	-	
Other expense	-	-		-	-	
2. Development	-	-		-	-	
Acquisition of non financial assets	-	-		-	-	
Use of goods and services e.g utilities, domestic or foreign travel e.t.c	-	-		-	-	
Others -specify	-	-		-	-	
<b>Total Pending Bills</b>	<b>438.0</b>	<b>1,456.0</b>	<b>1,252.0</b>	<b>1,077.0</b>	<b>1,262.0</b>	<b>1,483.0</b>

## Kenyatta University Teaching, Referral and Research Hospital

**Table 2.8. Summary of Pending Bills by nature (KSh Million)**

TYPE/NATURE	Due to Lack of exchequer			Due to lack of provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>1. Recurrent</b>						
Compensation of Employees						860

TYPE/NATURE	Due to Lack of exchequer			Due to lack of provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Use of Goods and Services e.g Rent, Utilities, Insurance, Contracted Services						
Social Benefits (NSSF and Pension Deficits)						
Other expenses (Tax Liability)						
<b>2. Development</b>						
Acquisition of Non-financial assets			350			
Use of goods and services						
Other Specifics						
<b>Total Pending Bills</b>	<b>0</b>	<b>0</b>	<b>350</b>	<b>0</b>	<b>0</b>	<b>860</b>

## Kenyatta National Hospital

**Table 2.8. Summary of Pending Bills by nature (KSh Million)**

TYPE/NATURE	Due to Lack of exchequer			Due to lack of provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
1. Recurrent						
Compensation of employees	124	124	116	-	-	
Use of goods and services	-	-		826	1,128	806
Social Benefits - (NSSF and Pension Deficit)	-	-		7,278	9,669	14,713
Other expenses (Tax Liability)	-	-		696	696	237.7
2. Development	-	-		-	-	
Acquisition of Non financial assets	988	960	1000	-	-	
Use of goods and services	-	-		-	-	
Other Specifics	-	-		-	-	
<b>Total Pending Bills</b>	<b>1,112</b>	<b>1,084</b>	<b>1,116</b>	<b>8,800</b>	<b>11,493</b>	<b>15,757</b>

The amount outstanding relates to contribution arrears for the period April 2001 to November 2009 when KNH had sought for an exemption on complying with NSSF Act from the Ministry of Labour and Human Resource Development given the hospital had a

Pension Scheme. The Ministry declined the request for exemption in the year 2011 on the basis that NSSF was a universal social security pillar and was thus mandatory. The Hospital had by then accumulated arrears totalling to Kshs. 310,830,280. The hospital has been including this amount in the budget for funding and to date it has remained unfunded. From FY 2016/17 to FY 2021/22 the hospital has been paying Kshs. 24 Million annually towards the arrears awaiting the Ministry of Health intervention

Pension Deficit KSh 14,594m

The actuarial valuation for the closed-to-new-member DB scheme as at 30th June 2022 reflects funding deficit of Kshs. 9,526,293,728. From FY 2015/16 to FY 2021/22 the Hospital has been paying Kshs. 100 Million annually towards the scheme deficit which is not sufficient to service it. The hospital has continued to engage the Ministry of Health for more funding. The Sector Working Group allocated an additional Kshs. 300M for FY 2022/23, which was not included in the printed.

Other expenses Tax Liability and interest KSh 237.7m

Tax Liability KSh- 192.9M

The corporation tax on rental income and interest earned for Fy 2019-2022 which was outstanding as at 30th June 2024.

Interest – KSh 44.8M

The delayed payment of Ksh.11,124,683 was occasioned by the delays in payment of fee notes 1-3. The Principle amount was settled by the Hospital using GOK allocation to avoid further penalties.

The Contractor raised has raised 14 Payment Certificates to date with amount certified at 1,217,956,722. IPC 1-14 have been paid by GOK and submitted to the development partners for processing however the outstanding balance of KES. 79,446,750 is still pending and the requested MOH to give guidance on settlement of accrued interest as at certificate 12&13 amounting to KES. 33,678,938

## Mwai Kibaki Hospital – Othaya

**Table 2.8. Summary of Pending Bills by nature (KSh Million)**

TYPE/NATURE	Due to Lack of exchequer			Due to lack of provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
1. Recurrent						
Compensation of Employees	124	124		-	-	
Use of Goods and Services e.g Rent, Utilities, Insurance, Contracted Services	-	-		826	1,128	2
Social Benefits (NSSF and Pension Deficits)	-	-		7,278	9,669	
Other expenses (Tax Liability)	-	-		696	696	
2. Development	-	-		-	-	

TYPE/NATURE	Due to Lack of exchequer			Due to lack of provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
Acquisition of Non financial assets	988	960		-	-	
Use of goods and services	-	-		-	-	
Other Specifics	-	-		-	-	
<b>Total Pending Bills</b>	<b>1,112</b>	<b>1,084</b>	<b>0</b>	<b>8,800</b>	<b>11,493</b>	<b>2</b>

### National Cancer Institute

TYPE/NATURE	Due to Lack of exchequer			Due to lack of provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>1. Recurrent</b>						
Compensation to Employees	-	-		-	-	-
Use of Goods and Services Eg. Utilities, DSA, foreign Travel	-			-	-	-
Social Benefits	-	-		-	-	-
Other Expenses	-	-	8.10	-	-	
<b>2. Development</b>						
Acquisition of Non-financial Assets	-	-	-	-	-	-
Use of Goods and Services E.g. Utilities, DSA, foreign Travel	-	-	-	-	-	-
Others Specify	-	-	-	-	-	-
<b>Total Pending Bills</b>	<b>-</b>		<b>8.10</b>		<b>-</b>	<b>-</b>

### Mama Margaret Kenyatta Hospital

**Table 2.8. Summary of Pending Bills by nature (KSh Million)**

Type/Nature	Due to Lack of Liquidity			Due to Lack of Budgetary Provision		
	2020/21	2021/22	2022/23	2020/21	2021/22	2022/23
<b>1. Recurrent</b>						
Compensation of employees	-	-	-	-	-	-
Use of goods and services	-	-	46	-	-	-
Social Benefits -NSSF	-	-	-	-	-	-
Other expenses	-	-	-	-	-	-
<b>2. Development</b>						
	-	-		-	-	-

Type/Nature	Due to Lack of Liquidity			Due to Lack of Budgetary Provision		
	2020/21	2021/22	2022/23	2020/21	2021/22	2022/23
Acquisition of Non financial assets	-	-	300	-	-	-
Use of goods and services	-	-	-	-	-	-
Other Specifics	-	-	-	-	-	-
<b>Total Pending Bills</b>	-	-	<b>346</b>	-	-	-

## State Department for Public Health and Professional Standards

**Table 2.8: Summary Of Pending Bills**

Type/Nature	Due to lack of Exchequer			Due to lack of Provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>1. Recurrent</b>	-	<b>54.00</b>	<b>70.76</b>	-	-	-
Compensation of Employees	-	-	-	-	-	-
Use of Goods and Services e.g. utilities, domestic or foreign travel etc.	-	54.00	70.76	-	-	-
Social benefits e.g. NHIF.NSSF	-	-	-	-	-	-
Other expense	-	-	-	-	-	-
<b>2.Development</b>	-	<b>257.40</b>	<b>15.47</b>	-	-	-
Acquisition of Non-Financial Assets	-	-	15.47	-	-	-
Use of Goods and Services	-	257.40	-	-	-	-
Others Specify	-	-	-	-	-	-
Total Pending Bills	-	311.40	86.23	-	-	-

## Kenya Medical Training College

Type/nature	Due to lack of Exchequer			Due to lack of Provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>Recurrent</b>	-	<b>705</b>	-	<b>2,270</b>	<b>2,328</b>	<b>2,862</b>
Compensation of employees	-	-	-	-	-	-
Use of good and services e.g. utilities, domestic or foreign travel etc.	-	705	-	-	-	-
Social Benefits: NSSF	-	-	-	730	746	736
Social benefits Pension deficit	-	-	-	1,540	1,582	2,126
Other expenses	-	-	-	-	-	-
<b>Development</b>	<b>100</b>	<b>189</b>	<b>1,202</b>	-	-	-
Acquisition of non-financial assets	100	189	1,202	-	-	-
Use of goods and services	-	-	-	-	-	-
Others – Specify	-	-	-	-	-	-
<b>Total Pending Bills</b>	<b>100</b>	<b>894</b>	<b>1,202</b>	<b>2,270</b>	<b>2,328</b>	<b>2,862</b>

## Kenya Nuclear Regulatory Authority

Type/Nature	Due to lack of Exchequer			Due to lack of Provision		
	2021/22	2022/23	2023/24	2021/22	2022/23	2023/24
<b>1. Recurrent</b>	-	-	-	-	-	<b>2.10</b>
Compensation of Employees	-	-	-	-	-	-
Use of Goods and Services e.g. utilities, domestic or foreign travel etc.	-	-	-	-	-	-
Social benefits e.g. NHIF.NSSF	-	-	-	-	-	-
Other expense	-	-	-	-	-	2.10
<b>2.Development</b>	-	-	-	-	-	-
Acquisition of Non-Financial Assets	-	-	-	-	-	-
Use of Goods and Services	-	-	-	-	-	-
Others Specify	-	-	-	-	-	-
<b>Total Pending Bills</b>	-	-	-	-	-	<b>2.10</b>

## 2.5. Analysis of court awards (Summarize as indicated in Table 2.9)

### Kenya Medical Research Institute

**Table 2.9 Summary of Court Awards**

	<b>Details of the Award</b>	<b>Date of Award</b>	<b>Amount (KSHS)</b>	<b>Payment to Date</b>
1	ELRC Cause No. 37(N) of 2010. Agnes Muthoni & 34 Others vs KEMRI	18th October 2021	KSh. 214,833,044 ( Being Arrears payable from 2009 to @ 2022)	KSh. 27,863,665 (Salary Paid from 1st December 2021 to 30th June 2022)
2	Civil Appeal No. E046 of 2022. KEMRI vs James Maringa Mwangi	28th October 2021	KSh. 12,384,382.50	KSh. 2,636,109.28 (Salary Paid from 1st January 2023 to 31st August 2023 and KSh. 3,295,136.60 Projections from September 2023 to June 2024
	<b>TOTAL KEMRI</b>		<b>227,217,426.50</b>	<b>30,499,774.28</b>

### State Department for Medical Services

**Table 2.9 Summary of Court Awards**

	<b>Details of the Award</b>	<b>Date of Award</b>	<b>Amount (KSHS)</b>	<b>Payment to Date</b>
1	DR. SAMUEL KABERERE NJENGA –VS- AG& PS File No. 450/2011	2011	1,427,538.00	None
2	VULCAN LTD VS. AG File No. NRBI HCCC 1361/2000	2000	1,000,000,000	None
3	ABEDNEGO OCHOLA V AG File No.KSM H/C , MISC CIV APP NO’ 86/2013	2013	612,032	None
4	FARAM E.A. LTD VS THE AG & 2 OTHERS File No.HCC AT NAIROBI NO. 245 OF 2013	2013	190,813,115	None
5	SIMON KAMAU NJOROGE VS. PRINCIPAL SECRETARY File No.411/2014	2014	169,999	None
6	ELDORET CHILDRENS CASE EUNIFER JEROTICH VS. DAVID KIBIWOTT File No.44/2004	2004	144,000	None
7	DR.LAWRENCE NJOGU CHEGE VS THE ATTORNEY GENERAL File No.372/2016	2016	219,748	None
8	SUSAN WAMAITHA KAMAU VS PRINCIPAL SECRETARY MINISTRY OF HEALTH File No. NRBI HC JR NO. 173 OF 2016	2016	63,702.40	None
9	CAROLINE WAMAITHA(SUING THROUGH NEXT OF FRIENDS) ESTHER NJOKI WANJIRU V MURIGI CHEGE, MOH MARAGWA DISTRICT HOSPITAL & AG File No. PMC AT KANDARA CIVIL CASE NO 188 OF 2015	2015	1,363,118	None

	Details of the Award	Date of Award	Amount (KSHS)	Payment to Date
10	EQUIP AGENCIES LTD VS. AG File No. MILIMANI HCCC 55 /2017 FORMERLY (1459/1999)	1999	15,250,000,000	None
11	MAGGY AGULO CONSTRUCTION CO. LIMITED VS. MINISTRY OF PUBLIC HEALTH AND 4 OTHERS File No.HIGH COURT KAKAMEGA CIVIL SUIT NO. 01 OF 2017	2017	42,447,990	None
12	IN THE MATTERS OF ARBITRATION BETWEEN MELLECH ENGINEERING & COOSTUCTION LTD AND HENRY M. JACKSON FOUNDATION & ANOTHER	2017	1,032,500.00	None
13	UNITED MEDICAL SUPPLIES VS THE AG File No. HIGH COURT SUIT AT NAIROBI NO. 2332 OF 1995	1995	17,839,728,834	None
14	PETER BUTALIU SABWAMI VS ARCHDIOCESE OF NAIROBI KENYA ,DR. LILIAN WANGU & DR MUCHAI GACHOGO File No. HCC NO 399 OF 2010	2010	5,045,879	None
15	UASIN GISHU MEMORIAL HOSPITAL VS MOI TEACHING File No. CIVIL APPEAL AT NRB NO 184 OF 2012 & REFERAL HOSPITAL BOARD, MOH AND THE AG	2012	1,738,630,267	None
16	ELIZABETH AWINO ONYANGO VS CABINET SECRETARY, MIN OF HEALTH & 2 OTHERS File No. MISC CIV SUIT NO 391 OF 2013	2013	244,839	None
17	KEVIN MUZINDI WAMBUGU VS THE HON. ATTORNEY GENERAL File No. NAIROBI CMCC NO. 11160 OF 2004	2004	244,730.00 As at 21st December 2012	None
18	ROCKEY AFRICAN LIMITED File No. HCCC 1361 OF 2000	2000	1,869,390,102	None
19	EMMANUEL MUNENE –VS- THE ATTORNEY GENERAL & HYLINE MEMBA File No. CMCC NO. 1558 OF 2013	2013	12,204,618	None
20	EUROTECH INTERNATIONAL – V- THE ATTORNEY GENERAL File No. HCCC NO. 1460 of 1999	1999	2,250,000,000	None
21	ROSE MUMBI MUTURI VS. DIRECTOR NATIONAL YOUTH SERVICE, ATTORNEY GENERAL & ANOTHER File No. THIKA CMCC NO. 820 OF 2012	2012	615,788	None
22	YUNITA AKUNGU VS TEDDY OKUKU OPIYO & HON. ATTORNEY GENERAL File No. MBITA PMCC NO. 14 OF 2015	2015	832,188	None
23	ANTHONY SAA MWATEBWE VS FRANKLIN MWAMBENI & THE HON. ATTORNEY GENERAL File No. KILIFI SPMCC 349 OF 2018	2018	5,178,924	None
24	EUGENE REEKSTING VS THE HON. ATTORNEY GENERAL File No. NAIVASHA HCCC NO.8 OF 2019(FORMERLY NAKURU HCCC NO. 25 OF 2013)	2013	3,893,309	None



	<b>Details of the Award</b>	<b>Date of Award</b>	<b>Amount (KSHS)</b>	<b>Payment to Date</b>
25	EMMANUEL ODUMO VS THE HON. ATTORNEY File No. BUSIA CMCC NO. 9 OF 2018 GENERAL	2018	427,314	None
26	KENYA NATIONAL UNION OF NURSES VS THE PERMANENT SECRETARY MINISTRY OF HEALTH & 2 OTHERS File No. NAIROBI ELRC CAUSE NO. 1116 OF 2012	2012	385,164.00	None
27	REPUBLIC VS PRINCIPAL SECRETARY MINISTRY OF HEALTH & THE HONOURABLE ATTORNEY GENERAL Ex parte GEOFFREY GATWAI MWANGI	2017	127,995	None
28	File No. NAIROBI HIGH COURT JUDICIAL REVIEW MISC. APPLICATION 202 OF 2017			None
29	EMMANUEL MUNENE(A minor suing through mother and next friend CHRISTINE NTHOKI MUANGE) VS THE HON. ATTORNEY GENERAL & 2 OTHERS File No. MOMBASA CMCC 1558 OF 2013	2013	17,046,364	None
30	FARAM E.A LIMITED VS HON. ATTORNEY GENERAL AND ANOTHER	2018	33,555,476	None
31	File No. NAIROBI HIGH COURT COMMERCIAL CASE NO.103 OF 2018			None
32	BENARD WASONGA VS AG File No. SRMCC No. 250/08	2008	153,072	None
33	MICHAEL N. SIMIYU V A.G File No. Nairobi 3/16	2016	462,500	None
34	ELIZABETH GATHONI MITEY File No. Nairobi 98/15	2015	727,750	None
35	JAPHET MURIUKI V AG File No. MERU CMCC No. 232A/011	2011	738,210	None
36	KIMEU MUSYOKI File No.13/16	2016	926,856	None
37	SIMON MUTHUMA NGANGA File No.421/18	2018	1,255,189	None
38	ELISHA OKINYO OGOLA VS AG File No.17/11	2011	1,976,770	None
39	SEKUNDU MURIIRA IBAYA VS DR. NGATIA & 3 OTHERS File No. MERU CMCC 190/2016	2016	7,158,000	None
40	ELRC CAUSE NO. 37(N) OF 2010. AGNES MUTHONI & 34 OTHERS VS KEMRI	18th October 2021	214,833,044	None
41	CIVIL SUIT NO 2473 OF 1998 BETWEEN GERRISHON KAMAU KIRIMA V/S ATTORNEY GENERAL OF THE REPUBLIC OF KENYA	25th September 2007	53,363,161	None
	<b>TOTAL COURT AWARDS AGAINST SDMS</b>		<b>40,547,440,085</b>	<b>None</b>

# CHAPTER THREE: MEDIUM TERM PRIORITIES AND FINANCIAL PLAN FOR THE MTEF PERIOD

## 3.1. Prioritization of Programmes and Sub-Programmes

### 3.1.1. Programmes and their Objectives

The Health Sector will implement the following 8 programmes and sub programmes, in the Financial Years FY 2025/26-2027/28 which are in line with the priorities for the Sector as outlined in the Medium Term Plan IV.

**Table 3.1 (a): Programmes and their Strategic Objectives**

S/NO	PROGRAMME	PROGRAMME OBJECTIVES
<b>State Department for Medical Services</b>		
Programme 1:	National Referral and Specialized Services	To increase access and range of quality specialized healthcare services
Programme 2:	Curative and Reproductive Maternal Neonatal Child & Adolescent Health (RMNCAH) Services	To increase 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
Programme 4:	General Administration and Support Services.	To offer Governance and enabling services for service delivery
<b>State Department for Public Health and Professional Standards</b>		
Programme 1:	Preventive & promotive health services	To reduce disease burden due to preventable causes
Programme 2:	Health resource development & innovation	To enhance health human resources for quality health care
Programme 3:	Health policy standards & regulations	To strengthen quality health standards & regulations
Programme 4:	General administration and Support Services.	To strengthen governance & administration of health services

## Programmes and Sub-programmes

**Table 3.1(b): Programmes and Sub-programmes**

<b>Programme</b>	<b>Sub Programmes</b>
<b>State Department for Medical Services</b>	
P1. National Referral & Specialized services	SP1.1 National Referral & Specialized Health Services
	SP1.2 Health Infrastructure and Equipment
	SP1.3 Health Products and Technologies
	SP1.4 National Blood Transfusion Services
P2. Curative and Reproductive Maternal Neonatal Child & Adolescent Health (RMNCAH)	SP 2.1 Communicable Disease Control
	SP2.2 Non-Communicable disease prevention and control
	SP2.3 Reproductive Maternal Neonatal Child & Adolescent Health (RMNCAH)
	SP 2.4 Immunization Management
P3. Health Research and Innovations	SP3.1 Health Innovations
	SP3.2 Medical Research
P4. General administration and Support Services.	SP4.1 General Administration & Human Resource Management & Development
	SP4.2 Finance and Planning
	SP4.3 Social Protection in Health
<b>State Department for Public Health and Professional Standards</b>	
P1. Preventive and promotive health service	SP 1.1 Communicable diseases control
	SP1.2 Disease surveillance and response
	SP1.3 Public Health Services
	SP1.4 Radiation safety and nuclear security
	SP1.5 Primary Health Care
P2. Health resource development & innovation	SP2.1 Capacity building and training (Preservice and Inservice training)
	SP2.2 Research and Innovation on health
	SP2.3 Health Profession Services
P3. Health Policy Standards and Regulation	SP3.1 Health Standard Quality Assurance
	SP3.2 Healthy Policy planning and Financing
P4. General Administration and support services	SP4.1 General administration Human resource management and development
	SP4.2 Finance and Planning

### 3.1.2. Programmes, Sub-Programmes, Expected Outcomes, Outputs, and Key Performance Indicators for the Sector

**Table 3.1: Summary of Programmes, Key Outputs, Performance Indicators and targets for FY 2025/26 - 2027/28**

#### STATE DEPARTMENT FOR MEDICAL SERVICES

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
<b>Programme 1: National Referral Facilities and Specialized Services</b>									
<b>Programme Outcome: Increased access and range of quality specialized health care services</b>									
<b>S.P 1.1 National Referral &amp; Health Services</b>	Kenyatta National Hospital	Specialized health care services	Number of Heart surgeries done	491	609	682	784	863	900
			Number of other cardiothoracic surgeries conducted	1192	1293	1357	1519	1601	1666
			Number of Kidney Transplants conducted.	20	19	20	24	27	30
			Number of minimally invasive surgeries done	6,144	6,354	6,672	7,005	7,356	7,723
			Number of patients undergoing specialized Burns treatment (OBD)	570	589	618	649	682	716
			Number of oncology sessions on (Chemotherapy and radiotherapy)	40,372	43,216	45,377	47,646	50,028	52,529
			Average Length of Stay (ALOS) for trauma patients (days)	36	35	37	35	32	31.6
			Average waiting time for kidney transplant (days)	85	83.5	80	70	60	63
			Average waiting time (days) for radiotherapy	19	18	17.3	17	16.8	16.5
			Average waiting time (days) for chemotherapy	13.2	3.2	3	3	3	3
		Health Research services	Number of briefs to inform national policy	3	2	3	5	7	8
		Multidisciplinary Outreaches services	Number of Multi-disciplinary Outreaches with Counties	379	373	381	390	397	417

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
	Mwai Kibaki Hospital	Specialized health care services	Number of minimally invasive surgeries done	1,541	1,591	1,671	2,003	2,103	2,208
			Number of NCD screening sessions	130	98	130	163	196	206
			Number of specialized clinics available in the facility	23	16	23	24	26	27
			Average length of stay for trauma patient (days)	17.3	16.1	17.3	17.1	16.7	16
			Number of oncology sessions on (Chemotherapy and radiotherapy)	1,056	1,091	1,201	1,320	1,650	1,733
		Health Research Services	Number of briefs disseminated to inform national policy	1	2	1	2	3	4
		Multidisciplinary Outreaches Services	Number of Multi-disciplinary Outreaches with Counties	27	23	27	29	31	33
S.P 1.1 National Referral & Specialized Health Services	Moi Teaching and Referral Hospital	Specialized Healthcare Services	Average Length of Stay for Orthopedic Surgery (Trauma Patients) Days	11.4	11	10.9	10.8	10.7	10.6
			Average Length of Stay for Pediatric Burns Patients(days)	31.2	26.2	26.1	26	25.9	25.9
			Average waiting time (days) for Radiotherapy	46	69	68	65	63	60
			Number of Kidney Transplants undertaken	13	20	21	22	23	24
			Number of Minimally Invasive Surgeries	2,800	3,081	3,090	3,100	3,110	3,120
			Number of Chemotherapy sessions done	16,850	20,379	20380	20390	20395	20400
			Number of Open-Heart Surgeries conducted	25	72	73	74	75	76
			Number of External Beam Radiotherapy Sessions.	10100	17014	17020	17030	17040	17050
			Number of Brachytherapy Sessions	137	326	328	330	334	338

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Number of Corneal Transplants conducted	11	39	40	40	40	40
		Health Research Services	Number of Research Papers Published	25	100	105	107	108	109
		Multidisciplinary Outreaches services	Number of Multi-disciplinary Outreaches with Counties	60	102	105	107	109	111
S.P 1.1 National Referral & Specialized Health Services	Kenyatta University Teaching, Referral and Research Hospital	Specialized Health care Services	Number of Open Heart Surgeries conducted	30	42	45	50	55	60
			Number of Kidney Transplants conducted	15	0	4	6	8	12
			Number of minimally invasive surgeries conducted	1000	1187	1300	1350	1400	1500
			Number of patients on Hemodialysis	10,200	10311	10500	11000	11500	12,000
			Number of patients receiving chemotherapy & radiotherapy treatment	30,500	21,640	22000	23000	24000	25000
			Number of specialized Gynecology procedures conducted	1200	650	750	800	850	900
			Average waiting time (days) for radiotherapy	50	60	50	55	45	30
			Average waiting time (days) for Chemotherapy	6	6	6	5	5	5
			ALOS for orthopedic patients (days)	14	14	10	9	8	8
			ALOS (days) for surgery patients (days)	7	7	6	6	5	5
			Number of PET Scan examinations conducted	4,500	5,592	5,800	6,000	6,200	6,400
			Number of SPECT CT-Scan examinations conducted	1,000	155	200	225	250	300
			Number of Stereotactic Radiosurgery conducted	600	349	400	450	500	550
			Number of Brachytherapy sessions conducted	900	373	400	410	420	430

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
		Studies & Research services	Number of research conducted & completed	6	6	7	7	8	9
S.P 1.1 National Referral & Specialized Health Services	Mathari National Teaching and Referral Hospital (MNTRH)	Specialized Mental Health and Psychiatric services	Number of Patients receiving in-patients specialized mental health care services	280,000	251,390	310,418	325,939	342,236	359,348
			Number of Electro-Convulsive Therapy (ECTs) sessions done	450	490	565	621	683	751
			Re-admission Rate (proportion of patients readmitted in a year)	50	47	46	45	44	43
			Number of community mental health outreaches conducted	6	30	35	40	45	50
			Number of Patient with drugs/substance and alcohol addiction receiving rehabilitative mental health care services	590	593	652	717	789	867
			Number of patients receiving out-patient specialized mental health care services	320,000	343,675	350,549	357,560	364,711	372,005
			Average Length of Stay (ALOS) for civil psychiatric in-patients	48	47	46	45	44	43
			Percentage of specialized psychiatric medical drugs (psychotropics) acquired	80	70	75	80	90	100
			Number of forensic outpatients received psychiatric services	680	720	780	858	943	1037
			Number of MNTRH Health Practitioners trained on specialized Mental curricula	10	3	3	4	5	6
			Percentage of abandoned patients re-integrated into the community	90	70	80	90	100	100

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Number of new research conducted on mental health, psychiatry and behavioral health system needs	2	2	3	4	5	6
			Number of policies developed	3	3	4	4	4	4
S.P 1.1 National Referral & Specialized Health Services	Spinal Injury Hospital	Specialized spinal services	Out-patient spine services utilization rate	1.5	1.2	2	1.4	1.1	1
			ALOS for spine patients (days)	83.2	83	83	83	83	83
			Average waiting time for spine services(days)	210	205	180	150	150	120
			Proportion of patients re-integrated into community	60	30	80	100	100	110
			Number of in-patients receiving spinal services	150	85	150	150	150	150
			Number of out-patients receiving spinal services	1654	1600	1654	1670	1680	1690
			Number of orthopedic spine surgeries	100	30	100	100	100	100
			Number of Plastic surgeries	24	10	24	28	30	32
<b>SP 1.2. Health Infrastructure and Equipment</b>	Health Infrastructure Division	National Equipment Services	Percentage of Public hospitals equipped with NESP equipment/service achieving an uptime of 95%	10	10	50	75	90	100
		Health Infrastructure Management Services	Percentage of completion rate for Kisii Level 5 Cancer Centre	30	20	50	80	100	N/A
			East Africa Centres of excellence for Skills & Tertiary- Nephrology and Urology-Completion rate on construction works of phase IB	100	0	50	80	100	N/A
			East Africa Centres of excellence for Skills & Tertiary- Nephrology and	30	50	50	70	100	N/A



Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Urology-Percentage of equipping the complex						
			Completion rate of the upgrading works for Kigumo Level 4 Hospital	100	95	100	N/A	N/A	N/A
			Completion rate on construction works for Piny Awacho Level 3A	60	95	100	N/A	N/A	N/A
			Completion rate on construction works Urenga Level 3A for	50	60	100	N/A	N/A	N/A
			Completion rate on construction works Endebees level 4 for	50	20	50	80	100	N/A
			Completion rate on construction works for Kibugua level 4	50	60	80	100	N/A	N/A
			Completion rate on construction works for Lusigetti level 4	20	0	50	100	N/A	N/A
			Percentage of Completion rate for Mt Elgon Hospital	N/A	N/A	50	100	N/A	N/A
			Percentage of Completion rate for Sikhendu Hospital	N/A	N/A	50	100	N/A	N/A
			Percentage of Completion rate for Mogotio Health	N/A	N/A	50	100	N/A	N/A
			Percentage of Completion rate for Iftin Level 4	N/A	N/A	50	100	N/A	N/A
			Percentage of Completion rate for Kilgoris Level 4	N/A	N/A	50	100	N/A	N/A
			Percentage of Completion rate Lukusi for Health Centre	N/A	N/A	50	100	N/A	N/A
			Percentage of Completion rate for Jua Kali Health Centre	N/A	N/A	50	100	N/A	N/A

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Percentage of Completion rate for Kegonga Level 4	N/A	N/A	50	80	100	N/A
			Percentage of Completion rate for Bugumbe Health Centre	N/A	N/A	50	80	100	N/A
			Percentage of Completion rate for Chebirir Health Centre	N/A	N/A	50	80	100	N/A
			Percentage of Completion rate for Wamba Health Centre	N/A	N/A	50	80	100	N/A
			Percentage of Completion rate for Khwisero Level 4	N/A	N/A	50	80	100	N/A
			Percentage of Completion rate for Chuka County Referral Hospital	N/A	N/A	50	80	100	N/A
			Percentage of Completion rate for Kanyarkwat Health Centre	N/A	N/A	50	80	100	N/A
<b>SP 1.3 Health Products &amp; Technologies</b>	Division of Health Products and Technologies	Health products and technologies Services	Percentage completion of development of the National Health Products and Technologies Policy	22	22	40	100	NA	N/A
			Proportion of donations made through the HPT donations portal	35	0	35	50	80	85
			Number of Counties with HPT guidelines disseminated	20	15	10	12	5	7
			Proportion of functional County Health Products and Technologies Units	100	100	75	75	75	75
			Number of staff capacity built on HPT supply chain management	200	240	200	200	200	200
			Percentage of completion on development of Local manufacturing Strategy	60	60	50	100	N/A	N/A

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Number of health facilities with oxygen machines delivered and commissioned (PSA Plants and with Liquid oxygen tanks)	10	5	15	7	N/A	N/A
	Pharmacy Services	Quality Health Products and Technologies services	Number of essential HPT lists reviewed	2	5	N/A	N/A	3	NA
			Proportion of essential HPT lists Disseminated to counties	70	40	75	75	75	75
			Number of functional County Medicines Therapeutics Committees	5	4	11	21	42	47
			Number of annual Joint supportive supervision and data quality audits done for HPT	1	1	47	47	47	47
			Percentage of health facilities with essential tracer medicines	50	50	50	60	70	70
			Percentage of health facilities with essential tracer diagnostics	50	50	50	60	70	70
			Percentage of health facilities with essential tracer medical supplies	50	50	50	60	70	70
			Division of traditional and alternative medicine		Percent completion of the Traditional & Alternative Medicine Policy guideline	90	85	95	100
	Percent completion of the Traditional and alternative medicine Bill	80			80	95	100	NA	NA
	Kenya Medical Supplies Authority	Health Products & technologies supply chain services	Percentage of order fill rate for HPTs	90	62	90	90	90	90
			Order turnaround time(days) PHFs	10	20.2	10	10	10	10
			Order turnaround time(days) Hospitals	7	16.9	7	7	7	7

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Percentage of last mile deliveries made to health facilities	100	97.9	100	100	100	100
			Percentage completion rate of the National Commodities Storage (supply chain) center	90	85%	90	100	N/A	N/A
			Percentage completion rate of the operationalization of the New Warehouse (quipping, Warehouse Layout & Automation)	64.27	6.42	46	65	80	100
			Percentage completion rate of the Mombasa Regional Distribution Centre	50	15%	80%	100%	N/A	N/A
<b>SP 1.4 National Blood Transfusion Service, Tissue and Human Organ Transplant</b>	Kenya Tissue Transplant Authority	Blood transfusion services	Number of whole blood units collected	450,000	357,517	450,000	500,000	500,000	550,000
			Proportion of blood and blood components collected and screened for HIV, HBV, HCV and Syphilis.	100	100	100	100	100	100
			Proportion of whole blood units collected and converted to safe blood components for transfusion	70	N/A	70	75	80	85
			Number of Satellite Blood Transfusion Centres with Capacity to prepare blood components	30	30	35	40	55	70
			Number of transfusing facilities with Hemovigilance surveillance reporting capacity	350	384	450	500	550	600
			Proportion of blood donors notified on their status of Transfusion	60	33.8	70	80	85	90

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Transmissible Infections (TTIs) serological results						
			Number of Satellite Blood Transfusion Centres and transfusing facilities using the Damu-KE platform for Accountability and Traceability of blood and blood products	150	150	200	270	340	400
		Human Cells, Tissue and Organ Transplant Services	Number of the guidelines and standards completed and disseminated	12	N/A	6	9	12	15
			Number of registered human cells, Tissue and organ transplant centres mapped and register	10	N/A	N/A	6	8	10
			Percentage of Completion of Digitizing transplant service and rollout to transplant facilities and establishments	50		40	70	90	100
			Proportion of Clinical and forensic autopsies performed	100	100	100	100	100	100
	Proportion of Expert opinions given		100	100	100	100	100	100	
	Forensic and Pathology Division	Forensic, Histology and Pathology services	Proportion of exhumations performed for medical forensics	100	100	100	100	100	100
			Proportion of Criminal related death scenes viewed.	100	100	100	100	100	100
			Percentage of Histo-cytopathology examination for cancer diagnosis carried out	70	70	80	100	100	100
			Proportion of scientific interpretations of pathology results for clinical decisions	10	10	10	15	15	20

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
<b>Programme 2: Curative and RMNCAH services</b>									
<b>Programme outcome: To increase access to quality curative health care services</b>									
<b>SP 2.1 Communicable diseases control</b>	National Syndemic Diseases Control Council (NSDCC)	HIV Prevention and Management services	Proportion of new infection among adolescents and young people (10-24 years)	50	30	41.7	33.3	25	17
			Number of condoms distributed in non-health settings	6,600,000	4,542,355	6,692,400	6,786,094	6,881,099	6,977,434
			Mother to child transmission Rate (MTCT)	8.3	7.3	7.2	6.2	5	4.9
			Proportion of Counties Visualizing real time HIV and Health Dashboards through Situation Room for decision making	60	100	67	72	80	100
			Proportion of implementing Partners reporting on HIV Management and Prevention Interventions	65	58	72	79	85	95
			Proportion of counties implementing Human-centered Design - Community driven HIV interventions	N/A	28	42.55	53.19	63.83	80.85
	NASCO	HIV Prevention and Management Services	Number of people Currently on ART	1,319,871	1,362,515	1,362,515	1,387,029	1,420,608	1,454,187
			Percentage of newly identified HIV positive and breastfeeding women initiated on highly active antiretroviral therapy	88.8	96.3	96.3	96.5	96.6	96.7
<b>SP 2.2 Non-communicable diseases prevention and control</b>	National Cancer Institute Kenya	Cancer Prevention and Control Services	Number of women of reproductive age screened for cervical cancer	700,000	723,058	750,000	800,000	850,000	900,000
			Proportion of those with pre-cancerous lesions or	10	27.82	27.82	29	30	31.12

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			invasive disease receiving treatment						
			Proportion of eligible people screened for colorectal cancer (people aged 45-75 years)	15	55.3	60	65	70	80
			Number of cancer patients receiving radiotherapy services	3,160	4905	5,580	6,000	6,200	6,547
			Proportion of the essential cancer medicines available at cancer centers	30	0	0	30	35	41
			Number of regional cancer centres established	5	1	2	5	6	6
			Number of intramural and extramural cancer research projects conducted	15	15	15	25	30	40
			Number of CHPs trained on cancer prevention and control	N/A	N/A	360	400	450	500
			Number of counties with county specific cancer prevention and control action plans	25	26	35	40	47	47
			Number of MDACs trained to implement workplace cancer prevention and control programs	44	47	50	60	70	80
			Number of cancer treatment facilities accredited and licensed by NCI-K	N/A	N/A	75	80	85	90
	Division of Mental Health	Mental health management services	Number of counties supported to develop mental health action plans	4	1	7	10	15	13
			Number of counties supported to develop	8	9	9	10	12	16

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
	Kenya Board of Mental Health		mental health promotion and prevention programme						
			Number of mental health units inspected against WHO Quality Rights standards	8	3	3	8	12	14
	Non-Communicable Diseases (NCD) Prevention and Control Unit	Diabetes and hypertension curative services	Number of diabetes patients receiving treatment	250,000	220,036	220,036	320,000	340,000	413,309
			Number of hypertensive patients receiving treatment	350,000	411,627	411,627	700,000	800,000	1,025,582
	Violence and Injuries Prevention and Control Division	Trauma Prevention Control Services	Percentage completion of Trauma registry	75	75	75	100	100	100
	Geriatrics Medicine	Geriatrics services	Proportion of counties with HCPs trained on integrated care of older persons.	10	4	4	30	40	26
			Percentage completion of Parkinson's Disease registry	75	0	0	100	100	100
	<b>SP 2.3 Reproductive Maternal Neonatal Child and Adolescent Health</b>	Department of Family Health	Family Planning Services	Proportion of Women of reproductive age receiving FP commodities	53	53	53	56	57
Maternal Neonatal and Child Health Services			Proportion of pregnant women attending at least 4 ANC visits	65	55.2	55.2	74	79	93.2
			Proportion of women receiving post-natal care within 2-3 days of delivery	58	64.5	64.5	66	70	72.3
			Proportion of mothers delivered by Skilled Birth Attendant	88	75.2	75.2	80	85	89.8
			Facility based maternal mortality rate per 100,000 deliveries	97	96.6	96.6	91	88	83.2



Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Facility based neonatal deaths per 1000 live births	8	9.5	9.5	6	4	2
			Under five mortality rate per 1,000 live births	40	42	42	30	25	16
			Proportion of children under age 5 developmental milestones on track in health, learning, and psychosocial wellbeing.	82	79	79	87	80	83
			Number of Pre-school and school going children de-wormed in Millions	6	9.4	9.4	10.6	10.7	11.5
<b>SP 2.4 Immunization Management</b>	Division of National Vaccines and Immunization program	Vaccines and Immunization Services	Proportion of fully immunized children under 1 year (Proxy Penta 3)	89	84	84	90	92	96
			Proportion of Health Facilities with Functional Cold Chain Equipment	90	92	92	92	94	95
			Proportion of fully immunized adults with Covid19 vaccine	100	34	34	25	19	15
<b>SP 2.5 Curative Services</b>	Orthopedics and Trauma Unit	Orthopedics and Trauma services	Percentage of completion of Orthopedics & Trauma bill	60	20	60	80	100	N/A
	Clinical Services Unit	Clinical services	Number of Health and wellness clients screened at the MoH health and wellness center	400	1	400	400	400	400
			proportion of Afya house clinic upgraded	30	50	60	70	100	N/A
	Radiology & Medical Diagnostic Unit	Radiology and Medical Diagnostic Services	Percentage of implementation of the Radiographers Act	60	75	90	100	N/A	N/A
	Rehabilitative Unit	Rehabilitative Services	Proportion of counties supported to implement Disability Medical Categorization	20	10	30	42	47	N/A

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28	
	Oral Health Section	Oral Health services	Number of amalgam phase down tools developed	4	0	4	1	1	1	
			Proportion of facilities providing oral health services	13	0	13	26	36	50	
	Hearing Care Section	Ear and Hearing Care Services	Proportion of facilities providing Ear and Hearing care services	20	0	20	30	40	50	
	Nursing services	Critical care services	Number of nurses sponsored for critical care services training	250	150	300	350	350	350	
	Eye Health Section	Specialized eye care services	Number of New Diabetic eye care centers established in facilities	6	0	6	8	10	15	
			Number of patients accessing cataract surgical services	N/A	N/A	32,707	35,000	38,000	40,000	
			Percentage of patients achieving good surgical outcomes after cataract surgery.	N/A	N/A	30	45	50	60	
			Number of county referral hospitals offering comprehensive refractive error services	6	1	10	15	20	30	
			Number of Centers offering Refractive Low Vision Services	10	0	5	10	15	20	
			Number of eye Health Facilities Rehabilitated	4	0	4	7	10	10	
	<b>Programme 3: Health Research and Innovations</b>									
	<b>Programme Outcome: Increased Health Research and Innovations</b>									
	<b>S.P 3.1 Health Innovations</b>	Digital Health Agency	Digital Health information Exchange services	Percentage of Comprehensive and Integrated health information system developed	N/A	N/A	50	50	N/A	N/A
Proportion. of core registries fully operationalized within				N/A	N/A	60	80	100	N/A	

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			the Health Information Exchange						
			% of public health facilities that have a HMIS	N/A	N/A	10	30	50	60
			% of public health facilities that have a HMIS that have been onboarded onto HIE	N/A	N/A	70	80	100	100
			% of health facilities submitting to the Shared Health Record	N/A	N/A	10	30	50	60
			System security audits implemented	N/A	N/A	100	100	100	100
			Certification mechanism operationalized	N/A	N/A	40	100	N/A	N/A
<b>S.P 3.1 Health Innovations</b>	Kenya Biovax Institute	Human vaccine Services	Percentage completion rate of human vaccine fill-and-finish facility	50	14	60	70	90	100
			Number of technology transfers agreements signed	1	0	1	1	1	1
			Number of partnerships and collaborations established	3	4	3	3	3	3
<b>SP 3.2 Medical Research</b>	Kenya Medical Research Institute	Health Innovation and Research Services	Number of New research proposals approved	196	178	178	196	205	210
			Number of ongoing Research Projects	550	531	531	550	570	590
			Number of products/Diagnostic kits produced	180,484	204,923	220,460	242,506	244,711	269,182
			Number of Innovation incubated	N/A	N/A	N/A	1	1	1
			Number of clinical trials/product evaluations undertaken	N/A	N/A	N/A	60	80	100
			Number of Natural Products developed	N/A	N/A	N/A	1	1	1
			Number of research Papers published	524	431	522	525	528	530

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Number of research Abstracts presented in Scientific Conferences	212	272	210	215	218	220
			Number of Scientific & Health Conferences held	3	3	3	3	3	3
			Number of Evidence briefs developed	17	8	8	14	15	16
			Number of specialized laboratory tests undertaken	568,242	971,376	971,376	1,019,944	1,070,942	1,124,489
			Number of partnerships and collaborations	86	86	86	86	87	88
			Number of New MOUs signed	N/A	N/A	N/A	3	3	3
			Number of Students enrolled MSc & PhDs	88	90	117	119	120	123
<b>Programme 4: General Administration, Planning and Support Services</b>									
<b>Programme Outcome: Strengthen Governance and Leadership in the State Department</b>									
<b>4.1 General Administration</b>	General Administration Services	Administration support services	Number of workplace policies developed and implemented	5	5	5	5	5	5
			Proportion of complaints addressed within 21 days from lodge	100	100	100	100	100	100
			Client satisfaction index	80	10	80	90	95	100
			Guideline for donations management developed and implemented	1	1	1	1	1	1
	ICT Services	ICT Services	Ratio of staff to functional computers/laptops	02:01	1.01	01:01	01:01	01:01	01:01
			Proportion of institutions with functional LAN and WAN	50	50	75	100	100	100
	Human Resource Management & Development division	Human Resource Management Services	Number of health care workers recruited	146	0	34	54	60	70
			Number of employees trained	15	0	22	500	550	450
			Percentage of state corporations Organization structures reviewed.	15	0	74	100	N/A	N/A

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
	Director of Health Office S	Health Sector collaboration and partnership services	Proportion of Kenya Health Sector Caucus recommendations implemented	100	26	100	100	100	100
			Proportion of Regional International Health Governance Fora Resolution implemented	100	N/A	100	100	100	100
			Number of publications on Medically Certified Cause of Death (MCCoD) statistics	2	100	2	2	2	2
			Publish annual health statistics	1	1	1	1	1	1
<b>SP 4.2: Financing, planning, Monitoring and Evaluation</b>	Finance division	Financial Services	Percentage of allocated funds utilized as per plan	100	96	100	100	100	100
			Number of quarterly budget reports submitted	4	4	4	4	4	4
			Total AIA collected (KSH.B)	18	18	19	20	21	21
	Central Planning & Projects Monitoring Department	Planning & M&E services	Number of policy briefs prepared	10	5	6	6	6	6
			Number of capital projects monitored for progress	4	0	4	4	4	4
			Number of Counties trained on planning, budgeting and M & E	47	30	47	47	47	47
			Number of SAGAs and regulatory bodies sensitized on planning, budgeting and M & E	15	0	15	15	15	15
	<b>SP 4.3 Social Protection in Health</b>	Division of Health-Care Financing	Health Financing Services	Number of Counties sensitized on FIF guideline.	24	0	12	12	12
Proportion of Facility Improvement Fund bill implementation by Counties				100	20	30	50	70	100
Number of health care providers trained in				100	0	50	50	50	50

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			strategic purchasing for health care services						
			Proportion Costing of Healthcare services done for Levels 1 - 6	50	25	25	25	25	25
			Kenya Household and Health Expenditure and Utilization Survey conducted	1	0	1	N/A	N/A	1
			Percentage of FIF Bill and regulations developed enacted and disseminated	100	20	20	20	20	20
	SHA/ NHIF	Increased access to healthcare	Number of indigents and Elderly accessing government health insurance subsidies	1,785,986	1,178,986	-	1,785,986	1,229,986	2,795,986
			Number of expectant mothers accessing healthcare services through the Linda mama program	1,231,200	870,550	1,231,200	1,231,200	1,231,200	1,231,200
			Essential Benefit Package reviewed and operationalized	1	1	1	1	1	1
			Percentage of Social Health Insurance Fund operationalized	100	5	40	50	80	100

## STATE DEPARTMENT FOR PUBLIC HEALTH AND PROFESSIONAL STANDARDS

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
<b>Programme 1: Preventive and Promotive Health Services</b>									
<b>Programme Outcome: Reduced disease burden due to preventable causes</b>									
SP 1.1 Communicable disease control	National TB, Leprosy and Lung Diseases Control Programme	TB, Leprosy and lung health control services.	Number of TB cases notified (All forms)	99,878	97,126	99,332	98,053	94,903	90,123
			Number of MDR-TB cases notified	1085	706	1081	1068	1041	1001

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Proportion of successfully treated TB cases (all forms of TB)	88	89	95	95	95	95
			Proportion of Multi drug resistant TB successfully treated	81.5	78	95	95	95	95
			Number of people in contact with TB patients who began preventive therapy treatment	74,184	167,776	95,232	116,613	136,276	148,860
			Percentage of patients with all forms of leprosy who successfully complete treatment.	N/A	N/A	50	90	90	90
	National Malaria Programme	Malaria promotive, preventive and curative services.	Number of Artemisinin Combination Therapy (ACTs) doses distributed to public health facilities (millions)	6.9	5.7	5.9	6.1	6.5	6.7
			Malaria incidence per thousand population	82	88.5	105	42.2	31.6	21.1
			Proportion of Confirmed Malaria Cases treated	100	99	91	100	100	100
			Proportion of suspected cases tested	100	87.1	89	100	100	100
			Proportion of Confirmed Malaria Cases treated	100	99	100	100	100	100
			Number of Routine Long Lasting Insecticidal Nets distributed (in millions)	2.2	1.7	1.9	2	2.1	2.2
SP 1.2 Disease Surveillance and Epidemic Response	Division of Disease Surveillance and Response	Disease surveillance and response services.	Non-Polio Acute Flaccid Paralysis Detection rate (NPAFP) per 100,000	3	3.47	3.47	2	2	2
			Number of counties with functional Community Events Based Surveillance (CEBS)	47	8	8	20	35	47

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Number of hospitals with Functional Events Based Reporting System	20	463	463	700	1000	1500
	Division of National Emergency, Preparedness and Disaster Response	Health emergency and disaster preparedness and response services.	Number of counties with functional emergency and disaster committees	N/A	N/A	18	17	12	N/A
			National functional Command and control centre	N/A	N/A	N/A	N/A	1	N/A
			Number of centres for management of CBRN Incidents established	N/A	N/A	N/A	10	15	12
			Capacity built CHPs on Community risk governance and emergency response	N/A	N/A	N/A	40,000	20,000	20,000
			Number of health workers trained joint emergency services.	N/A	N/A	104	705	1,000	1,500
			Public Health Emergency Operations Centre	Public Health Emergency services.	Number of County PHEOC staffs trained on Rapid Response	100	123	200	250
	Number of Counties with Functional PHEOCs	23			24	30	35	35	47
	Proportion of Public Health Emergencies responded to.	100			100	100	100	100	100
	Field Epidemiology & Laboratory Training Program (FELTP)	Health Care workers training services.	Number of Health care trained on FELTP	30	20	20	20	20	20
	Division of Vector Borne & Neglected Tropical Diseases	Vector Borne & neglected tropical diseases treatment services.	Number of people treated for trachoma (Millions)	1.2	1.8	2	2.4	2.6	3
			Number of people treated for Bilharzia. (Millions)	6	1.9	3	4	5	6
			Number of people treated for intestinal worms. (Millions)	12	5.1	10	12	13	14
	Division of Zoonotic Diseases	Zoonotic diseases surveillance	Number of people diagnosed with Rabies	5	2	4	6	7	8



Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
	Division of National Laboratory Services	services. of diseases	Number of counties supported to investigate and respond to priority zoonotic diseases	7	5	7	8	9	10
		National laboratory services.	Number of medical laboratories with capacity to detect and report on Antimicrobial Resistance	20	22	28	29	32	38
			Number of accredited laboratories in the ASAL categorized cohort	4	4	6	6	6	6
			Number of certified laboratories in the Laboratory Continuous Quality Improvement (LCQI) program	30	31	32	34	37	39
			Number of External Quality Assurance (EQA) scopes in the Kenya National External Quality Assurance Scheme (KNEQAS)	10	11	14	16	20	28
SP 1.3: Public Health Services	Environmental Health	Sanitation and hygiene services	Proportion of Villages certified as open defecation free	37	6	30	33	50	100
			Proportion of population accessing safely managed sanitation facilities	30	29.98	32.9	33.0	35.0	39.0
		Waste management and climate change mitigation services	Number of health facilities with installed and compliant waste treatment equipment	11	10	5	5	5	5
			Center of excellence for research evidence translation fully established and operationalize	N/A	N/A	20	30	30	20

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Number of health workers capacity built on climate change and health	N/A	N/A	50	50	50	50
			Number of counties implementing Epuka Uchafu ,Afya Nyambani initiative	N/A	N/A	10	10	10	10
		Occupational Health and Safety standards	Number of healthcare facilities implementing occupational health and safety standards	5	5	10	10	10	10
		Vector and vermin infestations control services	Number of POEs capacity build to undertake vector and vermin control services	8	2	10	10	5	5
	Division of Food safety	Food safety services.	Number of food business operators capacity built on risk based assessment	N/A	N/A	50	50	50	50
	Tobacco Control Board	Tobacco control and enforcement services.	Number of Enforcement officers trained	400	0	100	100	100	100
			Capacity build the counties Tobacco control Focal point	N/A	N/A	15	10	10	12
			Number of multisectoral POEs staff capacity built	N/A	N/A	50	50	50	50
	Division of Drugs and Substance Abuse Control	Drugs and substance abuse control services.	Number of awareness campaigns conducted	N/A	N/A	25	25	25	25
			Number of Stakeholder engagement events conducted	N/A	N/A	25	25	25	25
			Number of studies and surveys done	N/A	N.A	2	3	3	3
			Number of new treatment and rehabilitation centers established	N/A	N/A	10	15	15	15
	Division of Nutrition and Dietetics	Malnutrition prevention & Nutrition promotion services.	Proportion of children 6-59 months who received 2 doses of Vitamin A Supplementation (VAS)	80	85.2	86	87	87	87

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Number of children 6-23 months receiving Micronutrient Powders (MNPS)	218,977	361,781	13,000	15,000	20,000	25,000
			Number of healthcare workers trained on high impact nutrition interventions	6,800	3,545	2,500	2,000	2,000	2,000
			Treatment cure rate of acutely malnourished children 6-59 months	83	86	86	86	86	86
			Treatment cure rate of moderate acute malnourished children 6-59 months	83	84	85	85	85	85
			Treatment cure rate of acutely malnourished pregnant and lactating women	90	88	90	90	90	90
			Percentage of eligible patients who received specialized feeds(parenteral and enteral)	N/A	N/A	10	20	30	40
			Percentage of patients at least of malnutrition receiving nutrition care	N/A	N/A	N/A	10	20	30
			Number of guidelines, developed	3	4	4	3	3	3
			Division of Health and Wellness	Mental health and Mental Wellness services.	No. of employees trained on mental health and wellness.	N/A	N/A	N/A	40
Kenya National Public Health Institute	National Public Health Services	Proportion of outbreaks detected within 7 days of the first case	N/A	N/A	50	90	90	90	

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Proportion of detected outbreaks notified within 1 day	N/A	N/A	90	90	90	90
			Proportion of notified outbreak controlled within 7 days	N/A	N/A	50	90	90	90
	Division of Port Health	Port health services.	Number of travellers screened for notifiable diseases	6,000,000	5,694,927	5,750,000	5,800,000	5,950,000	6,000,000
			Number of travellers issued with vaccination certificates as per travel requirements	30,000	23,440	24,000	25,500	285,00	30,000
			Number of tonnes of cargo cleared as per health requirements at POEs	1,460,00	6,096,420	6,500,000	7,100,000	7,500,000	8,000,000
			Number of conveyances inspected and issued with disinfection/disinfection certificates	500,000	57,329	425,000	455,000	475,000	500,000
			Number of POEs with digitized services	26	32	35	N/A	N/A	N/A
SP 1.4- Radiation Safety and Nuclear Security	Kenya Nuclear Regulatory Authority	Nuclear radiation and safety services.	Number nuclear power programme regulations developed	N/A	N/A	2	3	3	3
			Number of nuclear security regulations developed	2	2	3	3	4	5
			Proportion of category I and II radiation facilities complying with physical protection measures	100	100	100	100	100	100
			Percentage of radiation contamination tests performed on consumer products	50	50	60	70	75	75
			Percentage of compliant radiation facilities	80	70	85	90	90	95

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Proportion of environmental radiological mapping and characterization of High Background Radiation Areas	20	10	15	20	30	40
			Percentage of radioactive waste collected and conditioned at the central radioactive waste processing facility	30	20	30	40	40	50
			Number of electromagnetic radiation safety regulations developed	N/A	N/A	2	3	3	4
SP 1.5 Primary Health Care	PCN Division	Community health services.	Number of hospitals mapped as hubs for the PHC Networks	47	191	50	40	34	N/A
			Number of functional primary care networks (PCNs)	150	191	30	40	30	24
	Community Health	Number of CHPs facilitated	100,000	94,390	107,831	107,831	107,831	107,831	
		No. of CHP Kits procured	100,000	100,000	N/A	N/A	7,831	N/A	
		No of Mobile Phones to support CHIS procured	100,000	100,000	N/A	N/A	7,831	N/A	
		No of Household supported by CHPs (in Millions)	N/A	N/A	7.8	8.6	10.8	12.5	
SP 1.6 Health Promotion and Education	Division of Health Promotion and Advocacy	Health promotion and advocacy services.	Number of health promotion and advocacy policies, strategies and guidelines developed	3	3	1	1	1	1
			Percentage of health promotion call centers operationalization	40	50	60	70	80	90
	School Health Programme	School health services.	Number of School based Health promoters trained	N/A	N/A	150	300	1000	5,000

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Number of packages of school-based health and nutrition services developed	N/A	N/A	1	N/A	N/A	N/A
			Number of School health surveys carried out	N/A	N/A	1	N/A	N/A	1
			No. of Policies developed	N/A	N/A	1	N/A	N/A	N/A
			Number of National Guidelines & Standards on Skill Based Health Education developed	N/A	N/A	N/A	1	N/A	N/A
			Number of School age children dewormed in millions	4	5	6	7	8	10
<b>Programme 2: Health resource development and innovation</b>									
<b>Programme Outcome: Enhanced health human resources for quality healthcare</b>									
SP 2.1 Capacity Building and Training	Kenya Medical Training College	Capacity development and training services.	Number of students enrolled	17,200	27,426	24,000	24,350	24,750	25,000
			Number of CHAS trained	700	3,934	3,934	4,034	4,134	4,200
			Proportion of health professionals(cohort) certified	99	98	98	98	98	98
			No. of evidence-based policies developed	10	8	10	12	13	15
SP 2.2 Research and innovation on Health	Kenya Institute of Primate Research	Primate research and innovation services	No. of peer reviewed scientific publications	34	46	34	40	40	40
			No. of people trained on biomedical knowledge and skills	52	99	100	100	110	110
			No. of candidate drugs and vaccines tested	6	11	6	6	6	6
			No. of bacteriophages (phages) isolated for treatment of multidrug resistant bacteria	N/A	N/A	3	3	3	3

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			No. of community outreach education forums conducted on ecosystem health & primate conservation	5	5	7	10	12	15
			No. of colony bred non-human primates	40	40	40	40	40	40
			No. of humans samples at wildlife, livestock interface tested	300	1,296	300	300	300	300
			No. of vector-borne samples at high-risk interface tested	1,500	812	1,500	1,500	1,500	1,500
		Snakebite rescue & intervention services	No. of victims successfully rescued from snake bites	265	288	290	295	300	300
			No. of snake venom profiled for anti-venom development	N/A	N/A	4	4	4	4
			No. of anti-venom generated for preclinical testing	2	2	2	2	2	2
SP 2.3 Health Professional services	Health Sector Coordination & Intergovernmental Relations	Intergovernmental health Coordination services.	Number of health sector intergovernmental forums held	4	2	4	4	4	4
			Proportion of resolutions from IGF implemented	10	3	10	10	10	10
	International Health Relations	International health relations services.	Number of Negotiations/ meeting on MOUs attended	N/A	N/A	2	2	2	2
			Number of treaties ratified and domesticated	N/A	1	1	1	1	1
<b>Programme 3: Health Policy Standards and Regulations</b>									
<b>Programme Outcome: Strengthened quality health standards and regulations</b>									
SP:3.1 Health Standards and Quality	Kenya Health Professions Oversight Authority	Health Professionals regulatory services.	Percentage of health facilities inspected for compliance to norms and standards of healthcare delivery	30	22	25	28	35	50
			Number of Health professional training institutions assessed for	40	76	150	180	200	220

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			compliance to norms and standards of training						
			Number of unregulated health professionals registered	1500	1975	2,500	3,000	3,500	4,000
			Number of Scopes of Practice for previously unregulated health professional cadres developed	N/A	3	6	7	8	9
			Percentage of complaints and disputes received and processed	100	100	100	100	100	100
	Kenya Health Human Resource Advisory Council (KHRAC)	Health Professionals management and advisory services.	Percentage master register for all health practitioners developed	55	20	60	80	90	100
Number of Health Workers trained on integrated Human Resource Information System.			100	120	100	100	100	100	100
Number of HCWs trained on National Health Workforce Accounts.			100	120	100	100	100	100	100
No of Frameworks for Management of Specialist health care workers Developed			1	0	1	N/A	1	N/A	
	Kenya Medical Practitioners and Dentist Council	Health Professionals regulatory services.	Number of Medical and dental Officer Interns placed	912	466	466	1,100	1,200	1,250
Number of new Medical, Dental and Community Oral Health Officers practitioners registered.			1,325	1,025	1,025	1,050	1,100	1,150	
Number of Medical, Dental and Community Oral Health Officers practitioners with			11,960	12,507	12,507	12,800	13,100	13,500	



Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			active annual practice licenses.						
			Number of health facilities with active annual operating licenses.	8,000	12,406	12,406	12,700	13,000	13,200
			Number of compliance inspections carried out	3,560	5,025	5,025	5,400	5,800	6,200
			Proportion of Medical, dental internship and specialist training centers inspected.	100	100	100	100	100	100
			Number of new accredited Continuous Professional Development (CPD) providers.	0	17	17	22	26	30
	Nursing Council of Kenya	Health Professionals regulatory services.	Number of nurses and midwives newly registered	6,238	12,583	6,400	6,600	6,800	7,000
			Number of eligible candidates examined	11,418	19,383	12,000	12,500	13,000	13,500
			Number of eligible candidates Indexed	10,000	13,678	12,000	13,000	14,000	15,000
			Percentage of nurses and midwives retained	49	58.96	55	60	65	70
			Proportion of training institutions that are audited for compliance	80	89	100	100	100	100
			Proportion of health facilities audited for compliance	100	100	100	100	100	100
	Clinical Officers Council	Health Professionals regulatory services.	Number of Clinical Officers trainees Indexed	2500	4958	3400	3500	3600	3700
			Number of Clinical Officers Registered	3000	777	3000	3100	3200	3300
			Number of Clinical Officers Licensed	15,000	19851	20000	21000	22000	23000
			Proportion of clinical training institutions for clinical medicine inspected.	67	18	30	40	50	60

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Proportion of health facilities operated by clinical officers inspected	72	56	78	82	86	90
	Public Health Officers and Technicians Council - Kenya	Health Professionals regulatory services.	Number of public health candidates Assessed	400	438	510	550	600	650
Number of public health interns placed			400	0	470	500	550	600	
Number of public health practitioners licensed			1420	200	4370	4850	5000	5300	
Number of newly accredited internship centers public health students.			2	2	4	6	8	10	
Number of H/F inspected for compliance			90	0	5	10	15	20	
Number of public health training institutions inspected			15	3	5	8	10	12	
Number of new CPD providers accredited			5	0	5	7	9	11	
			Counselors and Psychologist Board	Health Professionals regulatory services.	Number of Counselors & Psychologist trainees Indexed	4000	0	N/A	4000
Number of Counselors & Psychologist Registered	5000	4000			5000	6000	7000	8000	
Number of Counselors & Psychologist Licensed	5000	1250			3000	3750	4500	6000	
Number of clinical facilities registered and licensed	20	2			25	50	75	100	
Number of training institutions for Counsellors and Psychologist inspected	35	0			25	50	75	100	
Number of institutions accredited to offer CPD	5	2			5	5	5	5	
Number of Rules & Regulation formulated	1	0			7	7	7	7	

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
	Occupational Therapy Council of Kenya	Health Professionals regulatory services.	Number of occupational therapy students indexed	N/A	N/A	50	70	90	120
			Number of occupational therapy clinical facilities registered	5	0	5	7	10	16
			Number of occupational therapy clinical facilities licensed	5	0	5	10	14	16
			Number of occupational therapy training institutions licenced	1	0	2	4	5	6
			Number of Occupational Therapists Registered	200	350	400	200	200	200
			Number of Occupational Therapists licensed	200	350	400	600	800	1000
			Number of Standards of Practices for occupational Therapy developed	N/A	N/A	N/A	1	N/A	N/A
			Number of Rules & Regulation Developed	1	0	1	N/A	N/A	N/A
			Number of SOPs developed	1	0	1	1	1	1
			Number of scope of practice developed	1	0	1	N/A	N/A	N/A
			Number of Human resource instruments developed	N/A	0	N/A	1	0	0
			Number of new accredited Continuous Professional Development (CPD) providers.	2	0	5	7	9	11
			Physiotherapy Council of Kenya	Health Professionals regulatory services.	Number of physiotherapy facilities inspected	30	38	45	50
	Number of students indexed	0			0	300	315	350	400
	Number of practitioners licensed	200			236	260	290	320	360
Number of training programs inspected	2	2			3	3	3	3	

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Number of scopes of practice developed	1	2	1	1	1	1
			Number of policies developed	1	2	2	2	2	2
			Number of guidelines developed	1	1	2	2	2	2
	National Quality Control Laboratory	HPTs Quality assurance services.	Proportion of medical drugs tested for quality, safety of the citizens	100	63.1	80	90	100	100
			Proportion of medical devices tested for quality, safety of the citizens.	100	100	100	100	100	100
			% of the laboratory completed	30	0	N/A	15	75	100
			Number of research activities undertaken	100	10	5	5	5	5
	Health Records and Information Managers Board	Health Professionals regulatory services.	Number of training institutions accredited	5	2	10	12	13	15
			Number of HRIM professionals licensed	3000	1263	3500	4000	4500	4500
			Number of policy documents developed	3	1	2	3	4	5
	Pharmacy and Poisons Board	Health professionals and HPTs regulatory services.	Number of new products registered	8000	1538	2400	2500	2500	2500
			Number of Pharmacists and pharmaceutical technologists licensed	1000	1040	800	1000	1200	1400
			Number of Joint Market Surveillance and Regulatory inspections done	36	8	24	30	36	40
			Number of new clinical trials approved.	50	4	30	40	50	60
			Number of pharmaceuticals import and export permits approved.	33,000	7,388	30,000	30,000	30,000	30,000

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
	Kenya Medical Laboratory Technicians and Technologists Board	Health professionals' regulatory services.	Number of medical laboratory science students indexed	1200	1246	1400	1600	1800	2000
			Number of eligible candidates examined for MLS licensure examination.	1700	692	2000	2500	3000	3200
			Number of Medical Lab Technologists registered	1300	597	1400	1500	1600	1700
			Number of MLS licenses issued	15000	12814	16000	17000	17800	18600
			Number of labs registered	4500	5094	5350	5500	5840	6340
			Number of laboratory facilities licensed	3500	3503	4000	4600	5100	5500
			Number of IVDs vendor companies registered	200	78	85	94	105	110
SP 3.2 Health Policy and Regulations	Directorate of Health Standards, Regulation and Quality Assurance.	Health policy, regulatory and quality assurance services.	Number of health Norms and Standards developed	1	0	1	1	1	1
			Number of Bills /Regulations developed	2	0	1	2	2	2
			HRH policy developed	1	0	1	N/A	N/A	N/A
			HRH Strategy developed	1	0	1	N/A	N/A	N/A
			Health professionals' Migration guidelines developed	N/A	N/A	N/A	1	N/A	N/A
	RSSH Unit	Resilient systems for Health	Systems readiness index for CHPs developed	N/A	N/A	N/A	1	N/A	N/A
	Percentage of Health Facilities submitting reports in the KHIS		N/A	N/A	100%	100	100	100	
<b>Programme 4: General Administration, Planning and Support Services</b>									
<b>Programme Outcome: Effective governance and administration strengthened</b>									

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
SP4.1: General Administration and Human Resource management and development	General administration	General administration services.	Number of CCTV installed in Afya House and Afya Annex Campuses	50	0	30	30	30	30
			Number of biometric logs installed	400	20	N/A	20	20	30
			Number of staff sensitized on HIV Prevention and NCDs; citizen service delivery charter/process; resolution of public complaints; Alcohol and drug abuse; disability, gender, National values and principles governance, corruption prevention	500	500	700	700	700	800
	ICT Division	ICT Services	Number of Information Communication Technology (ICT) Systems deployed	2	2	1	1	1	1
			Workplace Digitalization and Automation Strategy developed	1	0	1	N/A	N/A	N/A
			IT Security Policy Developed	N/A	N/A	N/A	1	N/A	N/A
			Disaster Recovery and Backup Plan Developed	N/A	N/A	N/A	N/A	1	N/A
	Human Resource Management & Development division	Human resources management services.	Number of health care Professional interns engaged.	1,159	4,156	8,578	9,000	9,200	9,500
			Number of Health workers trained	261	0	120	130	160	180
			Number of regular staff trained	N/A	N/A	309	350	370	400
	Public Communication Division.	Public Communication Services	Number of press releases, media briefing and engagements, official statements, media briefings and social media/ website posts	20	18	20	16	22	30

Programme	Delivery Unit	Key Output	Key Performance Indicators	Target 2023/24	Actual Achievement 2023/24	Target (Baseline) 2024/25	Target (2025/26)	Target 2026/27	Target 2027/28
			Number of articles published/photos/videos	30	30	20	17	25	28
	Records Management Services	Records management services	Number of records digitized	40	0	30	20	20	20
			No. of Records Management Policies developed.	1	0	0	0	0	1
	Supply Chain Management Unit	Supply chain management services	List of Registered Suppliers updated	1	1	1	1	1	1
			Annual Procurement Plan developed	1	1	1	1	1	1
			Asset register updated	1	1	1	1	1	1
			Percentage of obsolete/surplus assets disposed	100	0	100	100	100	100
SP4.2: Financing and planning	Finance Division	Financial management services	Absorption Rate determined	100	87	100	100	100	100
			Number of budget reports submitted	4	4	4	4	4	4
			Institutional Risk Management Policy Framework developed	N/A	N/A	1	N/A	N/A	N/A
	Tax Exemption Unit		Number of tax exemption applications processed	420	502	520	600	650	650
			Number of sensitization forum held	N/A	N/A	3	3	3	3
	Central Planning & Projects Monitoring Unit	Planning and M&E services.	Number of monitoring and evaluations on capital projects carried out.	4	4	10	10	10	10
			Number of officers trained on planning, budgeting and M&E	300	0	200	250	300	350
			Number of surveys conducted	2	2	2	1	2	2
			Number of Directorates, SAGAs/ regulatory bodies sensitized on planning, budgeting and M & E	20	0	5	5	5	5





### **3.1.3. Programmes by Order of Ranking**

The eight programs in the sector will be prioritized for resource allocation based on their contribution to population health and well-being. The programs, in order of their ranking, are:

- a) State Department of Medical Services
  - i. National Referral and Specialized Services
  - ii. Curative and Reproductive, Maternal, Neo-natal, Child and Adolescent Health (RMNCAH) Services
  - iii. Health Research and Innovation
  - iv. General Administration
- b) State Department of Public Health and Professional Standards
  - i. Preventive and promotive Health services.
  - ii. Health resource development and innovation.
  - iii. Health Policy standards and regulations; and
  - iv. General Administration.

### **3.1.4. Resource Allocation Criteria**

#### **Criteria for sharing Recurrent Budget**

- 1 Provision for in-post staff based on actual payroll for months of July, August & Sept 2024 and projection to end of FY
- 2 Wage drift of 3% to cater for annual increment
- 3 Provision for statutory deductions
  - a) Employer contribution to NSSF- Ksh.360 for employees in contributory pension schemes and KSh.1080 on employees not in contributory pension schemes
  - b) Employer contribution to Housing Levy Fund- 1.5% of gross pay
  - c) Employer contribution to NITA - Kshs.50 per employee per month
- 4 BETA Priorities namely;
  - a) Provision for 8,571 UHC HRH
  - b) Provision for 8578 Interns
  - c) Provision for 107,831 CHPs
  - d) Recruitment of 20,000 HRHs
- 5 Provision for contractual staff under Port Health Services
- 6 Signed CBAs - Provision for basic salary arrears for doctors inline with signed Return to Work Formula
- 7 Consideration for actual AIA collections
- 8 Actual expenditures and projection for utilities - signed contracts, existing bills
- 9 Requirements for pending bills

#### **Criteria for Sharing Development Budget**

- 1 Counterpart Funding - To be supported by Financing agreements

- 2 Prioritise BETA Priorities \_ Human Vaccine Production, Establishment of NCQL Lab towards achievement of Maturity Level 3, Comprehensive Integrated Health Information System
- 3 Strategic Programmes - Family Planning Commodities, Procurement of vaccines, HIV, TB and Malaria
- 4 Prioritise completion of Projects - 80% level of completion to create fiscal space in ensuing budgets
- 5 Prioritise payment of pending bills - CHPs Kits, CHIS
- 6 Consideration of new Projects to be done only if processed inline with the provisions of Public Investment Management Regulations, 2022

### 3.2. Analysis of Sector and Subsector Resource Requirement versus allocation:

**TABLE 3 . 2 SECTOR & SUB-SECTOR RECURRENT REQUIREMENTS/ALLOCATIONS**

#### HEALTH SECTOR

Vote Details	Requirement				Allocation		
	Approved Estimates	2024/25	2025/26	2026/27	2027/28	2025/26	2026/27
<b>Gross</b>	<b>86,828.7</b>	<b>390,475.9</b>	<b>408,713.0</b>	<b>432,879.5</b>	<b>170,448.0</b>	<b>176,241.7</b>	<b>184,863.9</b>
AIA	30,397.0	148,185.2	161,479.0	175,163.7	110,008.4	112,671.7	115,519.6
<b>NET</b>	<b>56,431.7</b>	<b>242,290.8</b>	<b>247,234.0</b>	<b>257,715.7</b>	<b>60,439.6</b>	<b>63,570.1</b>	<b>69,344.3</b>
<b>Compensation</b>	13,240.0	15,237.1	15,526.1	15,818.6	13,637.0	13,882.0	14,299.0
<b>Transfers</b>	71,853.7	365,872.9	380,346.3	398,258.2	155,023.0	160,502.7	168,634.9
<b>Other Recurrent</b>	1,735.0	9,365.9	12,840.7	18,802.6	1,788.0	1,857.0	1,930.0
<b>Of Which</b>							
<i>Utilities</i>	93.1	103.0	110.8	119.9	94.1	94.8	95.6
<i>Rent</i>	-	-	-	-	-	-	-
<i>Insurance</i>	-	-	-	-	-	-	-
<i>Subsidies</i>	-	-	-	-	-	-	-
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Contracted Guards &amp; Cleaners Services</i>	60.0	66.0	68.0	70.0	65.0	65.0	65.0
<i>Others</i>	1,581.9	9,196.9	12,661.9	18,612.8	1,628.9	1,697.2	1,769.4
<b>TOTAL VOTE</b>	<b>86,828.7</b>	<b>390,475.9</b>	<b>408,713.0</b>	<b>432,879.5</b>	<b>170,448.0</b>	<b>176,241.7</b>	<b>184,863.9</b>

#### STATE DEPARTMENT FOR MEDICAL SERVICES

Vote Details	Requirement				Allocation		
	Approved Estimates	2024/25	2025/26	2026/27	2027/28	2025/26	2026/27
<b>Gross</b>	<b>64,242.5</b>	<b>350,614.9</b>	<b>364,380.6</b>	<b>378,572.9</b>	<b>144,127.3</b>	<b>148,717.1</b>	<b>155,419.9</b>
AIA	22,377.0	139,166.8	151,997.7	165,252.6	100,991.0	103,191.4	105,609.5
<b>NET</b>	<b>41,865.5</b>	<b>211,448.1</b>	<b>212,382.9</b>	<b>213,320.2</b>	<b>43,136.3</b>	<b>45,525.7</b>	<b>49,810.4</b>
<b>Compensation</b>	7,940.2	7,997.2	8,232.0	8,473.8	7,997.0	8,231.0	8,472.0
<b>Transfers</b>	55,522.2	341,005.3	354,485.6	368,383.0	135,094.2	139,411.0	145,829.9
<b>Other Recurrent</b>	780.1	1,612.4	1,663.0	1,716.2	1,036.1	1,075.1	1,118.1
<b>Of Which</b>							

<i>Utilities</i>	74.0	75.0	80.0	86.0	75.0	75.0	75.0
<i>Rent</i>		-	-	-	-	-	-
<i>Insurance</i>	-	-	-	-	-	-	-
<i>Subsidies</i>	-	-	-	-	-	-	-
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Contracted Guards &amp; Cleaners Services</i>	60.0	66.0	68.0	70.0	65.0	65.0	65.0
<i>Others</i>	646.1	1,471.4	1,515.0	1,560.2	896.1	935.1	978.1
<b>TOTAL VOTE</b>	<b>64,242.5</b>	<b>350,614.9</b>	<b>364,380.6</b>	<b>378,572.9</b>	<b>144,127.3</b>	<b>148,717.1</b>	<b>155,419.9</b>

### STATE DEPARTMENT OF PUBLIC HEALTH AND PROFESSIONAL STANDARDS

Vote Details	Approved Estimates		Requirement				Allocation		
	2024/25	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28		
<b>Gross</b>	<b>22,586.2</b>	<b>39,861.1</b>	<b>44,332.4</b>	<b>54,306.6</b>	<b>26,320.6</b>	<b>27,524.7</b>	<b>29,444.0</b>		
AIA	8,020.0	9,018.3	9,481.3	9,911.1	9,017.3	9,480.3	9,910.1		
<b>NET</b>	<b>14,566.2</b>	<b>30,842.7</b>	<b>34,851.2</b>	<b>44,395.5</b>	<b>17,303.3</b>	<b>18,044.4</b>	<b>19,533.9</b>		
<b>Compensation</b>	5,299.8	7,239.9	7,294.1	7,344.8	5,640.0	5,651.0	5,827.0		
<b>Transfers</b>	16,331.5	24,867.7	25,860.7	29,875.3	19,928.8	21,091.7	22,805.1		
<b>Other Recurrent</b>	954.9	7,753.5	11,177.7	17,086.5	751.9	781.9	811.9		
<i>Of Which</i>									
<i>Utilities</i>	19.1	28.0	30.8	33.9	19.1	19.8	20.6		
<i>Rent</i>	-	-	-	-	-	-	-		
<i>Insurance</i>	-	-	-	-	-	-	-		
<i>Subsidies</i>	-	-	-	-	-	-	-		
<i>Gratuity</i>	-	-	-	-	-	-	-		
<i>Contracted Guards &amp; Cleaners Services</i>	-	-	-	-	-	-	-		
<i>Others</i>	935.8	7,725.5	11,146.9	17,052.6	732.8	762.1	791.3		
<b>TOTAL VOTE</b>	<b>22,586.2</b>	<b>39,861.1</b>	<b>44,332.4</b>	<b>54,306.6</b>	<b>26,320.6</b>	<b>27,524.7</b>	<b>29,444.0</b>		

**TABLE 3.3: SECTOR & SUB-SECTOR DEVELOPMENT REQUIREMENTS/ALLOCATIONS**

### HEALTH SECTOR

Description	Approved Budget	Requirement				Allocation		
	2024/25	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28	
<b>Gross</b>	<b>32,028.00</b>	<b>106,363.65</b>	<b>107,525.57</b>	<b>107,655.46</b>	<b>34,546.79</b>	<b>38,542.03</b>	<b>46,170.00</b>	
GOK	14,908.50	84,707.80	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	-	-	-	-	-	-	-	
Other Recurrent	-	-	-	-	-	-	-	
<b>TOTAL DEVELOPMENT</b>	<b>32,028.00</b>	<b>106,363.65</b>	<b>107,525.57</b>	<b>107,655.46</b>	<b>34,546.79</b>	<b>38,542.03</b>	<b>46,170.00</b>	

**STATE DEPARTMENT FOR MEDICAL SERVICES**

Description	Approved Budget	Requirement			Allocation		
	2024/25	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<b>Gross</b>	<b>27,739.00</b>	<b>76,180.25</b>	<b>76,004.92</b>	<b>81,822.41</b>	<b>29,495.00</b>	<b>30,655.69</b>	<b>40,837.50</b>
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							
Other Recurrent							
<b>TOTAL DEVELOPMENT</b>	<b>27,739.00</b>	<b>76,180.25</b>	<b>76,004.92</b>	<b>81,822.41</b>	<b>29,495.00</b>	<b>30,655.69</b>	<b>40,837.50</b>

**STATE DEPARTMENT OF PUBLIC HEALTH AND PROFESSIONAL STANDARDS**

Description	Approved Budget Allocation	Requirement			Allocation		
	2024/25	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<b>Gross</b>	<b>4,289.00</b>	<b>30,183.40</b>	<b>31,520.65</b>	<b>25,833.05</b>	<b>5,051.79</b>	<b>7,886.34</b>	<b>5,332.50</b>
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							
Other Recurrent							
<b>TOTAL DEVELOPMENT</b>	<b>4,289.00</b>	<b>30,183.40</b>	<b>31,520.65</b>	<b>25,833.05</b>	<b>5,051.79</b>	<b>7,886.34</b>	<b>5,332.50</b>

**TABLE 3.4: ANALYSIS OF PROGRAMMES AND SUB-PROGRAMMES (CURRENT AND CAPITAL RESOURCE REQUIREMENTS (KSH. MILLION))**

**STATE DEPARTMENT FOR MEDICAL SERVICES**

Programmes	Approved Budget			Projection (Requirement)								
	2024/25			2025/26			2026/27			2027/28		
	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total
<b>Programme:1 National Refferal &amp; Specialized Services</b>												
Sub-Programme 1.1: National Referral Health Services	39,427.4	3,081.0	<b>42,508.4</b>	41,881.4	18,675.0	<b>60,556.4</b>	43,943.5	16,150.0	<b>60,093.5</b>	46,108.7	18,852.0	<b>64,960.7</b>
Sub-Programme 1.4: Health Infrastructure Equipment	-	6,075.0	<b>6,075.0</b>	-	11,407.8	<b>11,407.8</b>	-	12,666.2	<b>12,666.2</b>	-	12,949.6	<b>12,949.6</b>
Sub-Programme 1.5: National Blood Transfusion Services	262.9	300.0	<b>562.9</b>	264.3	1,750.0	<b>2,014.3</b>	265.8	1,750.0	<b>2,015.8</b>	267.3	1,750.0	<b>2,017.3</b>
Sub-Programme 1.6: Health Products & Technologies	5,303.4	1,050.0	<b>6,353.4</b>	5,566.0	1,100.0	<b>6,666.0</b>	5,842.1	-	<b>5,842.1</b>	6,132.0	-	<b>6,132.0</b>
<b>Total Programme: 1 National Refferal &amp; Specialized Services</b>	<b>44,993.8</b>	<b>10,506.0</b>	<b>55,499.8</b>	<b>47,711.7</b>	<b>32,932.8</b>	<b>80,644.5</b>	<b>50,051.4</b>	<b>30,566.2</b>	<b>80,617.6</b>	<b>52,508.0</b>	<b>33,551.6</b>	<b>86,059.6</b>
<b>Programme 2: Curative &amp; Reproductive Maternal New Born Child Adolescent Health</b>												
Sub-Programme 2.1: Communicable diseases control	1,216.0	4,043.0	<b>5,259.0</b>	1,272.1	6,842.0	<b>8,114.1</b>	1,330.9	6,977.0	<b>8,307.9</b>	1,392.7	7,177.0	<b>8,569.7</b>
Sub-Programme 2.2: Non-Communicable Disease & Prevention Control	279.1	617.0	<b>896.1</b>	292.8	1,352.5	<b>1,645.3</b>	307.1	1,005.1	<b>1,312.3</b>	322.2	492.9	<b>492.9</b>
Sub-Programme 2.3: Reproductive Maternal & New Born	35.2	2,480.0	<b>2,515.2</b>	36.7	3,586.0	<b>3,622.7</b>	38.2	3,700.0	<b>3,738.2</b>	39.9	3,700.0	<b>3,739.9</b>
Sub-Programme 2.4: Immunization Management	42.9	7,764.0	<b>7,806.9</b>	45.1	8,351.0	<b>8,396.1</b>	47.8	8,988.6	<b>9,036.4</b>	50.7	11,633.0	<b>11,683.7</b>
<b>Total for Programme: 2 Curative &amp; Reproductive Maternal New Born</b>	<b>1,573.2</b>	<b>14,904.0</b>	<b>16,477.2</b>	<b>1,646.6</b>	<b>20,131.5</b>	<b>21,778.1</b>	<b>1,724.1</b>	<b>20,670.7</b>	<b>22,394.8</b>	<b>1,805.5</b>	<b>23,002.9</b>	<b>24,486.1</b>

Programmes	Approved Budget			Projection (Requirement)								
	2024/25			2025/26			2026/27			2027/28		
	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total
<b>Child Adolescent Health</b>												
<b>Programme 3: Health Research &amp; Innovations</b>												
Sub-Programme 3.1: Medical Research	2,844.0	80.0	<b>2,924.0</b>	2,985.2	1,018.0	<b>4,003.2</b>	3,134.4	1,400.0	<b>4,534.4</b>	3,291.1	1,100.0	<b>4,391.1</b>
Sub-Programme 3.2: Health Innovations	281.5	200.0	<b>481.5</b>	295.6	1,000.0	<b>1,295.6</b>	310.4	1,070.0	<b>1,380.4</b>	325.9	1,270.0	<b>1,595.9</b>
<b>Total for Programme: 3 Health Research &amp; Innovations</b>	<b>3,125.5</b>	<b>280.0</b>	<b>3,405.5</b>	<b>3,280.7</b>	<b>2,018.0</b>	<b>5,298.7</b>	<b>3,444.8</b>	<b>2,470.0</b>	<b>5,914.8</b>	<b>3,617.0</b>	<b>2,370.0</b>	<b>5,987.0</b>
<b>Programme 4: General Administration</b>												
Sub-Programme 4.1: General administration Human resource management and development	2,777.2	-	<b>2,777.2</b>	3,140.0	-	<b>3,140.0</b>	3,095.8	-	<b>3,095.8</b>	3,109.2	-	<b>3,109.2</b>
Sub-Programme 4.2: Finance and Planning	151.8	-	<b>151.8</b>	152.0	-	<b>152.0</b>	152.3	-	<b>152.3</b>	152.6	-	<b>152.6</b>
Sub-Programme 4.3: Social Protection in Health	11,621.1	2,049.0	<b>13,670.1</b>	294,683.9	21,098.0	<b>315,781.9</b>	305,912.3	22,298.0	<b>328,210.3</b>	317,380.6	22,898.0	<b>340,278.6</b>
<b>Total for Programme: 4 General Administration and Human Resource Management</b>	<b>14,550.1</b>	<b>2,049.0</b>	<b>16,599.1</b>	<b>297,975.9</b>	<b>21,098.0</b>	<b>319,073.9</b>	<b>309,160.3</b>	<b>22,298.0</b>	<b>331,458.3</b>	<b>320,642.4</b>	<b>22,898.0</b>	<b>343,540.4</b>
<b>SUB-TOTAL VOTE 1082</b>	<b>64,242.5</b>	<b>27,739.0</b>	<b>91,981.5</b>	<b>350,614.9</b>	<b>76,180.3</b>	<b>426,795.1</b>	<b>364,380.6</b>	<b>76,004.9</b>	<b>440,385.5</b>	<b>378,572.9</b>	<b>81,822.4</b>	<b>460,073.1</b>

**STATE DEPARTMENT OF PUBLIC HEALTH AND PROFESSIONAL STANDARDS**

Programmes	Approved Budget			Projection (Requirement)								
	2024/25			2025/26			2026/27			2027/28		
	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total
<b>Programme:1 Preventive and Promotive Health Services</b>												
Sub-Programme 1.1: Communicable diseases control	197.8	3,688.0	<b>3,885.8</b>	322.7	22,121.5	<b>22,444.2</b>	347.7	21,579.0	<b>21,926.8</b>	361.3	16,198.4	<b>16,559.8</b>
Sub-Programme 1.2: Disease surveillance and response	458.2	-	<b>458.2</b>	3,590.7	600.0	<b>4,190.7</b>	6,250.5	1,590.0	<b>7,840.5</b>	4,240.7	400.0	<b>4,640.7</b>
Sub-Programme 1.3: Public Health Services	1,345.3	10.0	<b>1,355.3</b>	1,518.4	2,643.8	<b>4,162.2</b>	1,963.3	2,804.6	<b>4,767.9</b>	2,464.3	2,804.6	<b>5,269.0</b>
Sub-Programme 1.4: Radiation safety and nuclear security	198.8	100.0	<b>298.8</b>	297.0	370.0	<b>667.0</b>	326.0	370.0	<b>696.0</b>	357.0	242.0	<b>599.0</b>
Sub-Programme 1.5: Primary Health Care	2,644.1	40.0	<b>2,684.1</b>	2,762.0	50.0	<b>2,812.0</b>	2,973.4	50.0	<b>3,023.4</b>	10,515.2	50.0	<b>10,565.2</b>
<b>Total Programme: 1 Preventive and Promotive Health Services</b>	<b>4,844.2</b>	<b>3,838.0</b>	<b>8,682.2</b>	<b>8,490.7</b>	<b>25,785.3</b>	<b>34,276.0</b>	<b>11,861.0</b>	<b>26,393.7</b>	<b>38,254.6</b>	<b>17,938.6</b>	<b>19,695.1</b>	<b>37,633.6</b>
<b>Programme 2: Health Resource Development and Innovation</b>												
Sub-Programme 2.1: Capacity building and training (Preservice and In-service training)	8,561.7	441.0	<b>9,002.7</b>	16,538.0	1,298.0	<b>17,836.0</b>	16,410.0	1,798.0	<b>18,208.0</b>	19,297.0	3,121.0	<b>22,418.0</b>
Sub-Programme 2.2: Research and Innovation on health	375.5	10.0	<b>385.5</b>	1,355.6	684.1	<b>2,039.7</b>	1,355.6	608.0	<b>1,963.6</b>	1,423.4	313.0	<b>1,736.4</b>

Programmes	Approved Budget			Projection (Requirement)								
	2024/25			2025/26			2026/27			2027/28		
	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total
Sub-Programme 2.3: Health Profession Services	4,227.8	-	<b>4,227.8</b>	5,390.5	-	<b>5,390.5</b>	5,754.8	-	<b>5,754.8</b>	5,931.7	-	<b>5,931.7</b>
<b>Total for Programme: 2 Health Resource Development and Innovation</b>	<b>13,165.0</b>	<b>451.0</b>	<b>13,616.0</b>	<b>23,284.1</b>	<b>1,982.1</b>	<b>25,266.2</b>	<b>23,520.4</b>	<b>2,406.0</b>	<b>25,926.4</b>	<b>26,652.2</b>	<b>3,434.0</b>	<b>30,086.2</b>
<b>Programme 3: Health Policy, Standards and Regulations</b>												
Sub-Programme 3.1: Health Standard Quality Assurance	3,886.7	-	<b>3,886.7</b>	6,093.0	2,216.0	<b>8,309.0</b>	6,790.6	2,721.0	<b>9,511.6</b>	7,372.4	2,704.0	<b>10,076.4</b>
Sub-Programme 3.2: Healthy Policy and Regulations	94.1	-	<b>94.1</b>	265.3	-	<b>265.3</b>	289.3	-	<b>289.3</b>	315.7	-	<b>315.7</b>
<b>Total for Programme: 3 Health Policy, Standards and Regulations</b>	<b>3,980.8</b>	-	<b>3,980.8</b>	<b>6,358.3</b>	<b>2,216.0</b>	<b>8,574.3</b>	<b>7,079.9</b>	<b>2,721.0</b>	<b>9,800.9</b>	<b>7,688.2</b>	<b>2,704.0</b>	<b>10,392.2</b>
<b>Programme 4: General Administration and Human Resource Management</b>												
Sub-Programme 4.1: General administration Human resource management and development	560.4	-	<b>560.4</b>	1,508.7	200.0	<b>1,708.7</b>	1,631.1	-	<b>1,631.1</b>	1,764.8	-	<b>1,764.8</b>
Sub-Programme 4.2: Finance and Planning	35.9	-	<b>35.9</b>	219.2	-	<b>219.2</b>	240.0	-	<b>240.0</b>	262.9	-	<b>262.9</b>
<b>Total for Programme: 4 General Administration and Human</b>	<b>596.2</b>	-	<b>596.2</b>	<b>1,727.9</b>	<b>200.0</b>	<b>1,927.9</b>	<b>1,871.1</b>	-	<b>1,871.1</b>	<b>2,027.7</b>	-	<b>2,027.7</b>



Programmes	Approved Budget			Projection (Requirement)								
	2024/25			2025/26			2026/27			2027/28		
	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total
Resource Management												
<b>SUB-TOTAL VOTE: 1083</b>	<b>22,586.2</b>	<b>4,289.0</b>	<b>26,875.2</b>	<b>39,861.1</b>	<b>30,183.4</b>	<b>70,044.5</b>	<b>44,332.4</b>	<b>31,520.7</b>	<b>75,853.1</b>	<b>54,306.6</b>	<b>25,833.1</b>	<b>80,139.6</b>
<b>TOTAL HEALTH SECTOR</b>	<b>86,828.7</b>	<b>32,028.0</b>	<b>118,856.7</b>	<b>390,475.9</b>	<b>106,363.7</b>	<b>496,839.6</b>	<b>408,713.0</b>	<b>107,525.6</b>	<b>516,238.6</b>	<b>432,879.5</b>	<b>107,655.5</b>	<b>540,212.7</b>

**TABLE 3.5 ANALYSES OF PROGRAMMES AND SUB-PROGRAMMES (CURRENT AND CAPITAL) RESOURCE ALLOCATION (KSH. MILLION)**

**STATE DEPARTMENT FOR MEDICAL SERVICES**

Programmes	Approved Budget			Allocation								
	2024/25			2025/26			2026/27			2027/28		
	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total
<b>Programme:1 National Referral &amp; Specialized Services</b>												
Sub-Programme 1.1: National Referral Health Services	39,427.4	3,081.0	<b>42,508.4</b>	40,227.0	3,113.0	<b>43,340.0</b>	41,863.5	3,434.7	<b>45,298.2</b>	45,110.3	4,716.5	<b>49,826.8</b>
Sub-Programme 1.4: Health Infrastructure Equipment	-	6,075.0	<b>6,075.0</b>	-	3,553.0	<b>3,553.0</b>	-	3,472.0	<b>3,472.0</b>	-	4,022.0	<b>4,022.0</b>
Sub-Programme 1.5: National Blood Transfusion Services	262.9	300.0	<b>562.9</b>	262.9	450.0	<b>712.9</b>	262.9	2,000.0	<b>2,262.9</b>	262.9	2,700.0	<b>2,962.9</b>
Sub-Programme 1.6: Health Products & Technologies	5,303.4	1,050.0	<b>6,353.4</b>	5,303.1	2,100.0	<b>7,403.1</b>	5,560.5	2,500.0	<b>8,060.5</b>	5,630.0	3,200.0	<b>8,830.0</b>
<b>Total Programme: 1 National Referral &amp; Specialized Services</b>	<b>44,993.8</b>	<b>10,506.0</b>	<b>55,499.8</b>	<b>45,793.0</b>	<b>9,216.0</b>	<b>55,009.0</b>	<b>47,686.9</b>	<b>11,406.7</b>	<b>59,093.6</b>	<b>51,003.2</b>	<b>14,638.5</b>	<b>65,641.7</b>
<b>Programme 2: Curative &amp; Reproductive Maternal New Born Child Adolescent Health</b>												

Programmes	Approved Budget			Allocation								
	2024/25			2025/26			2026/27			2027/28		
	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total
Sub-Programme 2.1: Communicable diseases control	1,216.0	4,043.0	<b>5,259.0</b>	1,272.8	4,709.0	<b>5,981.8</b>	1,332.1	4,650.0	<b>5,982.1</b>	1,311.2	5,650.0	<b>6,961.2</b>
Sub-Programme 2.2: Non-Communicable Disease & Prevention Control	279.1	617.0	<b>896.1</b>	279.1	1,150.0	<b>1,429.1</b>	279.1	250.0	<b>529.1</b>	349.0	550.0	<b>899.0</b>
Sub-Programme 2.3: Reproductive Maternal & New Born	35.2	2,480.0	<b>2,515.2</b>	35.2	3,350.0	<b>3,385.2</b>	35.2	4,200.0	<b>4,235.2</b>	35.2	5,400.0	<b>5,435.2</b>
Sub-Programme 2.4: Immunization Management	42.9	7,764.0	<b>7,806.9</b>	42.9	6,591.0	<b>6,633.9</b>	42.9	5,100.0	<b>5,142.9</b>	42.9	5,600.0	<b>5,642.9</b>
<b>Total for Programme: 2 Curative &amp; Reproductive Maternal New Born Child Adolescent Health</b>	<b>1,573.2</b>	<b>14,904.0</b>	<b>16,477.2</b>	<b>1,630.0</b>	<b>15,800.0</b>	<b>17,430.0</b>	<b>1,689.3</b>	<b>14,200.0</b>	<b>15,889.3</b>	<b>1,738.3</b>	<b>17,200.0</b>	<b>18,938.3</b>
<b>Programme 3: Health Research &amp; Innovations</b>												
Sub-Programme 3.1: Medical Research	2,844.0	80.0	<b>2,924.0</b>	2,943.0	180.0	<b>3,123.0</b>	2,853.0	400.0	<b>3,253.0</b>	3,399.8	750.0	<b>4,149.8</b>
Sub-Programme 3.2: Health Innovations	281.5	200.0	<b>481.5</b>	281.5	250.0	<b>531.5</b>	281.5	600.0	<b>881.5</b>	332.2	1,300.0	<b>1,632.2</b>
<b>Total for Programme: 3 Health Research &amp; Innovations</b>	<b>3,125.5</b>	<b>280.0</b>	<b>3,405.5</b>	<b>3,224.5</b>	<b>430.0</b>	<b>3,654.5</b>	<b>3,134.5</b>	<b>1,000.0</b>	<b>4,134.5</b>	<b>3,732.0</b>	<b>2,050.0</b>	<b>5,782.0</b>
<b>Programme 4: General Administration</b>												
Sub-Programme 4.1: General administration Human resource management and development	2,777.2	-	<b>2,777.2</b>	3,090.2	-	<b>3,090.2</b>	3,072.2	-	<b>3,072.2</b>	3,115.2	-	<b>3,115.2</b>
Sub-Programme 4.2: Finance and Planning	151.8	-	<b>151.8</b>	151.8	-	<b>151.8</b>	151.8	-	<b>151.8</b>	151.8	-	<b>151.8</b>
Sub-Programme 4.3: Social Protection in Health	11,621.1	2,049.0	<b>13,670.1</b>	90,237.9	4,049.0	<b>94,286.9</b>	91,482.1	4,049.0	<b>95,531.1</b>	95,628.8	6,949.0	<b>102,577.8</b>
<b>Total for Programme: 4 General Administration and Human Resource Management</b>	<b>14,550.1</b>	<b>2,049.0</b>	<b>16,599.1</b>	<b>93,479.9</b>	<b>4,049.0</b>	<b>97,528.9</b>	<b>94,706.1</b>	<b>4,049.0</b>	<b>98,755.1</b>	<b>98,895.7</b>	<b>6,949.0</b>	<b>105,844.7</b>

Programmes	Approved Budget			Allocation								
	2024/25			2025/26			2026/27			2027/28		
	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total
<b>SUB-TOTAL VOTE 1082</b>	<b>64,242.5</b>	<b>27,739.0</b>	<b>91,981.5</b>	<b>144,127.4</b>	<b>29,495.0</b>	<b>173,622.4</b>	<b>147,216.7</b>	<b>30,655.7</b>	<b>177,872.4</b>	<b>155,369.2</b>	<b>40,837.5</b>	<b>196,206.7</b>

### STATE DEPARTMENT OF PUBLIC HEALTH AND PROFESSIONAL STANDARDS

Programmes	Approved Budget			Allocation								
	2024/25			2025/26			2026/27			2027/28		
	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total
Sub-Programme 1.1: Communicable diseases control	197.8	3,688.0	<b>3,885.8</b>	349.7	3,761.8	<b>4,111.5</b>	359.7	6,656.0	<b>7,015.8</b>	361.9	3,281.0	<b>3,642.9</b>
Sub-Programme 1.2: Disease surveillance and response	458.2	-	<b>458.2</b>	383.1	-	<b>383.1</b>	387.8	-	<b>387.8</b>	402.8	-	<b>402.8</b>
Sub-Programme 1.3: Public Health Services	1,345.3	10.0	<b>1,355.3</b>	1,704.4	500.0	<b>2,204.4</b>	1,977.3	100.0	<b>2,077.3</b>	2,318.1	93.0	<b>2,411.1</b>
Sub-Programme 1.4: Radiation safety and nuclear security	198.8	100.0	<b>298.8</b>	208.8	78.0	<b>286.8</b>	326.0	122.0	<b>448.0</b>	357.0	-	<b>357.0</b>
Sub-Programme 1.5: Primary Health Care	2,644.1	40.0	<b>2,684.1</b>	5,189.8	-	<b>5,189.8</b>	3,440.6	50.0	<b>3,490.6</b>	3,451.7	70.0	<b>3,521.7</b>
<b>Total Programme: 1 Preventive and Promotive Health Services</b>	<b>4,844.2</b>	<b>3,838.0</b>	<b>8,682.2</b>	<b>7,835.8</b>	<b>4,339.8</b>	<b>12,175.6</b>	<b>6,491.4</b>	<b>6,928.0</b>	<b>13,419.4</b>	<b>6,891.5</b>	<b>3,444.0</b>	<b>10,335.5</b>
<b>Programme 2: Health Resource Development and Innovation</b>												
Sub-Programme 2.1: Capacity building and training (Preservice and In-service training)	8,561.7	441.0	<b>9,002.7</b>	8,861.7	520.0	<b>9,381.7</b>	9,519.6	544.0	<b>10,063.6</b>	10,328.4	700.0	<b>11,028.4</b>
Sub-Programme 2.2: Research and Innovation on health	375.5	10.0	<b>385.5</b>	376.5	152.0	<b>528.5</b>	576.5	232.0	<b>808.5</b>	836.0	608.0	<b>1,444.0</b>
Sub-Programme 2.3: Health Profession Services	4,227.8	-	<b>4,227.8</b>	306.8	-	<b>306.8</b>	428.8	-	<b>428.8</b>	564.7	-	<b>564.7</b>

Programmes	Approved Budget			Allocation								
	2024/25			2025/26			2026/27			2027/28		
	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total	Current	Capital	Total
<b>Total for Programme: 2 Health Resource Development and Innovation</b>	<b>13,165.0</b>	<b>451.0</b>	<b>13,616.0</b>	<b>9,545.0</b>	<b>672.0</b>	<b>10,217.0</b>	<b>10,524.9</b>	<b>776.0</b>	<b>11,300.9</b>	<b>11,729.1</b>	<b>1,308.0</b>	<b>13,037.1</b>
<b>Programme 3: Health Policy, Standards and Regulations</b>												
Sub-Programme 3.1: Health Standard Quality Assurance	3,886.7	-	<b>3,886.7</b>	4,300.7	40.0	<b>4,340.7</b>	5,365.8	182.3	<b>5,548.1</b>	6,086.4	580.5	<b>6,666.9</b>
Sub-Programme 3.2: Healthy Policy and Regulations	94.1	-	<b>94.1</b>	4,297.9	-	<b>4,297.9</b>	4,291.3	-	<b>4,291.3</b>	4,330.9	-	<b>4,330.9</b>
<b>Total for Programme: 3 Health Policy, Standards and Regulations</b>	<b>3,980.8</b>	-	<b>3,980.8</b>	<b>8,598.6</b>	<b>40.0</b>	<b>8,638.6</b>	<b>9,657.0</b>	<b>182.3</b>	<b>9,839.4</b>	<b>10,417.3</b>	<b>580.5</b>	<b>10,997.8</b>
<b>Programme 4: General Administration and Human Resource Management</b>												
Sub-Programme 4.1: General administration Human resource management and development	560.4	-	<b>560.4</b>	281.8	-	<b>281.8</b>	289.5	-	<b>289.5</b>	318.8	-	<b>318.8</b>
Sub-Programme 4.2: Finance and Planning	35.9	-	<b>35.9</b>	30.5	-	<b>30.5</b>	32.7	-	<b>32.7</b>	58.9	-	<b>58.9</b>
<b>Total for Programme: 4 General Administration and Human Resource Management</b>	<b>596.2</b>	-	<b>596.2</b>	<b>312.3</b>	-	<b>312.3</b>	<b>322.2</b>	-	<b>322.2</b>	<b>377.8</b>	-	<b>377.8</b>
<b>TOTAL VOTE</b>	<b>22,586.2</b>	<b>4,289.0</b>	<b>26,875.2</b>	<b>26,291.7</b>	<b>5,051.8</b>	<b>31,343.5</b>	<b>26,995.6</b>	<b>7,886.3</b>	<b>34,881.9</b>	<b>29,415.6</b>	<b>5,332.5</b>	<b>34,748.1</b>

**TABLE 3.6: PROGRAMMES AND SUB-PROGRAMMES BY ECONOMIC CLASSIFICATION ECONOMIC CLASSIFICATION (AMOUNT KSH MILLION)**

**STATE DEPARTMENT FOR MEDICAL SERVICES**

Economic Classification	Resource Requirement			Allocation		
	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<b>Programme 1: National Referral and Specialized Services</b>						
<b>Current Expenditure</b>	<b>47,711.72</b>	<b>50,051.38</b>	<b>52,508.01</b>	<b>45,793.00</b>	<b>47,686.88</b>	<b>51,003.24</b>
Compensation of Employees	618.60	618.60	618.60	618.60	618.60	618.60
Use of Goods	791.38	815.94	841.74	277.50	277.50	277.50
Transfers	46,191.60	48,501.18	50,926.24	44,792.00	46,685.88	50,002.24
Other Recurrent	110.15	115.65	121.43	104.90	104.90	104.90
<b>Capital Expenditure</b>	<b>32,932.75</b>	<b>30,566.24</b>	<b>33,551.55</b>	<b>9,216.00</b>	<b>11,406.69</b>	<b>14,638.50</b>
Acquisition of Non-Financial Assets	-	-	-	-	-	-
Capital Transfers Govt. Agencies	28,703.00	25,050.00	27,557.00	4,863.00	5,200.00	7,016.50
Other Development	4,229.75	5,516.24	5,994.55	4,353.00	6,206.69	7,622.00
<b>TOTAL PROGRAMME 1</b>	<b>80,644.47</b>	<b>80,617.62</b>	<b>86,059.56</b>	<b>55,009.00</b>	<b>59,093.57</b>	<b>65,641.74</b>
<b>Programme 2: Curative &amp; Reproductive Maternal New Born Child Adolescent Health</b>						
<b>Current Expenditure</b>	<b>1,646.56</b>	<b>1,724.08</b>	<b>1,805.48</b>	<b>1,630.00</b>	<b>1,689.27</b>	<b>1,738.30</b>
Compensation of Employees	111.25	112.01	112.80	111.00	111.00	111.00
Use of Goods	125.69	131.97	138.57	119.70	119.70	119.70
Currents and other Transfers Govt. Agencies	1,409.63	1,480.11	1,554.11	1,399.30	1,458.57	1,507.60
Other Recurrent	-	-	-	-	-	-
<b>Capital Expenditure</b>	<b>20,131.50</b>	<b>20,670.68</b>	<b>23,002.86</b>	<b>15,800.00</b>	<b>14,200.00</b>	<b>17,200.00</b>
Acquisition of Non-Financial Assets	-	-	-	-	-	-
Capital Transfers Govt. Agencies	16,228.00	17,027.00	19,827.00	13,209.00	14,100.00	17,100.00
Other Development	3,903.50	3,643.68	3,175.86	2,591.00	100.00	100.00
<b>TOTAL PROGRAMME 2:</b>	<b>21,778.06</b>	<b>22,394.76</b>	<b>24,808.34</b>	<b>17,430.00</b>	<b>15,889.27</b>	<b>18,938.30</b>
<b>Programme 3: Health Research &amp; Innovations</b>						
<b>Current Expenditure</b>	<b>3,280.73</b>	<b>3,444.76</b>	<b>3,617.00</b>	<b>3,224.50</b>	<b>3,134.50</b>	<b>3,731.96</b>
Compensation of Employees	-	-	-	-	-	-
Use of Goods	-	-	-	-	-	-
Currents and other Transfers Govt. Agencies	3,280.73	3,444.76	3,617.00	3,224.50	3,134.50	3,731.96
Other Recurrent	-	-	-	-	-	-

Economic Classification	Resource Requirement			Allocation		
	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<b>Capital Expenditure</b>	<b>2,018.00</b>	<b>2,470.00</b>	<b>2,370.00</b>	<b>430.00</b>	<b>1,000.00</b>	<b>2,050.00</b>
Acquisition of Non-Financial Assets	-	-	-	-	-	-
Capital Transfers Govt. Agencies	1,518.00	1,920.00	1,690.00	330.00	600.00	1,300.00
Other Development	500.00	550.00	680.00	100.00	400.00	750.00
<b>TOTAL PROGRAMME 3</b>	<b>5,298.73</b>	<b>5,914.76</b>	<b>5,987.00</b>	<b>3,654.50</b>	<b>4,134.50</b>	<b>5,781.96</b>
<b>Programme 4: General Administration</b>						
<b>Current Expenditure</b>	<b>297,975.87</b>	<b>309,160.33</b>	<b>320,642.39</b>	<b>93,479.92</b>	<b>94,706.06</b>	<b>98,895.72</b>
Compensation of Employees	7,267.39	7,501.37	7,742.38	7,267.39	7,501.37	7,742.38
Use of Goods	579.09	593.04	607.70	388.23	427.15	470.16
Currents and other Transfers Govt. Agencies	290,123.30	301,059.52	312,285.60	85,678.50	86,631.74	90,537.38
Other Recurrent	6.09	6.39	6.71	145.80	145.80	145.80
<b>Capital Expenditure</b>	<b>21,098.00</b>	<b>22,298.00</b>	<b>22,898.00</b>	<b>4,049.00</b>	<b>4,049.00</b>	<b>6,949.00</b>
Acquisition of Non-Financial Assets	-	-	-	-	-	-
Capital Transfers Govt. Agencies	21,098.00	22,298.00	22,898.00	4,049.00	4,049.00	6,949.00
Other Development	-	-	-	-	-	-
<b>TOTAL PROGRAMME 4</b>	<b>319,073.87</b>	<b>331,458.33</b>	<b>343,540.39</b>	<b>97,528.92</b>	<b>98,755.06</b>	<b>105,844.72</b>
<b>TOTAL VOTE</b>	<b>426,795.13</b>	<b>440,385.47</b>	<b>460,395.29</b>	<b>173,622.42</b>	<b>177,872.40</b>	<b>196,206.72</b>

#### STATE DEPARTMENT OF PUBLIC HEALTH AND PROFESSIONAL STANDARDS

Economic Classification	Resource Requirement			Allocation		
	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<b>Programme 1: Preventive and Promotive Health Services</b>						
<b>Current Expenditure</b>	<b>8,490.72</b>	<b>11,860.98</b>	<b>17,938.57</b>	<b>7,835.81</b>	<b>6,491.38</b>	<b>6,891.46</b>
Compensation of Employees	1,714.45	1,765.89	1,818.86	1,178.70	1,190.59	1,225.41
Use of Goods	5,344.92	8,196.46	13,709.15	292.58	304.28	316.45
Transfers	1,402.35	1,853.39	2,360.79	6,364.53	4,996.51	5,349.60
Other Recurrent	29.00	45.24	49.76	-	-	-
<b>Capital Expenditure</b>	<b>25,785.30</b>	<b>26,393.65</b>	<b>19,695.05</b>	<b>4,339.79</b>	<b>6,928.03</b>	<b>3,444.00</b>
Acquisition of Non-Financial Assets	600.00	1,590.00	400.00	-	-	-
Capital Transfers Govt. Agencies	25,185.30	24,803.65	19,295.05	4,339.79	6,928.03	3,444.00

	Resource Requirement			Allocation		
Economic Classification	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
Other Development	-	-	-	-	-	-
<b>TOTAL PROGRAMME 1</b>	<b>34,276.02</b>	<b>38,254.63</b>	<b>37,633.62</b>	<b>12,175.60</b>	<b>13,419.41</b>	<b>10,335.46</b>
<b>Programme 2: Health Resource Development and Innovation</b>						
<b>Current Expenditure</b>	<b>23,284.11</b>	<b>23,520.43</b>	<b>26,652.16</b>	<b>9,545.01</b>	<b>10,524.93</b>	<b>11,729.10</b>
Compensation of Employees	4,741.46	4,720.68	4,694.22	36.56	39.39	83.26
Use of Goods	431.01	474.12	521.53	215.46	224.08	233.04
Currents and other Transfers Govt. Agencies	17,893.64	17,765.64	20,720.42	9,292.99	10,261.46	11,412.80
Other Recurrent	218.00	560.00	716.00	-	-	-
<b>Capital Expenditure</b>	<b>1,982.10</b>	<b>2,406.00</b>	<b>3,434.00</b>	<b>672.00</b>	<b>776.00</b>	<b>1,308.00</b>
Acquisition of Non-Financial Assets	-	-	-	-	-	-
Capital Transfers Govt. Agencies	1,982.10	2,406.00	3,434.00	672.00	776.00	1,308.00
Other Development	-	-	-	-	-	-
<b>TOTAL PROGRAMME 2:</b>	<b>25,266.21</b>	<b>25,926.43</b>	<b>30,086.16</b>	<b>10,217.01</b>	<b>11,300.93</b>	<b>13,037.10</b>
<b>Programme 3: Health Policy, Standards and Regulations</b>						
<b>Current Expenditure</b>	<b>6,358.29</b>	<b>7,079.92</b>	<b>7,688.15</b>	<b>8,598.57</b>	<b>9,657.05</b>	<b>10,417.27</b>
Compensation of Employees	360.89	371.72	382.87	4,297.88	4,291.68	4,344.58
Use of Goods	410.71	450.78	494.66	51.88	53.96	51.41
Currents and other Transfers Govt. Agencies	5,571.69	6,241.67	6,794.09	4,242.31	5,304.65	6,014.25
Other Recurrent	15.00	15.75	16.54	6.50	6.76	7.03
<b>Capital Expenditure</b>	<b>2,216.00</b>	<b>2,721.00</b>	<b>2,704.00</b>	<b>40.00</b>	<b>182.31</b>	<b>580.50</b>
Acquisition of Non-Financial Assets	-	-	-	-	-	-
Capital Transfers Govt. Agencies	2,216.00	2,721.00	2,704.00	40.00	182.31	580.50
Other Development	-	-	-	-	-	-
<b>TOTAL PROGRAMME 3</b>	<b>8,574.29</b>	<b>9,800.92</b>	<b>10,392.15</b>	<b>8,638.57</b>	<b>9,839.36</b>	<b>10,997.77</b>
<b>Programme 4: General Administration and Human Resource Management</b>						
<b>Current Expenditure</b>	<b>1,727.93</b>	<b>1,871.11</b>	<b>2,027.71</b>	<b>312.32</b>	<b>322.24</b>	<b>377.77</b>
Compensation of Employees	423.10	435.80	448.87	126.87	129.37	173.77
Use of Goods	433.00	476.30	523.93	166.37	173.02	183.37

Economic Classification	Resource Requirement			Allocation		
	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
Currents and other Transfers Govt. Agencies	-	-	-	-	-	-
Other Recurrent	871.83	959.01	1,054.91	19.08	19.84	20.64
<b>Capital Expenditure</b>	<b>200.00</b>	-	-	-	-	-
Acquisition of Non-Financial Assets	-	-	-	-	-	-
Capital Transfers Govt. Agencies	-	-	-	-	-	-
Other Development	200.00	-	-	-	-	-
<b>TOTAL PROGRAMME 4</b>	<b>1,927.93</b>	<b>1,871.11</b>	<b>2,027.71</b>	<b>312.32</b>	<b>322.24</b>	<b>377.77</b>
<b>TOTAL VOTE</b>	<b>70,044.46</b>	<b>75,853.08</b>	<b>80,139.64</b>	<b>31,343.50</b>	<b>34,881.94</b>	<b>34,748.11</b>

**TABLE 3.7: ANALYSIS OF RECURRENT RESOURCE REQUIREMENT VS ALLOCATION FOR SAGAS (AMOUNT KSH MILLION)**

**STATE DEPARTMENT FOR MEDICAL SERVICES SAGAS DETAILED SUMMARY**

Economic classification	2024/25	Requirement			Allocations		
	Approved Estimates	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<b>1. KENYA MEDICAL SUPPLIES AUTHORITY</b>							
<b>Gross</b>	<b>5,207.3</b>	<b>7,767.6</b>	<b>8,581.4</b>	<b>6,911.0</b>	<b>5,366.9</b>	<b>5,718.3</b>	<b>5,945.2</b>
AIA	4,858.0	5,017.6	5,268.9	5,533.0	5,017.6	5,268.9	5,533.0
<b>NET</b>	<b>349.3</b>	<b>2,750.0</b>	<b>3,312.5</b>	<b>1,378.0</b>	<b>349.3</b>	<b>449.3</b>	<b>412.2</b>
Compensation of Employees	1,250.0	1,250.0	1,312.5	1,378.0	1,250.0	1,250.0	1,250.0
Other Recurrent	3,957.3	6,517.6	7,268.9	5,533.0	4,116.9	4,468.3	4,695.2
<b>of which:</b>					-		
<i>Insurance</i>	270.0	283.5	297.7	313.0	283.0	283.0	283.0
<i>Utilities</i>	40.0	40.0	44.0	48.0	40.0	40.0	40.0
<i>Rent</i>	30.0	30.0	30.0	30.0	30.0	30.0	30.0
<i>Subscriptions to International Organisations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	6.0	7.0	8.0	9.0	6.0	6.0	6.0
<i>Contracted Professionals (Guards and Cleaners)</i>	380.0	398.3	417.6	438.0	380.0	380.0	380.0
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Other Recurrent</i>	3,231.3	5,758.8	6,471.7	4,695.0	3,377.9	3,729.3	3,956.2
<b>2. KENYA BIOVAX INSTITUTE LTD</b>							
<b>Gross</b>	<b>281.5</b>	<b>1,109.1</b>	<b>1,330.9</b>	<b>1,597.1</b>	<b>281.5</b>	<b>381.5</b>	<b>332.2</b>
<b>AIA</b>	-	-	-	-	-	-	-



Economic classification	2024/25	Requirement			Allocations		
	Approved Estimates	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<b>Net</b>	<b>281.5</b>	<b>1,109.1</b>	<b>1,330.9</b>	<b>1,597.1</b>	<b>281.5</b>	<b>381.5</b>	<b>332.2</b>
Compensation to Employees	152.2	322.4	529.6	700.3	152.2	158.7	163.6
Other Recurrent	129.3	786.7	801.3	896.8	129.3	222.8	168.6
<b>of which:</b>					-	-	-
<i>Insurance</i>	31.5	80.0	96.0	115.2	28.0	31.5	33.0
<i>Utilities</i>	1.2	8.0	9.6	11.5	4.0	6.5	7.5
<i>Rent</i>	13.0	27.2	32.7	39.2	13.0	15.0	17.0
<i>Subscriptions to International Organisations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Gratuity</i>	38.3	45.5	54.6	65.5	38.3	40.2	41.6
<i>Contracted Guards and Cleaning Services</i>	9.0	6.5	7.8	9.4	1.2	1.5	2.0
<i>others</i>	36.2	619.4	600.6	656.0	44.7	128.1	67.5
<b>3. KENYATTA NATIONAL HOSPITAL</b>							
<b>Gross</b>	<b>19,370.1</b>	<b>24,120.6</b>	<b>25,687.9</b>	<b>27,378.1</b>	<b>20,682.9</b>	<b>22,287.4</b>	<b>24,707.1</b>
AIA	9,128.0	10,040.8	11,044.9	12,149.4	10,040.8	11,044.9	12,149.4
<b>Net</b>	<b>10,242.1</b>	<b>14,079.8</b>	<b>14,643.0</b>	<b>15,228.7</b>	<b>10,642.1</b>	<b>11,242.5</b>	<b>12,557.7</b>
Compensation to Employees	13,865.5	14,079.8	14,643.0	15,228.7	14,265.5	14,265.5	14,265.5
Others Recurrent	5,504.6	10,040.8	11,044.9	12,149.4	6,417.4	8,021.8	10,441.5
<b>of which:</b>	-	-	-	-			
<i>Insurance</i>	12.4	13.6	15.0	16.5	12.4	12.4	12.4
<i>Utilities</i>	386.3	425.0	467.5	514.2	386.3	386.3	386.3
<i>Rent</i>	-	-	-	-	-	-	-
<i>Subscriptions to International Organisations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Guards and Cleaning Services</i>	194.3	204.1	214.3	225.0	194.3	194.3	194.3
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others</i>	4,911.5	9,398.1	10,348.2	11,393.7	5,824.3	7,428.8	9,848.5
<b>4. MATHARI NATIONAL TEACHING AND REFERRAL HOSPITAL</b>							
<b>Gross</b>	<b>1,054.5</b>	<b>2,872.0</b>	<b>4,498.3</b>	<b>5,397.9</b>	<b>1,119.5</b>	<b>1,350.5</b>	<b>1,421.4</b>
AIA	220.0	285.0	366.0	420.0	285.0	366.0	420.0
<b>Net</b>	<b>834.5</b>	<b>2,652.0</b>	<b>4,132.3</b>	<b>4,977.9</b>	<b>834.5</b>	<b>984.5</b>	<b>1,001.4</b>
Compensation to Employees	141.0	1,020.6	1,906.3	2,287.6	181.0	186.4	192.0
Other Recurrent	<b>913.5</b>	<b>1,851.4</b>	<b>2,592.0</b>	<b>3,110.4</b>	938.5	1,164.1	1,229.4
<b>of which;</b>					-	-	-
<i>Insurance</i>	36.0	149.0	159.0	192.0	36.0	149.0	159.0
<i>Utilities</i>	157.0	251.2	439.6	558.3	157.0	251.2	439.6
<i>Rent</i>	-	-	-	-	-	-	-
<i>Subscription to International Organizations</i>	-	-	-	-	-	-	-

Economic classification	2024/25	Requirement			Allocations		
	Approved Estimates	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<i>Subscription to Professional Bodies</i>	20.5	20.5	20.5	20.5	20.5	20.5	20.5
<i>Contracted Guards and Cleaning Services</i>	85.0	102.0	115.0	143.8	85.0	102.0	115.0
<i>Gratuity</i>	-	50.0	62.5	81.3	-	50.0	62.5
<i>others</i>	615.0	1,278.7	1,795.4	2,114.6	640.0	591.4	432.8
<b>5. MOI TEACHING &amp; REFERRAL HOSPITAL</b>							
<b>Gross</b>	<b>11,326.1</b>	<b>15,237.2</b>	<b>16,760.9</b>	<b>18,437.0</b>	<b>12,042.5</b>	<b>13,000.5</b>	<b>14,347.6</b>
AIA	4,164.0	4,580.4	5,038.4	5,542.2	4,580.4	5,038.4	5,542.2
<b>Net</b>	<b>7,162.1</b>	<b>10,656.8</b>	<b>11,722.5</b>	<b>12,894.8</b>	<b>7,462.1</b>	<b>7,962.1</b>	<b>8,805.3</b>
Compensation to Employees	9,055.0	10,656.8	11,722.5	12,894.8	9,355.0	9,355.0	9,355.0
Other Recurrent	2,271.1	4,580.4	5,038.4	5,542.2	2,687.5	3,645.5	4,992.6
<b>of which;</b>							
<i>Insurance</i>	357.0	476.3	523.9	576.3	357.0	357.0	357.0
<i>Utilities</i>	198.0	217.8	239.6	263.6	198.0	198.0	198.0
<i>Rent</i>	2.0	4.4	4.8	5.3	2.0	2.0	2.0
<i>Subscription to International Organizations</i>	5.3	5.4	5.5	5.6	5.3	5.3	5.3
<i>Subscription to Professional Bodies</i>	8.0	8.5	9.1	9.8	8.0	8.0	8.0
<i>Contracted Guards and Cleaning Services</i>	-	-	-	-	-	-	-
<i>Gratuity</i>	18.0	20.0	22.0	24.0	18.0	18.0	18.0
<i>others</i>	1,682.9	3,848.0	4,233.5	4,657.8	2,099.3	3,057.3	4,404.3
<b>6. NATIONAL CANCER INSTITUTE</b>							
<b>Gross</b>	<b>270.5</b>	<b>1,795.4</b>	<b>2,299.0</b>	<b>2,958.1</b>	<b>270.0</b>	<b>270.0</b>	<b>324.0</b>
AIA	0.5	-	-	-	-	-	-
<b>Net</b>	<b>270.0</b>	<b>1,795.4</b>	<b>2,299.0</b>	<b>2,958.1</b>	<b>270.0</b>	<b>270.0</b>	<b>324.0</b>
Compensation to Employees	51.5	187.9	309.5	486.9	51.5	51.5	51.5
Other Recurrent	219.0	1,607.6	1,989.5	2,471.2	218.5	218.5	272.5
<b>of which:</b>							
Insurance	-	40.0	40.0	40.0	-	-	-
Utilities	-	-	-	-	-	-	-
Rent	14.0	15.0	15.0	15.0	14.0	14.0	14.0
<i>Subscription to International Organizations</i>	5.3	5.4	5.5	5.6	5.3	5.3	5.3
<i>Subscription to Professional Bodies</i>	8.0	8.5	9.1	9.8	8.0	8.0	8.0
<i>Contracted Professional (Guards and Cleaning Services)</i>	-	8.0	8.0	8.0	-	-	-
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others</i>	191.7	1,530.6	1,911.9	2,392.9	191.2	191.2	245.2
<b>7. KENYATTA UNIVERSITY TEACHING RESEARCH AND REFERRAL HOSPITAL</b>							
<b>Gross</b>	<b>5,506.1</b>	<b>8,796.0</b>	<b>9,535.0</b>	<b>10,488.0</b>	<b>6,266.6</b>	<b>6,746.6</b>	<b>7,557.9</b>
AIA	3,139.5	3,800.0	4,180.0	4,598.0	3,800.0	4,180.0	4,598.0
<b>Net</b>	<b>2,366.6</b>	<b>4,996.0</b>	<b>5,355.0</b>	<b>5,890.0</b>	<b>2,466.6</b>	<b>2,566.6</b>	<b>2,959.9</b>

Economic classification	2024/25	Requirement			Allocations		
	Approved Estimates	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
Compensation to Employees	2,748.0	4,260.0	4,686.0	5,155.0	2,848.0	2,848.0	2,848.0
Other Recurrent	2,758.1	4,536.0	4,849.0	5,333.0	3,418.6	3,898.6	4,709.9
<i>of which;</i>			-	-			
Insurance	319.7	434.0	477.4	525.1	319.7	319.7	319.7
Utilities	367.0	370.0	407.0	447.7	367.0	367.0	367.0
Rent	-	-	-	-	-	-	-
Subscription to International Organizations	-	-	-	-	-	-	-
Subscription to Professional Bodies	7.0	8.0	9.0	10.0	7.0	7.0	7.0
Contracted Professional (Guards and Cleaning Services)	203.0	249.0	273.9	301.3	203.0	203.0	203.0
Gratuity	239.5	386.0	425.0	467.5	239.5	239.5	239.5
others	1,621.9	3,089.0	3,256.7	3,581.4	2,282.4	2,762.4	3,573.8
<b>8. KENYA MEDICAL RESEARCH INSTITUTE</b>							
<b>Gross</b>	<b>2,844.0</b>	<b>4,163.0</b>	<b>4,366.2</b>	<b>4,580.8</b>	<b>2,944.0</b>	<b>3,354.0</b>	<b>3,510.7</b>
AIA	220.0	220.0	230.0	242.0	220.0	230.0	242.0
<b>Net</b>	<b>2,624.0</b>	<b>3,943.0</b>	<b>3,930.2</b>	<b>4,338.8</b>	<b>2,724.0</b>	<b>3,124.0</b>	<b>3,268.7</b>
Compensation to Employees	2,727.0	3,233.0	3,390.7	3,556.1	2,827.0	2,827.0	2,827.0
Other Recurrent	117.0	930.0	975.5	1,024.8	117.0	526.9	683.7
<i>of which;</i>							
Insurance	16.0	75.0	78.8	82.7	16.0	16.0	16.0
Utilities	101.0	130.0	136.5	143.3	101.0	101.0	101.0
Rent	-	8.0	8.4	8.8	-	-	-
Subscription to International Organizations	-	-	-	-	-	-	-
Subscription to Professional Bodies	-	-	-	-	-	-	-
Contracted Professional (Guards and Cleaning Services)	-	65.0	68.3	71.7	-	-	-
Gratuity	-	74.0	77.7	81.6	-	-	-
others	(0.0)	578.0	605.9	636.7	(0.0)	410.0	566.8
<b>9. DIGITAL HEALTH AGENCY</b>							
<b>GROSS</b>	<b>100.0</b>	<b>1,386.0</b>	<b>2,534.1</b>	<b>2,746.9</b>	<b>224.2</b>	<b>226.7</b>	<b>249.2</b>
AIA	-	124.2	126.7	129.2	124.2	126.7	129.2
<b>NET</b>	<b>100.0</b>	<b>1,261.8</b>	<b>2,407.4</b>	<b>2,617.7</b>	<b>100.0</b>	<b>100.0</b>	<b>120.0</b>
Compensation to Employees	-	17.8	22.6	25.0	17.8	22.6	25.0
Other Recurrent	<b>100.0</b>	<b>1,368.1</b>	<b>2,511.4</b>	<b>2,721.9</b>	206.4	204.1	224.2
<i>of which</i>					-		
Insurance	1.0	3.8	4.6	4.9	1.0	1.0	1.0
Utilities	5.3	19.8	30.7	35.4	5.3	5.3	5.3
Rent	7.0	15.3	16.8	16.8	7.0	7.0	7.0
Subscriptions to International Organization	-	-	-	-	-	-	-

Economic classification	2024/25	Requirement			Allocations		
	Approved Estimates	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<i>Subscriptions to Professional Bodies</i>	0.2	11.2	11.8	12.3	0.2	0.2	0.2
<i>Contracted professional (Guards and Cleaners)</i>	3.0	4.6	5.4	6.3	3.0	3.0	3.0
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others</i>	83.5	1,313.5	2,442.2	2,646.2	189.9	187.6	207.7
<b>10. NATIONAL SYNDemic DISEASE CONTROL COUNCIL</b>							
<b>Gross</b>	<b>1,122.0</b>	<b>1,324.0</b>	<b>1,364.0</b>	<b>1,405.0</b>	<b>1,180.0</b>	<b>1,296.1</b>	<b>1,391.2</b>
AIA	-	-	-	-	-	-	-
<b>Net</b>	<b>1,122.0</b>	<b>1,324.0</b>	<b>1,364.0</b>	<b>1,405.0</b>	1,180.0	1,296.1	1,391.2
Compensation to Employees	517.0	521.9	537.6	553.7	522.0	538.0	554.0
Other Recurrent	605.0	802.1	826.4	851.3	658.0	758.1	837.2
<b>of which;</b>							
<i>Insurance</i>	60.0	60.0	61.8	63.7	60.0	62.0	63.0
<i>Utilities</i>	69.0	70.0	72.1	74.3	70.0	72.0	74.0
<i>Rent</i>	80.0	60.0	61.8	63.7	60.0	62.0	63.0
<i>Subscriptions to International Organization</i>	7.0	7.0	7.0	7.0	5.0	5.0	5.0
<i>Subscriptions to Professional Bodies</i>	2.0	2.0	2.0	2.0	2.0	2.0	2.0
<i>Contracted professional (Guards and Cleaners)</i>	28.0	24.0	24.7	25.5	24.0	23.0	24.0
<i>Gratuity</i>	99.0	88.0	90.6	93.4	88.0	91.0	93.0
<i>Others</i>	260.0	491.1	506.4	521.9	349.0	441.1	513.2
<b>11. MWAI KIBAKI HOSPITAL</b>							
<b>Gross</b>	<b>1,379.0</b>	<b>2,741.5</b>	<b>3,368.3</b>	<b>3,533.8</b>	<b>1,476.7</b>	<b>1,540.1</b>	<b>1,674.1</b>
AIA	599.0	696.7	710.1	769.3	696.7	710.1	769.3
<b>NET</b>	<b>780.0</b>	<b>2,044.8</b>	<b>2,658.2</b>	<b>2,764.5</b>	<b>780.0</b>	<b>830.0</b>	<b>904.8</b>
Compensation to Employees	827.0	2,044.8	2,658.2	2,764.5	827.0	827.0	827.0
Other Recurrent	552.0	696.7	710.1	769.3	649.7	713.1	847.1
<b>of which for others</b>	-	-	-	-			
<i>Insurance</i>	-	-	-	-	-	-	-
<i>Utilities</i>	47.0	49.4	51.9	54.5	47.0	47.0	47.0
<i>Rent</i>	-	-	-	-	-	-	-
<i>Subscriptions to International Organization</i>	-	-	-	-	-	-	-
<i>Subscriptions to International Bodies</i>	-	-	-	-	-	-	-
<i>Contracted professional (Guards and Cleaners)</i>	25.0	25.3	27.1	29.0	25.0	25.0	25.0
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>others</i>	480.0	622.0	631.2	685.8	577.7	641.1	775.1
<b>12. SOCIAL HEALTH AUTHORITY</b>							
<b>GROSS</b>	<b>14,822.1</b>	<b>13,714.5</b>	<b>14,217.6</b>	<b>14,733.6</b>	<b>3,918.0</b>	<b>3,918.0</b>	<b>3,918.0</b>
AIA	14,822.1	13,714.5	14,217.6	14,733.6	3,918.0	3,918.0	3,918.0
<b>NET</b>	-	-	-	-	-	-	-
<b>Compensation to Employees</b>	<b>4,658.6</b>	<b>5,576.8</b>	<b>5,697.6</b>	<b>5,819.6</b>	<b>1,640.2</b>	<b>1,640.2</b>	<b>1,640.2</b>

Economic classification	2024/25	Requirement			Allocations		
	Approved Estimates	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<b>Other Recurrent</b>	10,163.5	8,137.6	8,520.0	8,914.1	<b>2,277.8</b>	<b>2,277.8</b>	<b>2,277.8</b>
<i>Insurance</i>	542.2	622.0	651.7	662.6	622.0	622.0	622.0
<i>Utilities</i>	14.8	15.6	16.3	17.1	15.6	15.6	15.6
<i>Rent &amp; Leasing</i>	366.3	373.6	381.1	388.7	373.6	373.6	373.6
<i>Subscription to International Organizations</i>	5.3	5.4	5.5	5.6	5.4	5.4	5.4
<i>Subscription to Professional Bodies</i>	8.0	8.5	9.1	9.8	8.5	8.5	8.5
<i>Contracted Professional (Guards &amp; Cleaners)</i>	87.7	129.0	135.4	142.2	129.0	129.0	129.0
<i>Gratuity</i>	15.4	16.9	18.6	20.5	16.9	16.9	16.9
<i>Others (Claims &amp; Other expenses)</i>	9,123.9	6,966.6	7,302.1	7,667.6	1,106.7	1,106.7	1,106.7
<b>13. SOCIAL HEALTH INSURANCE FUND</b>							
<b>GROSS</b>	<b>82,430.2</b>	<b>100,704.7</b>	<b>110,767.1</b>	<b>121,087.9</b>	<b>72,260.3</b>	<b>72,260.3</b>	<b>72,260.3</b>
<b>AIA</b>	82,430.2	100,704.7	110,767.1	121,087.9	72,260.3	72,260.3	72,260.3
<b>NET</b>	-	-	-	-	-	-	-
<b>Compensation to Employees</b>	-	-	-	-	-	-	-
<b>Other Recurrent</b>	82,430.2	100,704.7	110,767.1	121,087.9	72,260.3	72,260.3	72,260.3
<i>Of Which:</i>							
<i>Insurance</i>	-	-	-	-	-	-	-
<i>Utilities</i>	-	-	-	-	-	-	-
<i>Rent &amp; Leasing</i>	-	-	-	-	-	-	-
<i>Subscription to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscription to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	-	-	-	-	-	-	-
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others (Claims &amp; Other expenses)</i>	82,430.2	100,704.7	110,767.1	121,087.9	72,260.3	72,260.3	72,260.3
<b>14. PRIMARY HEALTHCARE FUND</b>							
<b>GROSS</b>	<b>4,100.0</b>	<b>61,100.9</b>	<b>61,100.9</b>	<b>61,100.9</b>	<b>4,100.0</b>	<b>4,100.0</b>	<b>4,756.0</b>
<b>AIA</b>	-	-	-	-	-	-	-
<b>NET</b>	4,100.0	61,100.9	61,100.9	61,100.9	4,100.0	4,100.0	4,756.0
<b>Compensation to Employees</b>	-	-	-	-	-	-	-
<b>Other Recurrent</b>	4,100.0	61,100.9	61,100.9	61,100.9	4,100.0	4,100.0	4,756.0
<i>Of Which:</i>							
<i>Insurance</i>	-	-	-	-	-	-	-
<i>Utilities</i>	-	-	-	-	-	-	-
<i>Rent &amp; Leasing</i>	-	-	-	-	-	-	-
<i>Subscription to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscription to Professional Bodies</i>	-	-	-	-	-	-	-

Economic classification	2024/25	Requirement			Allocations		
	Approved Estimates	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<i>Contracted Professional (Guards &amp; Cleaners)</i>	-	-	-	-	-	-	-
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others (Claims &amp; Other expenses)</i>	4,100.0	61,100.9	61,100.9	61,100.9	4,100.0	4,100.0	4,756.0
<b>15. EMERGENCY, CHRONIC &amp; CRITICAL ILLNESS FUND</b>							
<b>GROSS</b>	<b>2,000.0</b>	<b>107,189.2</b>	<b>107,189.2</b>	<b>107,189.2</b>	<b>2,000.0</b>	<b>2,000.0</b>	<b>2,320.0</b>
<b>AIA</b>	-	-	-	-	-	-	-
<b>NET</b>	2,000.0	107,189.2	107,189.2	107,189.2	2,000.0	2,000.0	2,320.0
<b>Compensation to Employees</b>	-	-	-	-	-	-	-
<b>Other Recurrent</b>	2,000.0	107,189.2	107,189.2	107,189.2	2,000.0	2,000.0	2,320.0
<i>Of Which:</i>							
<i>Insurance</i>	-	-	-	-	-	-	-
<i>Utilities</i>	-	-	-	-	-	-	-
<i>Rent &amp; Leasing</i>	-	-	-	-	-	-	-
<i>Subscription to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscription to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	-	-	-	-	-	-	-
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others (Claims &amp; Other expenses)</i>	2,000.0	107,189.2	107,189.2	107,189.2	2,000.0	2,000.0	2,320.0
<b>16. GOK Grants Transfers to Health Insurance Subsidies under SHA</b>							
<b>Social Health Insurance for Indigents and vulnerable persons-BETA</b>	<b>861.5</b>	<b>6,473.8</b>	<b>8,273.8</b>	<b>10,073.8</b>	861.5	861.5	999.3
<b>13. Kenya Board of Mental Health</b>							
<b>GoK Grant to KBMH</b>	<b>99.6</b>	<b>250.0</b>	<b>450.0</b>	<b>870.0</b>	99.6	99.6	115.5

**STATE DEPARTMENT FOR PUBLIC HEALTH AND PROFESSIONAL STANDARDS SAGAS**

Economic Classification	2024/25	Requirement			Allocation		
	Approved Estimates	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<b>1. CLINICAL OFFICERS COUNCIL - COC</b>							
<b>GROSS</b>	<b>182.3</b>	<b>212.3</b>	<b>231.2</b>	<b>251.0</b>	<b>182.3</b>	<b>231.2</b>	<b>251.0</b>
AIA	132.3	132.3	144.0	156.0	132.3	144.0	156.0
<b>NET</b>	<b>50.0</b>	<b>80.0</b>	<b>87.2</b>	<b>95.0</b>	<b>50.0</b>	<b>87.2</b>	<b>95.0</b>
Compensation to Employees	8.9	20.0	30.0	40.0	8.9	30.0	40.0
Other Recurrent	173.4	192.3	201.2	211.0	173.4	201.2	211.0
<i>of which</i>					-		
<i>Insurance</i>	0.6	1.5	2.5	5.0	0.6	2.5	5.0
<i>Utilities</i>	4.2	7.0	7.6	8.3	4.2	7.6	8.3
<i>Rent</i>	-	-	-	-	-	-	-

Economic Classification	2024/25	Requirement			Allocation		
	Approved Estimates	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<i>Subscriptions to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	-	-	-	-	-	-	-
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others</i>	168.6	183.8	191.1	197.7	168.6	191.1	197.7
<b>2. KENYA NUCLEAR REGULATORY AUTHORITY</b>							
<b>GROSS</b>	<b>198.8</b>	<b>297.0</b>	<b>326.0</b>	<b>357.0</b>	<b>208.8</b>	<b>326.0</b>	<b>357.0</b>
AIA	100.0	110.0	120.0	130.0	110.0	120.0	130.0
<b>NET</b>	<b>98.8</b>	<b>187.0</b>	<b>206.0</b>	<b>227.0</b>	<b>98.8</b>	<b>206.0</b>	<b>227.0</b>
Compensation to Employees	79.0	167.0	184.0	202.0	79.0	184.0	202.0
Other Recurrent	119.8	130.0	142.0	155.0	129.8	142.0	155.0
<i>of which</i>					-		
<i>Insurance</i>	3.7	4.0	4.5	5.0	3.7	4.5	5.0
<i>Utilities</i>	4.7	5.0	6.0	7.0	4.7	6.0	7.0
<i>Rent</i>	18.0	20.0	22.0	24.0	18.0	22.0	24.0
<i>Subscriptions to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	7.1	8.0	9.0	10.0	7.1	9.0	10.0
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others</i>	86.3	93.0	100.5	109.0	96.3	100.5	109.0
<b>3. KENYA HEALTH HUMAN RESOURCE COUNCIL - KHHRAC</b>							
<b>GROSS</b>	<b>54.8</b>	<b>455.8</b>	<b>645.4</b>	<b>709.9</b>	<b>54.8</b>	<b>165.4</b>	<b>248.4</b>
AIA	-	-	-	-	-	-	-
<b>NET</b>	<b>54.8</b>	<b>455.8</b>	<b>645.4</b>	<b>709.9</b>	<b>54.8</b>	<b>165.4</b>	<b>248.4</b>
Compensation to Employees	-	136.7	193.6	213.0	-	110.6	193.6
Other Recurrent	54.8	319.1	451.8	496.9	54.8	54.8	54.8
<i>of which</i>					-		
<i>Insurance</i>	2.5	27.9	30.7	33.8	2.5	2.5	2.5
<i>Utilities</i>	3.2	4.4	5.9	6.5	3.2	3.2	3.2
<i>Rent</i>	10.5	12.5	18.0	19.8	10.5	10.5	10.5
<i>Subscriptions to International Organizations</i>	-	12.9	14.2	15.6	-	-	-
<i>Subscriptions to Professional Bodies</i>	0.1	2.0	2.0	2.2	0.1	0.1	0.1
<i>Contracted Professional (Guards &amp; Cleaners)</i>	3.0	4.0	3.6	4.0	3.0	3.0	3.0
<i>Gratuity</i>	-	10.0	13.0	14.3	-	-	-
<i>Others</i>	35.5	245.4	364.4	400.8	35.5	35.5	35.5
<b>4. KENYA HEALTH PROFESSIONS OVERSIGHT AUTHORITY - KHPOA</b>							
<b>GROSS</b>	<b>170.0</b>	<b>195.5</b>	<b>251.9</b>	<b>323.1</b>	<b>175.0</b>	<b>251.9</b>	<b>253.2</b>
AIA	20.0	25.0	27.0	30.0	25.0	27.0	27.0
<b>NET</b>	<b>150.0</b>	<b>170.5</b>	<b>224.9</b>	<b>293.1</b>	<b>150.0</b>	<b>224.9</b>	<b>226.2</b>
Compensation to Employees	40.6	41.8	43.1	44.4	40.6	43.1	44.4
Other Recurrent	129.4	153.7	208.8	278.7	134.4	208.8	208.8

Economic Classification	2024/25	Requirement			Allocation		
	Approved Estimates	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<i>of which</i>					-		
Insurance	3.9	4.1	4.3	4.5	3.9	4.3	4.3
Utilities	1.2	1.4	1.5	1.6	1.2	1.5	1.5
Rent	7.4	7.8	8.2	8.6	7.4	8.2	8.2
Subscriptions to International Organizations	-	-	-	-	-	-	-
Subscriptions to Professional Bodies	-	-	-	-	-	-	-
Contracted Professional (Guards & Cleaners)	1.0	1.1	1.1	1.2	1.0	1.1	1.1
Gratuity	8.4	8.6	8.9	9.1	8.4	8.9	8.9
Others	107.5	130.8	184.8	253.6	112.5	184.8	184.8
<b>5. KENYA MEDICAL PRACTITIONERS AND DENTIST COUNCIL - KMPDC</b>							
<b>GROSS</b>	<b>705.0</b>	<b>921.0</b>	<b>962.0</b>	<b>1,026.0</b>	<b>730.0</b>	<b>845.6</b>	<b>1,026.0</b>
AIA	365.0	390.0	395.0	400.0	390.0	395.0	400.0
<b>NET</b>	<b>340.0</b>	<b>531.0</b>	<b>567.0</b>	<b>626.0</b>	<b>340.0</b>	<b>450.6</b>	<b>626.0</b>
Compensation to Employees	200.5	246.0	263.0	301.0	200.5	263.0	301.0
Other Recurrent	504.5	675.0	699.0	725.0	529.5	582.6	725.0
<i>of which</i>					-		
Insurance	46.0	46.0	47.0	47.5	46.0	46.0	47.5
Utilities	4.0	4.5	5.0	5.5	4.0	4.0	5.5
Rent	8.9	9.0	9.5	9.5	8.9	8.9	9.5
Subscriptions to International Organizations	-	-	-	-	-	-	-
Subscriptions to Professional Bodies	-	-	-	-	-	-	-
Contracted Professional (Guards & Cleaners)	3.5	3.7	3.8	3.9	3.5	3.5	3.9
Gratuity	11.5	12.5	13.0	13.5	11.5	11.5	13.5
Others	430.6	599.3	620.7	645.1	455.6	508.7	645.1
<b>6. KENYA MEDICAL TRAINING COLLEGE - KMTC</b>							
<b>GROSS</b>	<b>8,561.7</b>	<b>16,538.0</b>	<b>16,410.0</b>	<b>19,297.0</b>	<b>8,861.7</b>	<b>10,019.6</b>	<b>10,328.4</b>
AIA	4,040.0	4,240.0	4,440.0	4,640.0	4,240.0	4,440.0	4,640.0
<b>NET</b>	<b>4,521.7</b>	<b>12,298.0</b>	<b>11,970.0</b>	<b>14,657.0</b>	<b>4,621.7</b>	<b>5,579.6</b>	<b>5,688.4</b>
Compensation to Employees	5,510.0	12,298.0	11,970.0	14,657.0	5,610.0	6,067.9	6,676.8
Other Recurrent	3,051.7	4,240.0	4,440.0	4,640.0	3,251.7	3,951.7	3,651.7
<i>of which</i>					-		
Insurance	450.0	500.0	520.0	550.0	450.0	450.0	450.0
Utilities	162.0	170.0	175.0	180.0	162.0	162.0	162.0
Rent	4.0	4.0	4.0	5.0	4.0	4.0	4.0
Subscriptions to International Organizations	-	-	-	-	-	-	-
Subscriptions to Professional Bodies	-	-	-	-	-	-	-
Contracted Professional (Guards & Cleaners)	445.0	464.0	477.0	484.0	445.0	445.0	445.0
Gratuity	11.0	-	50.0	55.0	11.0	11.0	11.0
Others	1,979.7	3,102.0	3,214.0	3,366.0	2,179.7	2,879.7	2,579.7
<b>7. TOBACCO CONTROL FUND - TCF</b>							
<b>GROSS</b>	<b>831.0</b>	<b>872.6</b>	<b>916.2</b>	<b>962.0</b>	<b>872.6</b>	<b>916.2</b>	<b>962.0</b>
AIA	831.0	872.6	916.2	962.0	872.6	916.2	962.0



Economic Classification	2024/25	Requirement			Allocation		
	Approved Estimates	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<b>NET</b>	-	-	(0.0)	(0.0)	-	(0.0)	(0.0)
Compensation to Employees	-	-	-	-	-	-	-
Other Recurrent	831.0	872.6	916.2	962.0	872.6	916.2	962.0
<b>of which</b>					-	-	-
<i>Insurance</i>	-	-	-	-	-	-	-
<i>Utilities</i>	-	-	-	-	-	-	-
<i>Rent</i>	-	-	-	-	-	-	-
<i>Subscriptions to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	-	-	-	-	-	-	-
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others</i>	831.0	872.6	916.2	962.0	872.6	916.2	962.0
<b>8. NURSING COUNCIL OF KENYA - NCK</b>							
<b>GROSS</b>	<b>625.0</b>	<b>771.0</b>	<b>833.5</b>	<b>890.3</b>	<b>694.9</b>	<b>727.6</b>	<b>918.7</b>
AIA	620.0	651.0	683.6	690.3	651.0	683.6	683.6
<b>NET</b>	<b>5.0</b>	<b>120.0</b>	<b>150.0</b>	<b>200.0</b>	<b>43.9</b>	<b>44.1</b>	<b>235.1</b>
Compensation to Employees	128.6	132.9	143.4	155.2	157.5	172.3	183.7
Other Recurrent	496.4	638.1	690.2	735.0	537.4	555.4	735.0
<b>of which</b>					-	-	-
<i>Insurance</i>	26.0	32.8	33.2	36.5	26.0	33.2	36.5
<i>Utilities</i>	25.4	29.0	33.5	35.0	25.4	33.5	35.0
<i>Rent</i>	-	-	-	-	-	-	-
<i>Subscriptions to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	5.0	5.5	6.0	6.5	5.0	5.0	6.5
<i>Gratuity</i>	20.9	22.0	23.5	25.0	20.9	23.5	25.0
<i>Others</i>	419.1	548.8	594.0	632.0	460.1	460.2	632.0
<b>9. OCCUPATIONAL THERAPY COUNCIL OF KENYA(OTCOK)</b>							
<b>GROSS</b>	<b>24.0</b>	<b>72.0</b>	<b>100.0</b>	<b>120.0</b>	<b>24.0</b>	<b>100.0</b>	<b>120.0</b>
AIA	14.0	14.0	14.0	14.0	14.0	14.0	14.0
<b>NET</b>	<b>10.0</b>	<b>58.0</b>	<b>86.0</b>	<b>106.0</b>	<b>10.0</b>	<b>86.0</b>	<b>106.0</b>
Compensation to Employees	7.5	25.0	30.0	35.0	7.5	30.0	35.0
Other Recurrent	16.5	47.0	70.0	85.0	16.5	70.0	85.0
<b>of which</b>					-	-	-
<i>Insurance</i>	-	4.0	5.0	6.0	-	5.0	6.0
<i>Utilities</i>	0.5	1.2	1.5	2.0	0.5	1.5	2.0
<i>Rent</i>	2.5	4.3	4.5	5.0	2.5	4.5	5.0
<i>Subscriptions to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	-	1.4	1.5	1.6	-	1.5	1.6
<i>Gratuity</i>	-	-	-	-	-	-	-

Economic Classification	2024/25	Requirement			Allocation		
	Approved Estimates	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<i>Others</i>	13.5	36.2	57.5	70.4	13.5	57.5	70.4
<b>10. PHARMACY AND POISONS BOARD -PPB</b>							
<b>GROSS</b>	<b>1,614.2</b>	<b>2,265.0</b>	<b>2,404.7</b>	<b>2,533.6</b>	<b>2,059.0</b>	<b>2,404.7</b>	<b>2,533.6</b>
AIA	1,614.2	2,059.0	2,192.5	2,315.0	2,059.0	2,192.5	2,315.0
<b>NET</b>	<b>-</b>	<b>206.0</b>	<b>212.2</b>	<b>218.6</b>	<b>-</b>	<b>212.2</b>	<b>218.6</b>
Compensation to Employees	141.0	406.0	512.2	568.6	141.0	512.2	568.6
Other Recurrent	1,473.2	1,859.0	1,892.5	1,965.0	1,918.0	1,892.5	1,965.0
<i>of which</i>					-		
<i>Insurance</i>	58.5	150.0	165.0	175.0	58.5	165.0	175.0
<i>Utilities</i>	8.5	12.0	15.0	20.0	8.5	15.0	20.0
<i>Rent</i>	9.0	20.0	25.0	30.0	9.0	25.0	30.0
<i>Subscriptions to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	57.0	65.0	75.0	85.0	57.0	75.0	85.0
<i>Gratuity</i>					-		
<i>Others</i>	1,340.2	1,612.0	1,612.5	1,655.0	1,785.0	1,612.5	1,655.0
<b>11. PUBLIC HEALTH OFFICERS AND TECHNICIANS COUNCIL</b>							
<b>GROSS</b>	<b>50.0</b>	<b>100.0</b>	<b>140.0</b>	<b>200.0</b>	<b>50.0</b>	<b>140.0</b>	<b>200.0</b>
AIA	30.0	30.0	40.0	60.0	30.0	40.0	60.0
<b>NET</b>	<b>20.0</b>	<b>70.0</b>	<b>100.0</b>	<b>140.0</b>	<b>20.0</b>	<b>100.0</b>	<b>140.0</b>
Compensation to Employees	5.2	10.4	15.9	24.8	5.2	15.9	24.8
Other Recurrent	44.8	89.6	124.1	175.2	44.8	124.1	175.2
<i>of which</i>					-		
<i>Insurance</i>	3.1	10.0	15.0	15.0	3.1	15.0	15.0
<i>Utilities</i>	4.0	30.5	35.0	40.0	4.0	35.0	40.0
<i>Rent</i>	1.2	7.8	10.0	10.0	1.2	10.0	10.0
<i>Subscriptions to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	0.4	5.0	10.0	15.0	0.4	10.0	15.0
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others</i>	36.1	36.3	54.1	95.2	36.1	54.1	95.2
<b>12. PHYSIOTHERAPY COUNCIL KENYA - PCK</b>							
<b>GROSS</b>	<b>116.0</b>	<b>140.0</b>	<b>156.0</b>	<b>180.0</b>	<b>58.0</b>	<b>156.0</b>	<b>180.0</b>
AIA	76.0	18.0	18.5	19.1	18.0	18.5	19.1
<b>NET</b>	<b>40.0</b>	<b>122.0</b>	<b>137.5</b>	<b>160.9</b>	<b>40.0</b>	<b>137.5</b>	<b>160.9</b>
Compensation to Employees	2.0	40.0	45.0	48.0	2.0	45.0	48.0
Other Recurrent	114.0	100.0	111.0	132.0	56.0	111.0	132.0
<i>of which</i>					-		
<i>Insurance</i>	1.0	1.0	1.0	2.0	1.0	1.0	2.0
<i>Utilities</i>	2.0	2.0	3.0	4.0	2.0	3.0	4.0
<i>Rent</i>	1.3	3.0	3.0	3.0	1.3	3.0	3.0
<i>Subscriptions to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-

Economic Classification	2024/25	Requirement			Allocation		
	Approved Estimates	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<i>Contracted Professional (Guards &amp; Cleaners)</i>	0.2	1.0	1.0	1.0	0.2	1.0	1.0
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others</i>	109.5	93.0	103.0	122.0	51.5	103.0	122.0
<b>13. KENYA INSTITUTE OF PRIMATE RESEARCH - KIPRE</b>							
<b>GROSS</b>	<b>375.5</b>	<b>1,355.6</b>	<b>1,355.6</b>	<b>1,423.4</b>	<b>376.5</b>	<b>576.5</b>	<b>836.0</b>
AIA	2.5	3.5	3.5	3.7	3.5	3.5	3.5
<b>NET</b>	<b>373.0</b>	<b>1,352.1</b>	<b>1,352.1</b>	<b>1,419.7</b>	<b>373.0</b>	<b>573.0</b>	<b>832.5</b>
Compensation to Employees	-	479.5	479.5	503.4	-	200.0	459.5
Other Recurrent	375.5	876.2	876.2	920.0	376.5	376.5	376.5
<i>of which</i>					-		
<i>Insurance</i>	56.0	56.0	56.0	58.8	56.0	56.0	56.0
<i>Utilities</i>	8.2	12.0	12.0	12.6	8.2	8.2	8.2
<i>Rent</i>	-	-	-	-	-	-	-
<i>Subscriptions to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	16.0	16.0	16.0	16.8	16.0	16.0	16.0
<i>Gratuity</i>		7.7	7.7	8.1	-	-	-
<i>Others</i>	295.3	784.5	784.5	823.7	296.3	296.3	296.3
<b>14. Tobacco Control Board - TCB</b>							
<b>GROSS</b>	<b>30.0</b>	<b>132.8</b>	<b>500.4</b>	<b>920.8</b>	<b>30.0</b>	<b>140.6</b>	<b>276.9</b>
AIA	-	-	-	-	-	-	-
<b>NET</b>	<b>30.0</b>	<b>132.8</b>	<b>500.4</b>	<b>920.8</b>	<b>30.0</b>	<b>140.6</b>	<b>276.9</b>
Compensation to Employees	-	39.8	150.1	276.2	-	39.8	150.1
Other Recurrent	30.0	93.0	350.3	644.6	30.0	100.7	126.7
<i>of which</i>					-		
<i>Insurance</i>	-	3.0	13.0	24.0	-	13.0	24.0
<i>Utilities</i>	-	-	-	-	-	-	-
<i>Rent</i>	-	4.0	16.0	28.0	-	16.0	28.0
<i>Subscriptions to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	-	1.2	4.2	7.2	-	4.2	7.2
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others</i>	30.0	84.8	317.1	585.4	30.0	67.5	67.5
<b>15. Kenya Medical Laboratory Technicians &amp; Technologist Board (KMLTTB)</b>							
<b>GROSS</b>	<b>-</b>	<b>250.0</b>	<b>260.0</b>	<b>270.0</b>	<b>250.0</b>	<b>260.0</b>	<b>270.0</b>
AIA	-	250.0	260.0	270.0	250.0	260.0	270.0
<b>NET</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>(0.0)</b>	<b>-</b>	<b>-</b>	<b>(0.0)</b>
Compensation to Employees	-	27.5	30.3	33.3	27.5	30.3	33.3
Other Recurrent	-	222.5	229.8	236.7	222.5	229.8	236.7
<i>of which</i>					-		
<i>Insurance</i>	-	-	-	-	-	-	-
<i>Utilities</i>	-	-	-	-	-	-	-
<i>Rent</i>	-	7.0	9.0	11.0	7.0	9.0	11.0

Economic Classification	2024/25	Requirement			Allocation		
	Approved Estimates	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<i>Subscriptions to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	-	-	-	-	-	-	-
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others</i>	-	215.5	220.8	225.7	215.5	220.8	225.7
<b>16. Health Records &amp; Information Managers Board</b>							
<b>GROSS</b>	-	<b>59.0</b>	<b>76.2</b>	<b>90.6</b>	<b>18.0</b>	<b>76.2</b>	<b>90.6</b>
AIA		18.0	22.0	26.0	18.0	22.0	26.0
<b>NET</b>	-	<b>41.0</b>	<b>54.2</b>	<b>64.6</b>	-	<b>54.2</b>	<b>64.6</b>
Compensation to Employees		14.0	18.2	18.7	14.0	18.2	18.7
Other Recurrent	-	45.0	58.0	71.9	4.0	58.0	71.9
<i>of which</i>	-	-	-	-	-	-	-
<i>Insurance</i>	-	-	-	-	-	-	-
<i>Utilities</i>	-	1.0	1.0	1.0	1.0	1.0	1.0
<i>Rent</i>	-	2.0	2.0	2.0	2.0	2.0	2.0
<i>Subscriptions to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	-	0.8	0.8	0.8	0.8	0.8	0.8
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others</i>	-	41.3	54.3	68.1	0.3	54.3	68.1
<b>17. Counsellors &amp; Psychologist Board</b>							
<b>GROSS</b>	<b>30.0</b>	<b>130.1</b>	<b>180.8</b>	<b>199.6</b>	<b>30.0</b>	<b>140.6</b>	<b>199.6</b>
AIA	10.0	10.0	10.0	10.0	10.0	10.0	10.0
<b>NET</b>	<b>20.0</b>	<b>120.1</b>	<b>170.8</b>	<b>189.6</b>	<b>20.0</b>	<b>130.6</b>	<b>189.6</b>
Compensation to Employees	7.1	30.5	31.4	32.4	7.1	31.4	32.4
Other Recurrent	22.9	99.6	149.3	167.3	22.9	109.1	167.3
<i>of which</i>					-		
<i>Insurance</i>	2.0	3.1	4.6	5.1	2.0	4.6	5.1
<i>Utilities</i>	-	5.0	7.5	8.4	-	7.5	8.4
<i>Rent</i>	-	20.0	30.0	33.6	-	30.0	33.6
<i>Subscriptions to International Organizations</i>	-	-	-	-	-	-	-
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	-	1.5	2.3	2.5	-	2.3	2.5
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others</i>	20.9	70.0	105.0	117.6	20.9	64.8	117.6
<b>18. The Kenya National Public Health Institute</b>							
<b>GROSS</b>	<b>33.6</b>	<b>781.6</b>	<b>819.8</b>	<b>867.9</b>	<b>33.6</b>	<b>144.2</b>	<b>284.2</b>
AIA	-	-	-	-	-	-	-
<b>NET</b>	<b>33.6</b>	<b>781.6</b>	<b>819.8</b>	<b>867.9</b>	<b>33.6</b>	<b>144.2</b>	<b>284.2</b>
Compensation to Employees	-	300.0	315.0	333.9	-	33.2	153.2
Other Recurrent	33.6	481.6	504.8	534.0	33.6	111.1	131.1

Economic Classification	2024/25	Requirement			Allocation		
	Approved Estimates	2025/26	2026/27	2027/28	2025/26	2026/27	2027/28
<i>of which</i>					-		
<i>Insurance</i>	-	2.0	2.1	2.2	-	2.1	2.1
<i>Utilities</i>	-	-	-	-	-	-	-
<i>Rent</i>	-	18.0	18.0	18.0	-	18.0	18.0
<i>Subscriptions to International Organizations</i>	-	0.1	0.1	0.1	-	0.1	0.1
<i>Subscriptions to Professional Bodies</i>	-	-	-	-	-	-	-
<i>Contracted Professional (Guards &amp; Cleaners)</i>	-	1.5	1.6	1.7	-	1.6	1.6
<i>Gratuity</i>	-	-	-	-	-	-	-
<i>Others</i>	33.6	460.0	483.0	512.0	33.6	89.2	109.2
<b>19. Health Education- International Health Office</b>							
GoK Grant Transfer to the International Health Office	50.0	50.0	50.0	50.0	50.0	50.0	50.0
Scholarships and other Educational Benefits - Primary Education	5.5	5.5	5.5	5.5	5.5	5.5	5.5
<b>20. Primary Health Care</b>							
GoK Grant Transfer to Primary Health Care	39.6	39.6	39.6	39.6	29.6	29.6	29.6
<b>21. Community Health Promoters - 107,831</b>							
GoK Current Grant Transfers to Other Levels of Government	2,584.0	3,334.0	3,334.0	3,334.0	3,334.0	3,334.0	3,334.0
<b>22. Disease Surveillance and Response Unit</b>							
Emergency Relief (food, medicine, blankets, cash grant, tents and other	40.6	40.6	40.6	40.6	40.6	40.6	40.6
<b>23. Port Health Control</b>							
Emergency Relief (food, medicine, blankets, cash grant, tents and other	9.8	9.8	9.8	9.8	9.8	9.8	9.8
<b>24. Basic Salaries for Doctors - Return to Work</b>							
GoK Current Grant Transfers to Other Levels of Government	-	1,750.0	-	-	1,750.0	-	-

## CHAPTER FOUR: CROSS-SECTOR LINKAGES AND EMERGING ISSUES

This chapter presents the intra and extra-sector linkages that exist within and without the Health Sector in the national, regional and international context. It also highlights the emerging issues and challenges that impact on the efficiency and effectiveness in

the delivery of the Sector's mandate, planned outputs, outcomes and execution of the budget operations aimed at attaining the best standards of healthcare.

#### **4.1 Cross-sector linkages**

The multi-sectoral approach in health care provision is critical in addressing the multifaceted factors that influence health beyond the scope of the healthcare system to ensure that the gains made in expanding healthcare access are not undermined. These factors, known as social determinants of health include social, economic and environmental conditions.

In implementing its mandate, the health sub-sector interacts with key stakeholders outlined in the Health Sector Partnership Framework 2020-2030, resulting in the efficient delivery of health services, optimal utilization of resources and enhanced accountability. Kenya has a robust health system that has evolved over the years from a centralized system at independence to devolved system with Counties having the mandate of ensuring healthcare services are provided to all. In addition, the two levels of government collaborate with private entities, faith based organizations, development partners and Non-Governmental Organisations in providing health services at delivery points that range from dispensaries to hospitals.

Key Ministries Departments and Agencies (MDAs) have been identified as enablers for UHC, as they play a crucial role in facilitating the moving of services closer to the people, in the spirit of patient-centeredness. This is by providing complimentary services that contribute to a healthy population and they include; access to safe water, diverse food for optimal quality and quality education that result in improved quality of life, including cash transfer and employment. These MDAs include; Public service, Education, Agriculture, Roads, Water, Energy and ICT among others.

##### **4.1.1. Sectoral Linkages within the Sector**

The Kenya Health Policy (KHP) 2014-2030 provides a framework for the attainment of the highest possible standards of health in a manner responsive to the health needs of the population. Further, the Health Sector Partnership and Coordination Framework (2018-2030) provides a framework for collaboration based on the effective and efficient deployment of resources at all levels to improve the health of all Kenyans. These collaborative efforts involve the health sector, both in national and county governments through policy and strategy formulation, planning, information sharing, legislation, resource mobilization, programme implementation, standard setting, capacity building, and monitoring and evaluation.

#### 4.1.2 Inter-sectoral linkages and stakeholders

Social determinants of health in a population go beyond health-related interventions, and often involve other non-health related determinants like education, poverty, access to clean water, food security, and infrastructural development among others. In this regard cross-sectoral relations are key in moving towards a healthy population. This section looks at ways that the health sector collaborates with other sectors of the economy.

The linkages/partnerships with stakeholders mainly focuses on issues that contribute to improved health care, quality of life, and productivity ultimately boosting the country's economic growth. These stakeholders play different roles which are complementary and synergistic at all levels of health care. The various stakeholders in the Sector and their contribution to healthcare delivery are shown in the table below:

S/No.	Sector	Area of Collaboration	Description	Gaps/Remarks
1	Social Protection, Culture and Recreation	Provision of employment/Labour force to improve access to quality health services	The Health Sector is working towards a healthy labour force in the country to improve health labour relations. Further, the labour sub-sector ensures that occupational health and safety standards, guidelines and regulations developed are adhered to.	Continued engagement will ensure labour related disputes do not hinder provision of health services.
		Occupational Health and Safety	The sector contributes towards development, review and monitoring implementation of policies and legislation on labour laws.	There is a need for enhanced partnerships on occupational health and safety.
		Sports	The State Department is working with the sports sub-sector to promote sports medicine to improve overall wellness, physical fitness, treatment, prevention of injuries related to sports and to control doping in the country.	There is a need to strengthen the collaborative framework with the Social Protection, Culture and Recreation sector to promote active lifestyle in order to curb the rising incidences of NCDs.
		Identification of indigent population	This facilitates payment of insurance premiums for the population segment that cannot pay for insurance	
2	Environment Protection, Water and	Hygiene behavior, Environmental	Implementation of the Environmental Sanitation and Hygiene Policy 2016-2030,	Proper management of waste continues to

S/No.	Sector	Area of Collaboration	Description	Gaps/Remarks
	Natural Resources, and Sanitation	Sanitation and Water	envisions and motivates all Kenyans to improve their hygiene behavior and environmental sanitation to free them from suffering ill health caused by poor sanitation.	be a challenge to the community.
		Safe Water Supply	Water supply to health facilities	Supply of clean water and proper management of waste continues to be a challenge in the health facilities.
		Radiation Safety	Radioactive materials have a wide application including health diagnostic and treatment equipment. The Ministry of Environment in collaboration with the sector implements radiation safety requirements to ensure safe use and disposal of radioactive materials.	There is a need for enhanced radiation safety including safe disposal of radioactive and e-wastes.
3	Energy, Infrastructure and ICT Information, Communication and Digital Economy	Nuclear Power Programme	Development of regulations and review of pre-feasibility reports for nuclear power programmes. This will inform decisions on the health safety and viability of nuclear power	Complexity in Global regulation of nuclear energy. Poses a great challenge to health security.
			Working with Energy on household air pollution under strategic objective 5 in the KHSSP on reduction risk factors. With the Ministry of Energy working to develop household air pollution strategy with an aim to accelerate uptake of clean cooking fuel and technologies. Rapid situation analysis on clean cooking including for health facilities in 35 counties.	1786 CHPs trained on uptake of clean cooking solutions that will train the household. Primary Health care bill for compensation of CHP an advantage to motivate the CHPs to keep up this initiative.
		Energy: Connecting health facilities and points of entry/exit to electric power, Last mile connectivity and affordable LPG	The energy sector plays a key role in providing a stable source of power, which is crucial in health care provision in the Country. The Energy and Health Sectors work in partnership to ensure that health facilities/ points of entry are provided with an adequate and stable power supply so as to avoid	There is a need to enhance collaboration with the energy sector to ensure power is supplied to all public health facilities especially in underserved areas and points of entry.



S/No.	Sector	Area of Collaboration	Description	Gaps/Remarks
			disruptions in service provision.	
		Infrastructure: Access roads to health facilities, approvals of infrastructure designs.	The Ministry in charge of infrastructure has substantially invested in road networks providing access to health facilities. It also approves designs and supervises construction of public health infrastructure.	There is a need to double up on improving transport infrastructure especially in hard to reach areas to boost access to healthcare and to develop standardized designs for different levels of health facilities.
		Information Communication Technology	The Ministry of Health in collaboration with the Ministry of ICT undertook connectivity of Hospital Network infrastructure at 2 Level six, 15 Level five & 29 Level four Hospitals totaling to 46 which included a Local Area Network (LAN) and links to the government National level. The MoICTDE has a balance of installing 327 Level 4 Hospitals, and KNH (L6).	The Ministry will leverage ICT for digital transformation in health service delivery.
	The Ministry of ICT also implements initiatives geared toward the achievement of digital health.			
	This includes digitizing port health services at points of entry, development of electronic Community Health Information System (eCHIS), digitization of mass net distribution (DigiMal), and event-based surveillance (EBS), among others.			
	Optic Fiber Backbone Infrastructure (NOFBI). A total 137 Hospitals connected to NOFBI.		The country targets to connect all health facilities totaling 6,091 to the Optic Fiber Backbone Infrastructure (NOFBI)	
4	Public Administration and International Relations	The National Treasury: Resource Mobilization	The funding levels and timely disbursement of funds highly determine the efficiency and	Continuous engagement and collaboration are imperative towards the achievement of

S/No.	Sector	Area of Collaboration	Description	Gaps/Remarks
			effectiveness of running the sector.	allocation of 15% of the budgets to health inline Abuja Declaration
		Ministry of Foreign Affairs: Bilateral agreements and MoUs	The sector has entered into a bilateral agreement between Kenya and several Countries i.e., South Africa; Cuba; United Kingdom of Great Britain and Northern Ireland among others to enhance cooperation in the sector in an effort by the Kenyan government to further improve quality and access to primary health care. The MoUs are on Cooperation in strengthening disease prevention, epidemic surveillance, preparedness, and control, and emergency health service; HR exchange, HR capacity building in medical training colleges under national government, Knowledge exchange on UHC and diseases of public health importance, Health Tourism; and Disease surveillance, response and control of emerging and re-emerging diseases.	MOUs on health cooperation signed for execution require resources for implementation which might be hampered by the tight fiscal space currently being experienced. The signed agreements and MoUs need follow-up on implementation.
5	Education	Training institutions: Training of HRH and research	The education sector programmes are geared towards improving efficiency in core service delivery of accessible, equitable and quality education and training. The sector plays a key role in health research which helps in the generation of new health interventions which are critical in the provision of solutions to existing and emerging health challenges.	Harmonize the different professional training curriculum across all health training institutions.
			The Sector is working in partnership with the Education Sector to harmonize curriculum in health TVET institutions	
		School Health Programmes	The Health Sector collaborates with the Education Sector in implementing school health	The government will continue to strengthen the

S/No.	Sector	Area of Collaboration	Description	Gaps/Remarks
			policy and guidelines to provide a healthy, safe and friendly environment for all learners in Kenya, conducting behaviour change communication, deworming, WASH, vaccination and mosquito net distribution programs. The schools are also used as service delivery points for health care services such as vaccinations, micronutrient supplementation	School Health Programmes
		Kenya National Qualifications Authority (KNQA) & Commission of University Education	The sector plays a key role in harmonising of training, assessment and quality assurance of all qualifications in both public and private institutions	KNQA will coordinate and harmonise education, training, assessment, and quality assurance of all qualifications awarded in the country to improve quality and international comparability.
			In addition, through the Commission of University Education, the sector facilitates the accreditation of institutions offering university level medical courses in the country.	The Commission to regularly update the public of new developments in the higher education scenario as well as make public pronouncements to caution on those institutions which have not been mandated by the Commission to offer university-level education in the country
6	Governance, Justice, Law and Order	State Department for Interior, State Law office and the Judiciary: Enforcement of laws	GJLOS works together with the health sector to enforce laws related to health and ensure a safe, secure and healthy environment for Kenyans. These laws provide the framework under which all collaboration of health matters across different sectors are handled. The sector can help in deterring behaviours related	Review and harmonization of the various health laws and regulations require continued collaboration and partnership between the sub-sector and GJLOS.

S/No.	Sector	Area of Collaboration	Description	Gaps/Remarks
			to violence and injury; addressing the traumas that victims face and how those perpetuate crime and reducing adverse childhood experiences and psycho trauma.	
			The sector will continue to implement the Health Act, 2017 and develop/review Health Bills to address the existing gaps and work closely with other government agencies in implementing the laws	There is a need to set up a health system for medical examination and tracking of health migrants.
		State Department for Correctional Services	Identification and payment of Social health Insurance for persons under lawful custody	
7	General Economic and Commercial Affairs	Industry: Manufacturing of HPTs	The Government has committed to building capacity for the production/ manufacturing of medicines, vaccines and Health Products and Technologies (HPTs) in the country. This will be a collaborative effort between the GECA and health sectors to ensure the success of UHC.	Promote locally manufactured products to transform the economy by making them accessible and affordable while also promoting the manufacturing industry in Kenya.
			The sector collaborates with KEBS on food fortification, particularly industrial-level surveillance and enforcement.	
		East Africa Community	The Sector collaborates with the EAC to develop and strengthen health systems, health research and policy formulation. In addition, the Sector is implementing the East Africa Centre of Excellence in Nephrology and Urology as part of promoting the region as a medical	Continued strengthening collaboration with the East African Community.
8	Agriculture, Rural and Urban Development	Agriculture and livestock and fisheries: Production for food and nutrition security	The ARUD sector is charged with ensuring the production of food in sufficient quantities and of the required quality. This aligns with the Government's objective of ensuring food security in the country.	Strengthen agriculture sector to generate nutritious foods and in adequate quantities and quality contributing to national food and nutrition security.
		Food safety and the resultant effects to health	Food safety is a critical pillar of food and nutrition security, closely linked to the	

S/No.	Sector	Area of Collaboration	Description	Gaps/Remarks
			<p>agriculture and livestock sectors to ensure that safe, high-quality food is available to the Kenyan populace. The national government plays a vital role in supervising these processes, promoting seamless collaboration to uphold safety standards. As livestock systems and antibiotic use are interconnected, addressing antimicrobial resistance becomes essential. The One Health approach is crucial for mitigating zoonotic diseases, highlighting the interactions between humans and animals, and reinforcing the importance of integrating agricultural practices with food safety measures to ensure a healthy food supply.</p>	

S/No.	Sector	Area of Collaboration	Description	Gaps/Remarks
		Food Security	<p>The priority value chains under the Food Security Pillar in BETA maize, beef, irish potatoes, indigenous poultry, sweet potatoes, mutton, pulses, goat meat, bananas, fish, dairy, pork.</p> <p>Plans underway to review the food and security policy to make it have a food systems approach. Distribution of free vegetable seeds 5 types to 223,000 households, in 11 counties, subsidized fertiliser for maize and other commodities per farmers, 6000 to 3500, 14 counties especially in high maize production areas. Farmer registration to know types of crop production and patterns, to guide on extension and subsidization.</p>	
			<p>Extension being done at ward level, 4000 wards, agripreneurs, have been employed to handle production and handling farmers in cooperatives. Farmer cooperatives being formed at ward level. The national government Food safety is conducting supervision to ensure roll out is seamless and carried out.</p>	
			<p>Livestock systems, antibiotics use and antimicrobial resistance are closely linked. Interactions between human beings and animals can</p>	

S/No.	Sector	Area of Collaboration	Description	Gaps/Remarks
			result in zoonotic diseases - one health approach is important in addressing these among other challenges.	
		Crop Improvement and Management to increase food security	The use of biotechnology, in particular Genetically Modified Crops (GMCs), have proved to increase the maize yield as well as reduce yield losses caused by pests. The sector in collaboration with other stakeholders has developed a Monitoring Framework for BT Maize.	Implementation of Monitoring Framework for BT Maize

## 4.2 Emerging Issues

Emerging health issues are those that pose either a threat or relief from threat to the overall health of the population. They can be an increased visibility in a long-standing health issue that continues to obstruct the public health goal of reducing morbidity, mortality and disability.

The following are some of the emerging health issues that need to be considered:

- i. **Technological advancement:** 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, especially in hard-to-reach areas; communication and advocacy; e-health and capacity development for healthcare workers. However, it has also led to escalated misinformation, disinformation, and data insecurity.
- ii. **Climate change:** 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. 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;

- iii. **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.
- iv. **High prevalence of Malnutrition-**Kenya is facing a triple burden of malnutrition including underweight, overweight and micronutrient deficiency affecting significant number of the population. Malnutrition is a major risk factor of mortality and disease morbidity.
- v. **Rising burden of non-communicable diseases (NCDs):** Conditions like cardiovascular diseases, diabetes, and cancer are not only leading causes of death but also place significant strain on healthcare systems. Prevention and surveillance strategies are essential, focusing on lifestyle modifications and early detection.
- vi. **Rising cases of mental health issues:** Mental health disorders, including depression and anxiety among others, 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.
- vii. **Ageing population:** As the population ages, there is a growing need for geriatric care and services for chronic conditions.
- viii. **Rising regional and global conflicts:** 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.
- ix. **Increasing burden of antimicrobial resistance (AMR):** Misuse/overuse of antibiotics, antifungals, antivirals and anti-protozoa in human and animal health contributing to the development of drug-resistant pathogens.
- x. **Increased cross border travels:** This has led to an increase in emerging and re-emerging Diseases (Haemorrhagic fever, Mpox, airborne viral epidemics, polio).
- xi. Industrial Unrest which has negatively affected service delivery in the health sector

## 4.5 Challenges

The following are the challenges in the health sector;

- i. Low awareness on the health insurance benefit package among the beneficiaries and healthcare providers, with associated low uptake of health insurance due to apathy, poor socio-economic status of many Kenyans and inequity in access to healthcare; Weak health systems and Inadequate health infrastructure for provisioning of health services during the pandemics;
- ii. 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 on provision of quality health care services;



- iii. 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.
- iv. 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;
- v. Slow categorization of newly formed SAGAs thus delaying the execution of their mandates;
- vi. 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;
- vii. Inadequate budgetary provision for the procurement and distribution of strategic commodities of public health importance which has hindered the capacity of KEMSA to operationalize the proposed new structures at National and County Levels.
- viii. Rising cases of communicable diseases such as HIV, TB and malnutrition, NCD such as cancer and diabetes;
- ix. Lack of end-to-end visibility of the health supply chain; poor data quality with challenges in identifying and managing supply chain leakages on time e.g., expiries, wastage, or theft;
- x. Low local production capacity of HPT commodities leads to overreliance of imported commodities resulting to high cost of products;
- xi. inadequate infrastructure and skewed distribution of available infrastructure within the sector institutions and the country with a strong bias towards the urban areas;
- xii. The existing regulatory framework for health workers is inadequate as most health cadres remain unregulated. This impacts negatively on health service delivery and jeopardizes the life and health of Kenyans due to existence of untrained and unqualified practitioners;
- xiii. Weak regulatory framework for HPTs occasions opportunities for sub-standard products in the market. This impacts negatively on the health of Kenyans;
- xiv. There is inadequate knowledge in the community to effectively respond to emerging health threats. These threats include emerging diseases, pathogens and vectors; and
- xv. Prolonged drought in the ASALs areas has led to increased cases of malnourished children with the triple burden of malnutrition (stunting, wasting or underweight), overweight/obesity, and micronutrient deficiencies.



## CHAPTER FIVE: CONCLUSION

The Government of Kenya is dedicated to improving healthcare access and quality for all citizens through the Bottom-Up Economic Transformation Agenda (BETA) and Kenya Vision 2030. By partnering with county governments and stakeholders, the government aims to achieve Universal Health Coverage (UHC), focusing on key flagship projects such as Social Health Insurance Fund, primary health strategy and the local production of essential medical products. The health sector was reorganized under Executive Orders No. 1 and No. 2 of 2023, creating the State Departments for Medical Services and Public Health and Professional Standards. Despite ongoing challenges like a shortage and unequal distribution of healthcare workers, the government is strengthening the workforce through strategic policy planning. The government did set up the following three funds to drive Universal Health Coverage delivery plan; Social Health Insurance Fund (SHIF), Primary Health Care Fund and Emergency Chronic and Critical Illness Fund. This report outlines the health sector's achievements and future priorities, underscoring the government's commitment to ensuring all Kenyans receive affordable, high-quality healthcare.

The increasing population growth places a lot of pressure on demand for health services and therefore the sector needs to expand its capacity to provide quality services in an equitable manner. NCDs are increasingly becoming a major burden to the country as well as communicable diseases, therefore a need to balance allocation of resources between competing needs. Emerging public health challenges, such as Mpox, significantly destabilize health systems and fuel the effects of existing epidemics. To effectively address these threats and protect public health, it is essential to allocate sufficient resources to strengthen the resilience and capacity of our health systems. Despite the increasing funding for the sector in a sustainable manner there are concerns for the sector on, reducing OOP, mechanisms to retain health workforce, improving health infrastructure and improving governance and leadership mechanisms.

Population is growing at a rate of nearly 3 percent annually and will continue to place a huge demand for health services. Kenya must continue expanding maternal and child health services while developing the capacity of the health systems to cater for communicable and non-communicable disease burdens which are on the rise. This must be countered with additional investments in RMNCAH to minimize health burden

The government made significant progress in communicable disease prevention, with tuberculosis treatment success rates rising to 89% in FY 2023/24 and malaria prevention efforts distributing 13.6 million insecticide-treated nets. Disease surveillance improved with 463 hospitals adopting event-based reporting. The Division of Health Emergency and Disaster Risk Management trained 104 staff at both County and National levels while Public Health Emergency Operations Centre trained 123 staff

and the Kenya Field Epidemiology and Laboratory Training Program enhanced epidemiological capacity. Vector-borne and neglected tropical disease programs exceeded treatment targets but faced challenges due to resource shortages. Kenya Nuclear Regulatory Authority drafted three regulations for the nuclear power program and two for nuclear security in FY 2023/24. Overall, notable achievements were made in prevention and surveillance, although gaps remain in resources and coordination.

The Kenya Medical Training College expanded significantly, surpassing enrolment and training targets, with certification rates improving to 98% in FY 2023/24. Curriculum reviews and evidence-based policy development were largely successful, though some areas saw mixed results. The Kenya Institute of Primate Research excelled in publishing scientific papers and advancing drug and vaccine research, but not much on vector-borne disease testing. In Public Health Sector Coordination, international collaboration advanced with key MOUs, but resource constraints limited the implementation of resolutions and intergovernmental forums.

The sector made significant strides in health facility inspections and practitioner oversight, with the Kenya Health Professions Oversight Authority inspecting 3,152 health facilities and registering 1,975 unregulated practitioners. However, key targets, such as developing the master register for health practitioners, fell short due to funding delays. Regulatory councils, including the Kenya Medical Practitioners and Dentist Council and Nursing Council of Kenya, saw improved compliance, but resource constraints hindered broader implementation efforts. Although most professional bodies met licensing and registration goals, delays in posting interns and unresolved data-sharing agreements affected overall progress.

The sector is fully committed to achieving its mandate in the next three financial years by prioritizing key health programs aligned with government priorities. Through its focus on prevention and health promotion, it aims to reduce the disease burden by involving communities in health ownership. Strategic recruitment, management, and retention of health professionals will enhance the quality of care, while the regulation of health professions will ensure ethical and quality standards. Strengthened governance and administration will support effective health service delivery. These efforts, implemented through four key programs, underscore the State Department's dedication to achieving Universal Health Coverage and upholding the constitutional right to health.

During the planning period, the sector plans to implement priority programmes aligned to the key national strategies such as the Vision 2030 Medium-Term Plan IV, Presidential Directives, and their potential to address poverty, job creation, and climate change adaptation in public health. Resource allocation will focus on personnel costs, approved recruitments, utilities, and pending bills for recurrent expenditure, while development funds will support Universal Health Coverage (UHC), strategic interventions, ongoing projects, and Treasury-approved new projects.

The sector will continue to build capacities of county governments and provide the necessary technical support so that the counties can effectively execute the functions assigned to them under the Fourth Schedule. In addition, the national State Department will continue to strengthen the national referral hospitals to be able to provide the critical backstopping to the counties with regards to specialized health services. The national government with the SAGAs in the sector will continue to provide the necessary financial inputs as required for effective service delivery.

The two levels of government shall continue engaging each other to ensure that there is a good working environment for staff, effective and efficient service delivery to the citizens. To mitigate the challenges of service delivery brought about due to rebasing of the economy, the Government needs to increase funding significantly to the sector to safeguard the gains made so far. The Government needs to explore innovative and Efficient financing mechanisms such as Private Public Partnerships (PPPs) and ensure efficiency in the utilization of allocated funds by all sector players.

## CHAPTER SIX: RECOMMENDATIONS

**Health Promotion and Disease Prevention:** Prioritize sector programs and campaigns aimed at creating awareness and social behaviour change for regular screening, access to treatment, palliative care and promoting and adaption of healthy behaviors.

Maximizing health outputs and outcomes with the available resources remains the major focus for the Sector during this Medium-Term Expenditure Framework. The sector has noted several emerging issues and challenges that have faced the sector during the review period. To realize the targeted outputs/outcomes and overcome the sector challenges, the following recommendations are made:

There is a need to accelerate implementation of Social Health Insurance Act 2023 to reduce out-of-pockets costs thereby providing social protection to citizens against the catastrophic costs related to accessing health services, enhance access to quality healthcare, and 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 attract and retain skilled healthcare professionals, through available structures to mitigate the impact of labour 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.

**Increase Resource Allocation:** 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.

**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.

The healthcare sector is labour intensive and human resources represent the most important input into the provision of healthcare, as well as the largest proportion of healthcare expenditure. Strengthening the health workforce through policy and planning will help address the balance between supply and demand for healthcare workers; ensure equitable distribution; improve quality; and enhance the use of data and evidence to improve health and health workforce outcomes. Kenya is experiencing a shortage of healthcare workers and an unbalanced distribution of health personnel between and within counties mainly due to fiscal restraints on hiring within the public sector due to policies that cap salaries and freeze hiring.

## ANNEXURES

### Annex 1: COUNTY CONSULTATION PRIORITIES CONSIDERATIONS.

S/N O	County	Issue Raised	Proposed Intervention	FY 2025/26 Health Sector Intervention	FY 2026/27	FY 2027/28
<b>Health Products and Technologies</b>						
1.	Bungoma, Busia, Kakamega, Nandi, Vihiga, Elgeyo Marakwet, Trans Nzoia, Turkana, Uasin Gishu, Homa Bay, Kericho, Kisumu, Nairobi, Siaya, Bomet, Migori, Nyamira, Narok, Baringo,	Lack of/inadequate supply of health products and technologies in health facilities at all levels.	Ensuring availability of adequate and affordable HPTs, especially essential drugs and health products to Health Facilities.	<ul style="list-style-type: none"> <li>Ensuring availability of tracer HPTs in all Public Health facilities countrywide in readiness for UHC.</li> <li>Finalization and implementation of the Strategic Plan for Local manufacturing and local procurement of HPT.</li> <li>Capacity building KBI, PBB, NQCL and KNPHI in partnership with the World Bank in readiness for local manufacturing of HPTs.</li> </ul>	<ul style="list-style-type: none"> <li>PBB, NQCL and KNPHI supported to achieve level 3 status to support KBI in local manufacturing of HPTs.</li> <li>KBI to start initial manufacturing of HPTs.</li> <li>Continued strengthening of HPTs management systems through the support of GF-RSSH programme.</li> </ul>	<ul style="list-style-type: none"> <li>KBI scaling up local manufacturing HPTs to reduce cost.</li> <li>KEMSA to scale up procurement of locally manufactured HPTs.</li> <li>Continued strengthening of HPTs management systems through the support of GF-RSSH programme.</li> </ul>



S/N O	County	Issue Raised	Proposed Intervention	FY 2025/26 Health Sector Intervention	FY 2026/27	FY 2027/28
	Nakuru, Nyandarua, Nyeri, Garissa, Kitui, Makueni, Machakos, Kilifi, Kwale, Lamu, Mombasa, Tana River, Laikipia, Marsabit, Samburu, Wajir, Kajiado, Murangá and Taita Taveta.			<ul style="list-style-type: none"> <li>The Ministry of Health has partnered with Global Fund in implementing GF-RSSH programme to strengthen HPTs management systems.</li> </ul>		
<b>Health Financing.</b>						
2.	Bungoma, Busia, Kakamega, Nandi, Vihiga,	Inadequate health financing for individuals	Register all Kenyans for SHA so that they can access all the Health Benefits Package of UHC	<ul style="list-style-type: none"> <li>Sensitization/awareness creation on Social Health Insurance Cover/Essential</li> </ul>	<ul style="list-style-type: none"> <li>Continuous sensitization and awareness creation to increase Kenyans'</li> </ul>	<ul style="list-style-type: none"> <li>Continuous monitoring to ensure Kenyans get value for money for Health Benefit</li> </ul>

S/N O	County	Issue Raised	Proposed Intervention	FY 2025/26 Health Sector Intervention	FY 2026/27	FY 2027/28
	Elgeyo Marakwet, Trans Nzoia, Turkana, Uasin Gishu, Homa Bay, Kericho, Kisumu, Nairobi, Siaya, Bomet, Migori, Nyamira, Narok, Baringo, Nakuru, Nyandarua, Nyeri, Garissa, Kitui, Makueni, Machakos, Kilifi, Kwale, Lamu,	and households .  Catastrophic health expenditure for households .	including SHIF, Critical Illness Fund and Primary Healthcare Fund.	Health Benefit Package, CIF and PHF.  • Ensuring all Kenyans are registered and covered in SHA.  • Full operationalization of SHA.	awareness about UHC, SHA and SHIF  • Continuous monitoring to ensure Kenyans get value for money for Health Benefit Package under the SHIF.	Package under the SHIF.  • Sensitization/awareness creation on Social Health Insurance Cover/Essential Health Benefit Package  • Continuous review of implementation of SHIF/SHA to enhance effectiveness and efficiency in service provision.

S/N O	County	Issue Raised	Proposed Intervention	FY 2025/26 Health Sector Intervention	FY 2026/27	FY 2027/28
	Mombasa , Tana River, Laikipia, Marsabit, Samburu , Wajir, Kajiado, Murangá and Taita Taveta.					
<b>Health Information System</b>						
3.	Isiolo, Meru, Embu, Tharaka Nithi, Garissa, Kakameg a, Nandi, Bomet,	Inconsisten t internet connectivit y and poor integration of systems	Implementation of Digitization Act 2023 and FIF Act	<ul style="list-style-type: none"> <li>Implementing the 2023 Digitization Bill that promotes digital health platforms and system interoperability to improve internet connectivity and integration for efficient healthcare delivery.</li> <li>Implementing the FIF Act to ensure</li> </ul>	<ul style="list-style-type: none"> <li>Implementing the 2023 Digitization Bill that promotes digital health platforms and system interoperability to improve internet connectivity and integration for efficient healthcare delivery.</li> <li>Implementing the FIF Act to ensure</li> </ul>	<ul style="list-style-type: none"> <li>Implementing the 2023 Digitization Bill that promotes digital health platforms and system interoperability to improve internet connectivity and integration for efficient healthcare delivery.</li> <li>Implementing the FIF Act to ensure</li> </ul>

S/N O	County	Issue Raised	Proposed Intervention	FY 2025/26 Health Sector Intervention	FY 2026/27	FY 2027/28
				health facilities have adequate resources for ICT infrastructure.	health facilities have adequate resources for ICT infrastructure.	health facilities have adequate resources for ICT infrastructure.
<b>Health Infrastructure</b>						
4.	Bungoma, Busia, Isiolo, Meru, Embu, Tharaka Nithi, Mandera, Garissa, Wajir, Samburu, Kakamega, Nandi, Elgeyo Marakwet, Uasin Gishu, Homa Bay, Kisumu, Nairobi,	Lack of/Insufficient infrastructure in public health facilities	Implement the Facility Improvement Fund (FIF) Act, which outlines the process of retention of user fees and SHIF reimbursements in Health facilities to ensure that all public facilities have adequate infrastructure.	<ul style="list-style-type: none"> <li>Implementing the Facility Improvement Fund (FIF) Act, which outlines the process of retention of user fees and SHIF reimbursements in Health facilities to ensure that all public facilities have adequate infrastructure.</li> </ul>	<ul style="list-style-type: none"> <li>Implementing the Facility Improvement Fund (FIF) Act, which outlines the process of retention of user fees and SHIF reimbursements in Health facilities to ensure that all public facilities have adequate infrastructure.</li> </ul>	<ul style="list-style-type: none"> <li>Implementing the Facility Improvement Fund (FIF) Act, which outlines the process of retention of user fees and SHIF reimbursements in Health facilities to ensure that all public facilities have adequate infrastructure.</li> </ul>

S/N O	County	Issue Raised	Proposed Intervention	FY 2025/26 Health Sector Intervention	FY 2026/27	FY 2027/28
	Bomet, Narok, Baringo, Nakuru, Nyandarua, Nyeri, Kitui, Marsabit, Nandi, Turkana, Baringo, Kwale.					
<b>Service Delivery</b>						
5.	Isiolo, Meru, Embu, Tharaka Nithi, Mandera, Garissa, Wajir, Samburu , Kakamega, Elgeyo Marakwe	Inadequate Service Delivery in Healthcare Due to Systemic Barriers	Implement 1. Sensitization campaigns on SHIF packages and services to ensure affordability and access, while 2. PHC Act that strengthens primary health care delivery, promoting quality and	<ul style="list-style-type: none"> <li>Carrying out sensitization campaigns on SHIF packages and services to ensure affordability and access, while</li> <li>Implementing PHC Act that strengthens primary health care delivery, promoting quality and</li> </ul>	<ul style="list-style-type: none"> <li>Carrying out sensitization campaigns on SHIF packages and services to ensure affordability and access, while</li> <li>Implementing PHC Act that strengthens primary health care delivery, promoting quality and</li> </ul>	<ul style="list-style-type: none"> <li>Carrying out sensitization campaigns on SHIF packages and services to ensure affordability and access, while</li> <li>Implementing Act Bill that strengthens primary health care delivery, promoting quality and</li> </ul>

<b>S/N O</b>	<b>County</b>	<b>Issue Raised</b>	<b>Proposed Intervention</b>	<b>FY 2025/26 Health Sector Intervention</b>	<b>FY 2026/27</b>	<b>FY 2027/28</b>
	t, Turkana, Uasin Gishu, Homa Bay, Kericho, Kisumu, Narok, Nakuru, Nyandar ua, Nyeri, Makueni, Mombasa , Marsabit, Kiambu, Murang'a , Taita Taveta.		accessibility for all citizens in Kenya.	accessibility for all citizens in Kenya.	accessibility for all citizens in Kenya.	accessibility for all citizens in Kenya.
6.	Kisumu, Nairobi,	Misalignme nt between services offered and service charter, with	Sensitization of facility in-charges on updating their service charters.  Facilities to adhere to the KMPDC	<ul style="list-style-type: none"> <li>• Sensitization of facility in charges on updating their service charters.</li> <li>• Sensitizing facilities to adhere to the</li> </ul>	<ul style="list-style-type: none"> <li>• Sensitization of facility in charges on updating their service charters.</li> <li>• Sensitizing facilities to adhere to the</li> </ul>	<ul style="list-style-type: none"> <li>• Sensitization of facility in charges on updating their service charters.</li> <li>• Sensitizing facilities to adhere to the</li> </ul>

S/N O	County	Issue Raised	Proposed Intervention	FY 2025/26 Health Sector Intervention	FY 2026/27	FY 2027/28
		facilities not classified correctly by level of care provided.	guidelines on KEPH levels and the services offered	KMPDC guidelines on KEPH levels and the services offered.	KMPDC guidelines on KEPH levels and the services offered.	KMPDC guidelines on KEPH levels and the services offered.
7.	Kisumu, Nairobi, Siaya, Kisii, Migori, Narok, Machakos, Taita Taveta,	Lack of PWDs friendly services systems and Exclusion of PWDs in health programmes and initiatives.	Implement inclusive healthcare programs and PWD-friendly service systems to ensure accessibility and active participation of persons with disabilities, as mandated by the Persons with Disabilities Act, 2003.	<ul style="list-style-type: none"> <li>Sensitizing health facilities to implement inclusive healthcare programs and PWD-friendly service systems to ensure accessibility and active participation of persons with disabilities, as mandated by the Persons with Disabilities Act, 2003, ensuring non-discrimination and equal access to healthcare.</li> </ul>	<ul style="list-style-type: none"> <li>Sensitizing health facilities to implement inclusive healthcare programs and PWD-friendly service systems to ensure accessibility and active participation of persons with disabilities, as mandated by the Persons with Disabilities Act, 2003, ensuring non-discrimination and equal access to healthcare.</li> </ul>	<ul style="list-style-type: none"> <li>Sensitizing health facilities to implement inclusive healthcare programs and PWD-friendly service systems to ensure accessibility and active participation of persons with disabilities, as mandated by the Persons with Disabilities Act, 2003, ensuring non-discrimination and equal access to healthcare.</li> </ul>
<b>Human Resources for Health</b>						

<b>S/N O</b>	<b>County</b>	<b>Issue Raised</b>	<b>Proposed Intervention</b>	<b>FY 2025/26 Health Sector Intervention</b>	<b>FY 2026/27</b>	<b>FY 2027/28</b>
8.	Busia, Kakamega, Vihiga, Nandi, Bungoma, Elgeyo Marakwet, Turkana, Trans Nzoia, Kericho, Kisumu, Homa Bay, Nairobi, Siaya, Bomet, Nyamira, Narok, Migori, Nakuru, Nyandarua, Meru, Garissa, Kitui, Makueni, Kilifi,	Inadequate Human Resources for health	-Recruit more staff/interns  Train and equip CHPs  Development of Human Resource for Health	<ul style="list-style-type: none"> <li>Government has committed to recruit 925 UHC personnel.</li> <li>Government has committed to recruit 1800 medical interns.</li> <li>Digitization of management of CHPs for transparency.</li> <li>Draft HRH policy being developed awaiting the external stakeholders and validation that will address issues on regulations, promotion, recruitment, education and inter-county transfers.</li> </ul>	<ul style="list-style-type: none"> <li>Government has committed to recruit 925 UHC personnel.</li> <li>Government has committed to recruit 1800 medical interns.</li> <li>Training of CHPs will be on going.</li> <li>The implementation of the HRH Policy esp. the qualification and guidelines.</li> </ul>	<ul style="list-style-type: none"> <li>Government has committed to recruit 1800 medical interns.</li> <li>The implementation of the HRH Policy.</li> <li>110,000 CHPs to be supplied with CHP kits.</li> <li>The implementation of the HRH Policy and guidelines.</li> </ul>



S/N O	County	Issue Raised	Proposed Intervention	FY 2025/26 Health Sector Intervention	FY 2026/27	FY 2027/28
	Kwale, Tana River Wajir, Kajiado, Kiambu, Muranga, Taita Taveta.					
<b>Leadership and Governance</b>						
9.	Kakamega, Nandi, Elgeyo Marakwet, Bungoma, Bomet	Leadership and Governance	-Operationalize the various health committees -Implement policies/Laws/guidelines	<ul style="list-style-type: none"> <li>• Training/Sensitizing the members of various committees/boards on their roles.</li> <li>• Enhance implementation/adoption of all national health laws, policies, guidelines and standards.</li> </ul>	<ul style="list-style-type: none"> <li>• Training/Sensitizing the members of various committees/boards on their roles.</li> <li>• Enhance implementation/adoption of all health national laws, policies, guidelines and standards.</li> </ul>	<ul style="list-style-type: none"> <li>• Training/Sensitizing the members of various committees/boards on their roles.</li> <li>• Enhance implementation/adoption of all national health laws, policies, guidelines and standards.</li> </ul>



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