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No. 10 of 2014

Date of Assent: 20th August, 2014
Date of Commencement: 27th August, 2014

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THE KITUI COUNTY HEALTH FACILITIES MANAGEMENT COMMITTEES ACT, 2014

AN ACT of the County Assembly of Kitui to provide for; the establishment of the hospital management committees to enhance effective management of public hospitals within the county, qualifications and procedures for appointments to the Committees; to give effect to Section 2 of the Fourth Schedule to the Constitution of Kenya, 2010, and for connected purposes

ENACTED by the Kitui County Assembly, as follows—

PART I—PRELIMINARY

Short title and commencement

1. This Act may be cited as the Kitui County Health Facilities Management Committees Act, 2014 and shall come into operation upon publication in the Gazette.

Interpretation

2. (1) In this Act, unless the context otherwise requires—

“Committee” means the respective committee established under section 4.

“Financial year” means the period of twelve months ending on 30th June in each year

“Funds” means all monies for health facilities operations

“Hospital” means any gazetted public hospital in the county

“County Executive Committee Member” means a county executive committee member appointed under Article 179 of the Constitution of Kenya 2010 and for the time being responsible for health and sanitation.

“Officer administering the fund” means the accounting officer of the county ministry for the time being responsible for matters relating to Health and Sanitation

“User fees” means cost sharing charges

“Sub-County” means a decentralized unit within the county as established under section 48 of the County Governments Act No. 17 of 2012.

“Member” means a member of a committee and includes an appointed member and an ex officio member.

“Chairperson” means the chairperson of each committee established under this Act.
2014  Kitui County Health Facilities Management Committees  No. 4

Health facility—means places that provide health care such as hospitals, health centre and dispensaries.

Hospital Management Team—means all heads of departments of each respective hospital

National Health Insurance Fund—means National Health Insurance Fund established under the National Health Insurance Fund Act No. 9 of 1998.

Sub-County Health Management Team—means the health personnel in charge of overseeing service delivery in each respective sub-county consisting of different cadres.

Application

3. The provisions of this Act shall apply to the management of all gazetted health facilities in the county.

PART II—ESTABLISHMENT OF THE HOSPITAL MANAGEMENT COMMITTEE

Establishment of the Hospital Management Committee

4. There is established in respect of each hospital as listed in the First Schedule to this Act the Hospital Management Committee.

Committee Membership

5. (1) The total membership of the committees shall be eleven (11) members who shall be nominated by the County Executive Committee Member for Health and Sanitation and forwarded to the Governor, Kitui County for approval. The committee shall consist of—

(a) a chairperson shall be nominated by the County Executive Committee Member for Health and Sanitation and forwarded to the Governor Kitui County for approval;

(b) the person in charge of the hospital who shall be the secretary to the committee and ex-officio;

(c) town Administrator for the case of Mwingi and Kitui General Hospitals and the Sub-County Administrators for the reminder of the Hospitals under the First Schedule to this Act;

(d) business community representative nominated by Chambers of Commerce for Mwingi and Kitui for Mwingi and Kitui General Hospitals respectively;

(e) one person jointly nominated by registered professional groups within the hospital area of jurisdiction;
(f) the following persons who shall be residents of the area of jurisdiction, nominated by the respective group or persons through the nomination coordination committee;

(i) one person nominated by active women groups where the facility is situated;

(ii) one person nominated by the Faith based organization dominant in respective area where the facility is situated;

(iii) one youth nominated in writing by the County Executive Committee of the National Youth Council with a gender rule bias based on other members nominated in that committee where the facility is situated;

(iv) one person living with disability nominated by the County office of the National Council of persons with disability recognized group with a gender rule bias based on other members nominated in that committee where the facility is situated.

(2) A member of the committee, apart from the ex-officio, shall hold office for a period of three years and shall be eligible for re-appointment for one further term based on the performance.

Funds of the Committee

6. (1) The Hospital Management Committees shall manage all the hospital funds which consist of:

(a) Monies appropriated by the County Assembly;

(b) Grants or donations

(c) Monies received as user charges

(d) Income generated from the proceeds of the services

(e) Any other monies

(2) The expenditure incurred by a hospital on the services shall be on the basis of, and limited to the provisions of sub-section 1 and authority to incur expenditure; audit of accounts by internal auditors of the county ministry responsible for matters relating to finance.

(3) Cause to be kept proper books of accounts and records.

(4) Relating to all receipts, payments, assets and liabilities of the funds and to any other activities and undertakings financed by the funds and made public as a matter of practice or on demand.
Requirement for nomination and appointment

7. A person shall not be appointed as a member of the committee under section 5 unless that person holds at least Kenya Certificate of Secondary Education or KCE Division III certificate of education or its equivalent.

Nomination coordinating committee

8. (1) The Nomination coordinating committee shall consist of—
   (a) Officer in charge of the Hospital;
   (b) Members of the County Assembly
   (c) Sub-county administrator

   (2) (a) The nomination shall be coordinated by the officer in charge of the hospital who shall convene the nominating committee and serve as its secretary.

   (b) The officer in charge of the hospital shall forward the report of the nomination coordinating committee to the County Executive Committee Member.

   (c) (1) The County Executive Committee Member shall within twenty one (21) days of the commencement of this Act direct in writing the officer in charge of the respective Hospitals to convene the nomination coordinating committee to start the nomination process.

   (d) Upon receipt of the directive under this sub-section, the officer in charge of the hospital shall within fourteen (14) days convene a meeting of the Nomination Coordinating Committee and the said Committee shall write to the respective groups under section 5 to nominate members giving a period within which the nominations should be received by the nomination coordination committee.

   (e) Upon receipt of the names of the nominated persons, the nomination coordinating committee shall forward the names to the County Executive Committee Member who shall within fourteen (14) days of receipt thereof cause the said names to be published in the County gazette or Kenya gazette.

Meetings of the Committee

9. (1) The committee shall meet at least four times a year and shall maintain records for its deliberations and shall further allow room for emergency meetings in case of outbreaks or disasters.

   (2) The quorum for the meeting of the committee shall be seven of all the members including the secretary.
(3) The secretary shall maintain records for all committee deliberations.

(4) Committee shall, not later than twenty eight (28) days after a meeting, submit copies of the minutes and reports of that meeting to the County Executive Committee Member and the committee members.

(5) A meeting of a committee shall be held at the hospital in respect of which the committee is established.

(6) The County Executive Committee Member may attend any meeting of a committee, provided the area members of the county assembly in the sub-county where the hospital is situated shall be at liberty to attend any meetings of the committee in furtherance of their oversight role.

Functions of the Hospital Management Committee

10. The committee shall —

(a) supervise and control the administration of the funds allocated to the specific hospital

(b) the hospital management committee shall through minutes request for the authority to open and operate a bank account from the County Executive Committee Member;

(c) prepare specific hospital work plans based on the estimated expenditure and drugs stocking levels based on usage.

(d) cause to be kept basic books of accounts

(e) cause to be kept records of accounts of income, expenditure, assets and liabilities of the respective hospital.

(f) prepare and submit to the Chief officer in the department of health and sanitation certified periodical financial and performance reports as prescribed;

(g) cause to be kept a permanent records of all its deliberations

(h) ensure planning that is consistent with the National and County Government policies, laws and regulations.

(i) review and approve all hospital plans including but not limited to development plans, service delivery plans and activities plans;

(j) provide oversight to respective hospitals;

(k) approve and authorise hospital budgets and expenditure.
Core responsibilities of the Hospital Management Committee

11. The Hospital Management committees shall have the following responsibilities—

(a) overseeing Hospital performance improvement
(b) participating in planning for the hospital
(c) mobilizing resources for hospital improvement
(d) overseeing the financial operations of the Hospital
(e) ensuring development of hospital human resource
(f) ensuring communities’ rights are fulfilled and their needs are adequately met.
(g) maintaining a positive public image
(h) ensuring compliance with Environmental Regulations and Standards
(i) enhancing relationships and partnerships
(j) mitigating potential Conflict of interest
(k) risk management
(l) regulatory compliance

Vacation of office and remuneration of the committee members.

12. (1) A member of the Committee shall cease to hold office, if—

(a) a member is absent from three consecutive meetings of the committee without permission from the chairperson;

(b) in the case of a member of a public benefits organization, the member ceases to hold the office by virtue of which his or her nomination was made;

(c) a member is convicted of a criminal offense and sentenced to a term of imprisonment of six months or more or a fine exceeding one hundred thousand Kenya shillings;

(d) a member ceases to reside or practice in the area of hospital jurisdiction;

(e) a member voluntarily resigns in writing from the committee formally;

(f) a member is found to be unfit to hold the position on medical grounds;
(g) a member dies;
(h) a member is involved in an act resulting to conflict of interest with the position held by the member;
(i) a member is guilty of gross misbehaviour or misconduct;
(j) a member is found to be incompetent to hold the position;
(k) a member is convicted of an offence involving dishonesty or fraud;
(l) a member is adjudged bankrupt or enters into a composition scheme of arrangement with his or her creditors; or
(m) a genuine petition from the public is lodged against the member.

(2) the members remuneration shall be determined by the Salaries and Remuneration Commission.

Relationship between Hospital Management teams and Hospital Management Committee

13. (1) The Hospital Management committee shall notify the hospital management team of all its meetings and ensure that the minutes and plans of every meeting are supplied to the hospital management team within seven (7) days of its meetings.

(2) the hospital management team shall ensure that the minutes received under this section are forwarded to the Chief officer in the county ministry of health and sanitation who shall in turn brief the County Executive Committee member on the minutes and plans.

Power of County Executive Committee Member for Health and Sanitation

14. (1) The County Executive Committee Member may give to the committee directions of a general character or relating generally to particular matters (but not to any individual person or case) with regard to exercise by the committee of its functions under this Act, and it shall be the duty of the committee to comply with the directions; but no direction shall be given which is inconsistent with the duties of the committee under this Act.

PART III—HOSPITAL MANAGEMENT SUB COMMITTEES

Hospital Management Sub Committees

15. (1) There is established under every hospital management committee the following sub-committees—

(a) Finance sub-committee;

(b) Quality of Health Care Services Sub-committee;
(c) Audit sub-committee; and
(d) Development committee.

(2) Members of each respective sub-committee shall nominate the chairperson of that sub-committee from the persons appointed from the Hospital Management Committee.

(3) Every sub-committee may, if it considers it necessary, co-opt not more than two members of good professional standing to offer assistance only for the period the assistance is so required.

Finance Sub-committee

16. (1) The Finance Sub-committee shall consist of not less than four (4) and not more than six (6) members.

(2) in addition to provisions of section 15, this sub-committee shall consists of the following—

(a) three (3) members appointed by the hospital management committee; and

(b) the hospital accountant.

(3) The specific responsibilities of this sub-committee committee shall be to—

(a) review revenue targets for the hospital and comparing actual collections with targets;

(b) review expenditure plans for the hospital and Health Management Teams, ensuring that funds are being spent in accordance with plans and Authority to Incur Expenses;

(c) obtain the cash analysis books (payments and banking) and review the fund balances, banking versus collections, expenditures versus Authority to Incur Expenses;

(d) review the financial aspects of long-term and annual development plans;

(e) monitor the continuing expansion of the National Health Insurance Fund and other sources claiming process to meet revenue targets;

(f) arrange for annual audits of all monies or revenues by Internal Auditors, and request for special audits where irregularities are suspected; and

(g) present budgets to respective committees for approval and forward the same for issuance of Authority to Incur Expenses.
Quality of Health Care Services Sub committee

17. (1) The Quality of Health Care Services sub-committee shall consist of not less than four (4) and not more than six (6) members.

(2) In addition to provisions of section 15, this sub-committee shall consists of the following—

(a) two (2) members appointed by the hospital management committee;

(b) one medical officer from the hospital; and

(c) the nursing officer in charge of the hospital

(3) The sub-committee shall be responsible for ensuring provision of quality health care services in the respective hospitals.

Audit sub-committee

18. (1) The audit sub-committee shall consist of not less than three (3) and not more than five (5) members, three of whom shall be drawn from the Hospital Management Committee.

(2) In selecting members under this section, the hospital management committee shall ensure that the members selected have fair knowledge of financial reporting, governance, risk management and internal control matters.

Development sub-committee

19. (1) The total membership of the sub-committee shall be at least four (4) members nominated from the hospital management committee.

(2) The specific responsibilities of the sub-committee shall be—

(a) to establish short and long term plans for the hospital;

(b) to monitor and evaluate population growth of an area and project expansion needs;

(c) to forward development plans of the hospital to the Finance sub-committee for approval;

(d) acquisition of additional land for expansion.
PART IV—ESTABLISHMENT OF THE HEALTH CENTRE MANAGEMENT COMMITTEES AND DISPENSARY MANAGEMENT COMMITTEES

Establishment of the Health Centre Management Committees and Dispensary Management Committees

20. (1) There is established in respect of each public health centre and dispensary as listed in the second and third schedules to this Act, the Health Centre Management Committee and the Dispensary Management Committee respectively.

(2) Sub-section (1) shall apply to any health centre or dispensary established in the county after the commencement of this Act

Committee Membership

21. (1) The total membership of the committees shall be at least seven and not more than nine members. The committee shall consist of—

(a) Chairperson who shall be appointed by the County Executive committee member for health and sanitation from the seven to nine nominated persons;

(b) Ward administrator in the area of jurisdiction and in her or his absence to delegate in writing to the designate Village Administrator;

(c) The person in charge of the health facility, who shall be the secretary and ex-officio;

(d) The sub-county medical officer of health or his/her representative;

(e) The following persons who shall be residents of the area of jurisdiction, nominated by the respective groups and appointed by the County Executive Committee member for health and Sanitation;

(f) One person nominated by active women groups where the facility is situated;

(g) One person nominated by the Faith based organization dominant in the respective area where the facility is situated;

(h) One youth nominated in writing by the County Executive Committee of the National Youth Council with a gender rule bias based on other members nominated in that committee where the facility is situated;

(i) One person living with disability nominated in writing by the County office of the National Council of persons with Disability
with a gender rule bias based on other members nominated in that committee where the facility is situated;

(j) Community based health attendants for instance community based distributors of contraceptives, TBAs, counsellors and others.

(2) A Member of the committee, apart from the ex-officio, shall hold office for a period of three years and shall be eligible for re-appointment for one further term based on the performance as a committee and individually.

Nomination coordinating committee.

22. (1) The Nomination coordinating committee shall consist of—

(a) Officer in charge of the health centre or dispensary;

(b) Member of the County Assembly for the Ward where the health centre or dispensary is located

(c) Ward administrator

(2) (a) The nomination will be coordinated by the officer in charge of the health centre or dispensary who will convene the nominating committee and serve its secretary.

(b) The officer in charge of the health centre or dispensary shall forward the report of the nomination coordinating committee to the County Executive Committee Member for Health and Sanitation.

(3) (a) The County Executive Committee Member shall within twenty one (21) days of the commencement of this Act direct in writing the officer in charge of the respective health centre or dispensary to convene the nomination coordinating committee to start the nomination process.

(b) Upon receipt of the directive under this sub-section, the officer in charge of the hospital shall within fourteen (14) days convene a meeting of the Nomination Coordinating Committee and the said Committee shall write to the respective groups under section 20 to nominate members giving a period within which the nominations should be received by the nomination coordination committee.

(c) Upon receipt of the names of the nominated persons, the nomination coordinating committee shall forward the names to the County Executive Committee Member for Health and Sanitation who shall within fourteen (14) days of receipt thereof cause the said names to be published in the County gazette or Kenya gazette.
2014  

**Kisii County Health Facilities Management Committee**  
No. 4

**Funds of the Committee**

23. (1) The health centre and dispensary Management committees shall manage all the associated funds which consists of —

(a) Monies appropriated by the County Assembly;
(b) Grants or donations
(c) Monies received as user charges
(d) Income generated from the proceeds of the services
(e) Any other monies.

(2) The expenditure incurred by a health centre and dispensary Management committees on the services shall be on the basis of, and limited to the provisions of sub-section 1, and authority to incur expenditure; audit of accounts by internal auditors of the county ministry responsible for matters relating to finance.

(3) Cause to be kept proper books of accounts and records.

(4) Relating to all receipts, payments, assets and liabilities of the funds and to any other activities and undertakings financed by the funds and made public as a matter of practice or on demand.

**Requirement for nomination and appointment.**

24. A person shall not be appointed as a member of the committee under section 22 unless that person holds at least KCSE or KCE Division III certificate of education or its equivalent.

**Meetings of committee**

25. (1) The committee shall meet four times a year and shall maintain records for its deliberations.

(2) The quorum for the meeting of the committee shall be five of all the members including the secretary

(3) Each committee shall cause minutes to be kept of all its meetings.

(4) Committee shall, not later than 28 days after a meeting, submit copies of the minutes and reports of that meeting to the Sub County health in charge.

(5) A meeting of a committee shall be held at the health centre or dispensary in respect of which the committee is established.

(6) The County Executive member may attend any meeting of a committee.
PROVIDED the area members of the county assembly in the sub-county where the health centre or dispensary is situated shall be at liberty to attend any meetings of the committee in furtherance of their oversight role.

Functions of the health centre and dispensaries Management committee

26. The committee shall —

(a) Supervise and control the administration of the funds allocated to the specific health centre or dispensary

(b) The health centre management committee or dispensary management committee shall through minutes request for the authority to open and operate a bank account from the County Executive Committee Member for health and sanitation

(c) Prepare specific health centre or dispensary work plans based on the estimated expenditure and drugs stocking levels based on usage.

(d) Cause to be kept basic books of accounts

(e) Cause to be kept records of accounts of income, expenditure, assets and liabilities of the health centre or dispensary as prescribed by the officer administering the fund.

(f) Prepare and submit certified periodical financial and performance reports as prescribed;

(g) Cause to be kept a permanent records of all its deliberations

(h) Ensure planning that is consistent with the National and County Government policies, laws and regulations.

(i) Review and approve all hospital plans including but not limited to development plans, service delivery plans and activities plans.

(j) Provide oversight to respective health centre or dispensary

(k) Approve and authorise health centre or dispensary budgets

Core responsibilities;

27. The health centre and dispensary Management committees shall have the following responsibilities:

(a) Overseeing the facility performance improvement

(b) Participating in planning for the health facility

(c) Mobilizing resources for the health facility improvement
(d) Overseeing the financial operations of the facility
(e) Ensuring development of the facility human resource
(f) Ensuring communities’ rights are fulfilled and their needs are adequately met.
(g) Maintaining a positive public image of the facility
(h) Ensuring compliance with Environmental Regulations and Standards
(i) Enhancing relationships and partnerships
(j) Mitigating potential Conflict of interest
(k) Risk management
(l) Regulatory compliance

**Vacation of office by a member**

28. A member of the Committee shall cease to hold office, if—

(a) a member is absent from three consecutive meetings of the committee without permission from the chairperson;

(b) in the case of a member of a public benefits organization, the member ceases to hold the office by virtue of which his or her nomination was made;

(c) a member is convicted of a criminal offense and sentenced to a term of imprisonment of six months or more or a fine exceeding one hundred thousand Kenya shillings;

(d) a member ceases to reside or practice in the area of hospital jurisdiction;

(e) a member voluntarily resigns from the committee formally;

(f) a member is found to be unfit to hold the position on medical grounds;

(g) a member is deceased;

(h) a member is involved in an act resulting to conflict of interest with the position held by the member;

(i) a member is guilty of gross misconduct;

(j) a member is found to be incompetent to hold the position;

(k) a member is convicted of an offence involving dishonesty or fraud;
(1) a member is adjudged bankrupt or enters into a composition scheme of arrangement with his or her creditors; or a genuine petition from the public is lodged against the member.

Relationship between Sub-County Health Management teams and health centre or dispensary Management Committees

29. (1) The health centre and dispensary Management committees shall notify the sub-county health management teams of all meetings and ensure that the minutes and plans of every meeting are supplied to the sub-county health management team within seven (7) days of the meetings.

(2) the sub-county health management team shall ensure that the minutes received under this section are forwarded to the Chief officer in the county ministry of health and sanitation who shall in turn brief the County Executive Committee member on the minutes and plans.

Powers of County Executive Committee Member for Health and Sanitation

30. (1) The County Executive Committee Member may give to the committee directions of a general character or relating generally to particular matters (but not to any individual person or case) with regard to exercise by the committee of its functions under this Act, and it shall be the duty of the committee to comply with the directions; but no direction shall be given which is inconsistent with the duties of the committee under this Act.
PART V—HEALTH CENTRE OR DISPENSARY MANAGEMENT SUB COMMITTES

Health centre or dispensary Management Sub Committees

31. There is established under every health centre management committee and dispensary management committee the following sub-committees;

(a) Finance sub-committee;

(b) Quality of Health Care Services Sub-committee;

(c) Audit sub-committee; and

(d) Development committee.

(2) Members of each respective sub-committee shall nominate the chairperson of that sub-committee from the persons appointed from the health centre management committee and dispensary management committee.

(3) Every sub-committee may, if it considers it necessary, co-opt not more than two members of good professional standing to offer assistance only for the period the assistance is so required.

Finance Sub-committee

32. (1) The Finance Sub-committee shall consist of not less than four (4) and not more than six (6) members.

(2) In addition to provisions of section 30, this sub-committee shall consist of the following—

(a) three (3) members appointed by the health centre or dispensary management committee; and

(b) the person in charge of the health centre or dispensary.

(3) The specific responsibilities of this subcommittee committee shall be—

(a) review revenue targets for the health centre or dispensary and comparing actual collections with targets;

(b) review expenditure plans for the health centre or dispensary and sub-county Health Management Teams, ensuring that funds are being spent in accordance with plans and Authority to Incur Expenses;

(c) obtain the cash analysis books (payments and banking) and review the fund balances, banking versus collections, expenditures versus Authority to Incur Expenses;
(d) review the financial aspects of long-term and annual development plans;

(e) arrange for annual audits of all monies or revenues by Internal Auditors, and request for special audits where irregularities are suspected; and

(f) present budgets to respective committees for approval and forward the same for issuance of Authority to Incur Expenses.

Quality of Health Care Services Sub-committee

33. (1) The Quality of Health Care Services sub-committee shall consist of not less than three (3) and not more than six (6) members.

(2) In addition to provisions of section 30, this sub-committee shall consists of the following—

(a) two (2) members appointed by the health centre management committee or dispensary management committee as the case may be; and

(b) the sub county public health nurse.

Audit sub-committee

34. (1) The audit subcommittee shall consist of three (3) members of the health centre or dispensary Management Committee as the case may be.

(2) In selecting members under this section, the hospital management committee shall ensure that the members selected have fair knowledge of financial reporting, governance, risk management and internal control matters.

(2) The sub-committee shall be responsible for ensuring provision of quality health care services in the respective health centre and dispensaries.

Development sub-committee

35. (1) The total membership of the sub-committee shall be at least four (4) members nominated from the health centre and dispensaries management committee.

(2) the specific responsibilities of the subcommittee shall be—

(a) to establish short and long term plans for the hospital;

(b) to monitor and evaluate population growth of an area and project expansion needs;
(c) to forward development plans of the hospital to the Finance subcommittee for approval;

(d) acquisition of additional land for expansion.

PART VI—COMMITTEES’ FINANCIAL PROVISIONS

Financial year of committee

36. The financial year for the committees under this Act shall run from 1st July to 30th of June each year.

Financial provisions

37. (1) Each committee shall prepare and submit to the County Executive Committee Member responsible for Treasury, not later than the 28th day of each quarter in each financial year, an estimate of its income and expenditure during the next succeeding quarter.

(2) The committees shall keep proper accounts in respect of each quarter and proper records in relation to those accounts and shall cause the accounts to be audited as soon as may be after the end of the financial year to which the accounts relate by internal auditors in accordance with the laid down guidelines.

PART VII—MISCELLANEOUS

Complaints

38. (1) A committee may make such recommendations as it thinks fit to the County Executive Committee Member for Health and Sanitation in respect of complaints made to it in writing on any matter relating to the operation of the health facility or the services provided by or through the health facility in respect of which it is established.

Disclosure of interest

39. (1) A member who has a direct or indirect interest whether pecuniary or not in any matter which is the subject of consideration at a meeting of the committee of which he or she is a member shall, as soon as possible after he or she knows that he or she has the interest and that the committee is considering the matter, disclose his or her interest to the committee.

(2) A member who has made a disclosure under subsection (1) shall take no further part in the deliberation of the committee in relation to the matter in respect of which his or her interest was so disclosed.

(3) A member required under subsection (2) to refrain from taking part in the deliberation of a committee shall be disregarded for the purpose of determining whether a quorum has been formed.
Committees responsible to the Chief Officer

40. Each of the committees established under this Act shall be responsible to the Chief Officer for the time being responsible for health and sanitation.

Annual reports of committee

41. (1) Each committee shall prepare and submit to the Chief officer in the county ministry of health and sanitation not later than 28th day of each quarter in each financial year and estimate of its income and expenditure during the next succeeding quarter a report on its operations and the operations of the hospital in respect of which it is established during the immediately preceding period and shall include in such report a copy of the audited accounts of the committee for that year and of the auditor’s report thereon.

(2) Each committee shall furnish to the Chief officer in the county ministry of health and sanitation, not later than the last 28th of July each year a report on its operations and the operations of the hospital in respect of which it is established during the immediately preceding period and shall include in such report a copy of the audited accounts of the committee for that year and of the auditor’s report thereon.

(3) The County Executive Committee Member responsible for health and sanitation shall cause a copy of each report furnished under this section to be tabled in the cabinet meeting within thirty days of receipt.
HOSPITALS IN KITUI COUNTY
Kitui General Hospital
Mwingi General Hospital
Kyuso Hospital
Tseikuru Hospital
Nuu Hospital
Migwani Hospital
Kauwi Hospital
Katulani Hospital
Mutitu Hospital
Ikanga Hospital
Kanyangi Hospital
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