

**COUNTY ASSEMBLY OF SAMBURU**



***THE HANSARD***

**Tues 14<sup>th</sup>, Nov, 2023.**

**The Assembly met at the County Assembly Chambers at 2:30 p.m.**

***Speaker, (Mr. Lenamarle Stephen), in the Chair.***

**PRAYER**

## **STATEMENTS**

**The Speaker**, (Mr. Lenamarle Stephen): It is notified **THAT**, pursuant to Standing Order 45 (1) (c), the Speaker has approved the following tentative request for statement for Tuesday 14<sup>th</sup> November, 2023:

Statement No. 0023/2023 requested by Hon. Lenamtiyio Silapia to the Chairperson, Committee on Health, Medical Services and Sanitation regarding Health Revitalization Task Force.

Hon. Leitoro.

Chairperson Committee on Health, Medical Services and Sanitation, (Hon. Leitoro Jeremiah): Thank you Hon. Speaker, I beg to respond as follows:

Hon. Lenamatiyio Silapai requested for a statement from the Chairperson, on sectoral Health, Medical Services and Sanitation regarding Health Revitalization Task Force.

Hon. Speaker, the Committee conveyed the request to the County Executive Committee Member in-charge of Health Medical Service and Sanitation. Hon. Speaker, on behalf of the Committee I wish to report the communication received regarding the above request.

The first question Hon. Speaker, was to request on what are the terms on the Health Revitalization Task Force Hon. Speaker.

In reference to the review and varying of County Government of Samburu structure and appointment of Taskforces/Committee Member Gubernatorial Action (Annex 4), the Health Revitalization Task Force was appointed by His Excellency the Governor on 30<sup>th</sup> September, 2022. A nine-member team was appointed which was chaired by Mr. Raisi Letura.

Hon. Speaker, if you can be able to read the other members of the committee, there was: Miriam Chege, Augustine Lenamowonapi, Christopher Lengusuranga, Mercy Leleruk, Gideon Obure, Robert Nato, Selina Akiru and Zamzam Ismail; Those were the members of the Committee.

After appointment, the team was not given its Terms of Reference, the team there after retreated during the first initial meeting in Nakuru and came up with the following terms based on annex 2 and 3:

1. Equity in the distribution of health services to be people centered.
2. Participatory approach in delivery unit.
3. Social accountability.
4. This was with a goal to revitalize the health sector in the County.
5. Use multi sectoral approach to the realization of the health goals and efficiency of application of health technologies in the Department.

Hon. Speaker, the mandate of the Task force was to:

1. Compile a comprehensive data report regarding healthcare status in Samburu
2. Conduct Strength, Weakness, Opportunity and Threats (SWOT) analysis in health at all levels
3. Develop capacity assessment that show its progress since devolution
4. Recommend comprehensive reforms that would increase access to quality healthcare services
5. Examine the existing policy, legislative and administrative structures of the Department and if possible suggest recommendations

Hon. Speaker, the objectives is as follows:

1. To establish healthcare services status in Samburu
2. To determine the key priorities and game changes in health and interventions
3. To recommend silver bullet intervention that would spur optimal access to quality health service.

Hon. Speaker, the second question was whether the Task Force had concluded its work, and if not, what was its life span?

Hon. Speaker, the life span for the Task Force was six months, which has since elapsed and the Task Force had almost three meetings, laying the basic requirement for it to operate. The Task

Force could not conclude its activities since it lacked funding to let the team move for information search as per annex 1.

Hon. Speaker, the third question was whether the Task Force has delivered its report to the appointing authority?

The Task Force did not deliver its report since the process stalled due to lack of funding from the relevant Department. The team was ready for the task but lacked support as they kept bothering the Chairman. No proper guidance was given by the Task Force leadership as per the annexes Hon. Speaker.

Hon. Speaker, fourth question was to inquire on the status of the implementation of the Samburu County Community Health Services Act which is as stated below:

The Samburu County Community Health Act, 2021 was enacted in September 2021. The principal of this Act was to provide for the establishment, management, and support to all community units in the County.

Section 31 (4) of the Act expressly states; *that the CECM shall make regulations prescribing monthly remuneration in a mechanism for CHVs that is performance based Prescribed by regulations through the County Treasury.* The coming in of the Community Health Service Law, the Samburu County Assembly enacted the Samburu County Community Health Services Regulations, 2021 to provide for easy mechanism of implementation of the said Act as established by the Samburu County Assembly.

Specifically, regulation No. 15 provides that:

1. *A Community Health Volunteer shall be paid a stipend of Kenya shillings 2,500 per month; and*
2. *A National Hospital Insurance Fund medical cover for Kenya shillings 500.*
3. *The stipend may be revised upon recommendation by the County Community Health Services Committee.*

4. *Payment shall be performed based on monthly reporting, monthly meetings, community dialogue and or actions days, referrals, household visits by the Community Health Volunteer amongst other parameters.*

Hon. Speaker, the Financial Year 2022/2023 County Budget for Community Health Volunteers stipend was Kenya shillings 50 million. Hon. Speaker, the expended amount of the said Budget is; the stipend was paid for only six months; Hon. Speaker, that was from January to May, 2023. So, in October 2022, November 2022 nothing was paid. In January 2023 they paid a total of Kenya shillings 4,599,000, February 2023; Kenya shillings 4,599,000, April 2023; Kenya shillings 4, 614,000, May 2023; Kenya shillings 4,614,000.

Hon. Speaker, you should note that payments for last year for CHVs was not consistent hence some months have missing figures.

Hon. Speaker, on the numbers of CHVs per Ward; the distribution is as follows:

First of all we start with the number of community units, Samburu County 136. Community health promoters. Hon. Speaker I want to bring to this house's attention that CHVs are now known as Community Health Promoters. They are 1,549 . the distribution as per the Sub-Counties is as follows:

1. Samburu East Sub-County has four Wards.
  - a) Wamba East – 13 Community Health Units with 139 CHVs.
  - b) Wamba North – 22 CHUs with 231 CHVs.
  - c) Wamba West - 12 Community Health Units with 131 CHVs.
  - d) Waso Ward – 9 Community Health Units with 91 CHVs.

The total number of Community Health Units in Samburu East is 56 and the total number of CHVs is 592.

2. Samburu Central Sub-County
  - a) Suguta Ward – 8 Community Health Units with 82 CHVs.
  - b) Lodokejek – 9 Community Health Units with 107 CHVs.
  - c) Baawa Ward – 5 Community Health Units with 57 CHVs.

- d) Ang'ata Nanyekie – 5 Community Health Units with 66 CHVs.
- e) Poro Ward – 8 Community Health Units with 70 CHVs.
- f) Loosuk - 7 Community Health Units with 77 CHVs.
- g) Maralal Ward - 10 Community Health Units with 111 CHVs.

The total number of Community Health Units in Samburu Central is 52 and the total number of CHVs is 570.

3. Samburu North SU-County is as follows:

- a) Nachola Ward – 3 Community Health Units with 60 CHVs.
- b) Elbarata Ward – 3 Community Health Units with 38 CHVs.
- c) Nyiro Ward – 10 Community Health Units with 121 CHVs.
- d) Ndoto Wars – 12 Community Health Units with 168 CHVs.

The total number of Community Health Units in Samburu North is 28 and the total number of CHVs is 387. The total number of Community Health Units in Samburu County is 136 and the total number of Community Health Promoters is 1,549.

For the rest of the paperwork, Mr. Speaker, there are annexes for the explanation that was given pertaining to the health taskforce. So that is the report, Hon. Speaker. Thank you.

**Specially Elected MCA, (Hon. Lenamatiyo Silapia):** Thank you Hon. Speaker. Let me take this time to appreciate the Chair and the general Committee on Health for the response they have brought to this house. I cannot say that the report is satisfactory because there are some gaps. When you look at how these questions are being answered such as question one, the issue of the term of reference and also number two, whether the taskforce has concluded its work and if not what was its lifespan? Hon. Speaker this indicates that the taskforce has not finished its work. According to my understanding a taskforce normally has a timeframe to carry out their mandate. When you look at this one a year has already elapsed without any reports or guidelines given by the committee on the issue of health matters.

When you look at the budget allocation, I can see there are months with missing figures without explanation. The department should have given us the correct information about their allocation and also what they are giving the Community Health Promoters. When you look at the number

of Community Health Units and the Community Health Promoters for Nachola Ward, they indicate that it has three CHUs with 60 CHVs.

I think we need clear information and evidence to show that these people are really doing that job. In Wamba North Ward where I come from they have indicated that there are 22 CHUs. We only have 8. So Mr. Speaker, I hope the committee will follow up on the department to give us the correct information. Looking at the plan and the budget of the taskforce, they have no timeframe and a report. The department should be serious on this matter, Hon. Speaker.

Mr. Speaker this taskforce and two others were formed by the Governor. He did not give a timeframe and did not indicate to whom the report would be tabled. I think we need some guidelines whether the taskforce report will be brought to this house or to the Governor's office. This report is very shallow. Let the committee go back and bring us a satisfactory answer on the issue of CHVs and CHUs.

Mr. Speaker there is also a huge cry by the CHVs claiming they have not been paid for the last six months. When you look at this report you see that some months are missing. The issue of CHVs and the budget allocation has no satisfactory answers her Mr. Speaker. Thank you.

**MCA Elbarta Ward**, (Hon. Leitoro Jeremiah): Thank you Mr. Speaker. To respond specifically on the question raised by the Hon. Member pertaining to the Terms of Reference, I think the CECM Member stated categorically that they Committee was not given the exact Term of Reference because as per the annexes shared on the day that the Governor advertised the same. There were three task forces that were formed and put on the gazette that is one on the Tourism, Health and there is another one for the pending Bills.

I also remember during the Supplementary Budget we had a block of the Budgetary allocation that was given to the three-task force was 12 million, that is if I remember well. I cannot ascertain how they distributed between the three task force Committees because as per the response we have been given one is that we are being told that the Committee lacked funding and so we cannot really ascertain from the Department the reason as to why this Committee was specifically that was specifically formed for purposes of Health lacked funding yet I believe the three other Committees were funded.

I am yet to find and inquire from the Department the reason as to why we are being told that there is no report from the said task force simply because there is no Budget allocation for the same. Having said that on the Terms of Reference, the Committee retreated once in Nakuru and they tried to come up with their own Terms of Reference in terms of the objective and the mandate of the task force I think but it was not specifically from the...because I strongly believe that the Governor should have given the Term of Reference for the Committee but now having that they have not been given I think the Task Force Committee tried to come up with the mandate and the objective but having done all that they were not able to continue because as you can see as from annex one they actually tried to come up with the activity plan and Budget.

I want to bring to the attention of the Hon. Member that they actually developed a timeframe for that and you can be able to see that there is activity, dates, timeline and there was Budget. They were only able to do Task Force Planning meeting done from 19<sup>th</sup> May to 24<sup>rd</sup> May 2023. The rest of the Budgetary Plan was put in place but it was not able to be implemented simply as stated that they lacked funding.

Having attended that one very meeting they were not able to go ahead from there and so you can see that they actually had good plans as you can be able to follow all the plans from activity plan and Budget, annex two on Task Force and Parking, you can see the activities, Sub activities, means of verifications, the status if done or not.

You can see Mr. Speaker that the majority of the activities have not been done and the reason is that there is no funding. I am not able to even defend them because as I stand here being the Chairman for Health I understand that there was a block of 12 million that we passed by this Honorable House Mr. Speaker and I do not know if the twelve million were exhausted by the Tourism Task Force or maybe the Pending Bills so that the Health Department was left.

I request that we as the Committee be given at least two weeks to go for a fact-finding mission to ascertain first, what really happened to the Health Task Force Committee in terms of funding. Secondly, as per the response that is on Financial Year 2022/2023 on current Budget on CHVs as asked by Hon. Silapia, there was a Budgetary allocation of 50 million but that Financial Year the only amount that had been distributed was as from January, February, April, May each Kshs. 4,000,599 for four months the rest of the months have not been accounted for.



We do not really know the reason as to why the rest of the months have not been paid. Mr. Speaker I am just reading the response from the Department but I am not here to speak on their behalf but this is the response that we got from them, thank you Mr. Speaker.

**MCA Ang'ata Nanyokie Ward**, (Hon. Leshimpiro Paul): Thank you Mr. Speaker. I am happy to have a word on this. May I also confirm that I am a Member of the Committee on Health. I think this Statement is very true. The CO has just answered as it is. He has not tried to lie to give us false information. The CO Doctor Ndeki has tried to give us actual information that was available at that time. On the task force issue, I do not know whether the appointing authority in this case now the Governor never took it seriously on the issue of this Committee that is the task force the Committee on Health.

I do not think it was prudent for him to appoint a task force and fail to fund it. I do not think the funding was supposed to come from the Health Department; because the Health Department had their own Budgetary Allocations with their vote heads and Budget lines. I do not think there is anywhere that is allocated some money for task force. The office of the Governor or the Finance should have funded the task force.

I also remember we had a 12 million block figure that had task force and I think they were supposed to share on what ratio. Now that ideally the Committee was supposed to give a report in six months' time but has not done so; I do not even see the validity of that task force. If need be then there should be a new task force that needs to be appointed because the one that had been appointed had its time and it elapsed and they have not given anything back.

On the last part here, I saw the Doctor who was trying to respond claiming that the team was ready but they kept on bothering the Chairperson of the task force. It clearly indicates that even within the task force themselves there was some miscommunication or quarrelling, I do not know what it was that the Chairman could not communicate to the other members on what was really happening. He had the leadership then he never communicated to the other members on the way forward.

For me I do not see the reason why that Committee needs to be persuaded or even to be funded to do anything better because they had their time, we had the Budget for them and nothing is given back to us. There was no value for that money.

**MCA Angata Nanyekie Ward,** (Hon. Leshimpiro Paul): because we are also not told whether that money is still there pending to be used or not for us we assume they were used, now that is one the other part the CHV's I do believe that there are some few issues that needs to be understood for example if you paid for the month of February and also the month of April how can you pay for April and you've not paid for March. So, I think something needs to be done unless my paper lack, there is a lack of one Month in between.

There is also the possibility that at that time there were some difficulties or funds were not available or systems were not in place but now going forward it is also clear that the missing Month should be known that the CHV's are not paid so they should have that payment as arrears because the Doctor Himself has just cleared have made it very clear that even the month of March was not paid then June, July, August up to date. Those are pending months and according to the department they should pay for it because they have a budget.

Another thing on the CHV's I did not find the rationale used because all other wards all other CU'S have around 10-12 CHV's almost all except Nachola. So, Nachola seems to have 20 per CU's so I do not know the rationale used for such big difference because what I did understood and I was part of this.

I was actually the chairperson of Health committee by the time we had this Bill. What I understand is that almost all CHU's are attached to one health facility. Some few have no health facility that is attached to them an example like those I Wamba North there are some areas that do not have a health facility in Wamba North but due to that lack of that health facility, there was a ne to have a CU around that area even though there was no health facility. In other parts almost all CU's were attached to a healthy facility.

If I go by that example Nachola ward, I stand to be corrected that there is Marti Dispensary then there is Nachola which other? Logetei, so those should be around the three CU's the number of health facility compared to the equal to the number of the CU's, even if we go by population, I

still do not think for example Logetei could have a bigger population more than even in Maralal some part of Maralal the CU's in Maralal, am sure the CU's in Maralal have a bigger population than those in Logetei, Nachola or Marti, there should be a problem for me that should be a problem that needs to be corrected.

Lastly, payments for the last year for the CHV's were not as consistent hence some months have missing figures so what does it mean? Am I the data that is not available but the CHV's were Paid or they were not paid it needs to be understood? I think for me if need be there is a need to go and recheck only on, for your directives to check on CHV's matters issues that has to do with the CHV's we can ascertain those we make some corrections or recommendations on the same, understand from the department of health leadership but for the matters of the taskforce I do not see really the need to continue pushing for it, thank you.

**The Speaker, (Mr. Lenamarle Stephen):** Hon. Jane

**Specially Elected MCA, (Hon. Jane Nakinyi):** thank you Mr. Speaker Sir, I would just have to comment about question 1 that Hon. Silapia asked on taskforce. The way we have been asking the Department of Health Mr. Speaker on health taskforce, it seems that even them they were not really aware of what this taskforce is supposed to do. It made them even to inquire from the same committee to get this information because they were not even given the report hence due to this statement they had to ask for this report to be given by the said committee.

I thought that it is better Mr. Speaker, maybe the question about all three taskforces is supposed to be asked to a responsible office which has been appointed the three committees, because this question was really hard, it gave them headache to answer what was not for them. They were supposed to bring the report to Assembly so they had to inquire this report from the said committee.

I really do not know what we can do Mr. Speaker Sir about the Health Taskforce because if we can rely on the department we will not get the real answer for it and again I will request also if, because for us we were also doubting the figures we were given by the department on the payment of the CHV's we will really like to do a factual finding mission so that we can go to the ground and inquire and see. We have some other question that we want to inquire from the

department, but I do not know if we will be facilitated so that we can go for this fact-finding mission, thank you Mr. Speaker.

**Specially Elected MCA, (Hon. Lenamatiyo Silapia):** thank you Hon. Speaker, I think when I asked this statement on the issue of Taskforce, I think it is so valid that we passed second supplementary. I understand that that time you were not here and there is a budget of 12million that indicated that this are for the Taskforce committees but Hon. Speaker I think it is so prudent that they could have brought that report to Assembly but I do not blame the Members of the committee on Health or Tourism.

I thought that they attached, the committee is attached to the Health Department that is why I asked this why I asked this question but Hon. Speaker with your advice I will also directives we really need to know the lifespan of this committees and also to know the where the budget went. I see the plan of that committee on Taskforce Health they have planned the way they would do their job, but It seems then there is no budget that they have allocated but when the issue of CHVs I think we need clear data that even when you sit in this House you we have this number of CHUs and CHVs, I think it is so good that we cannot just budget for the purpose of budget without even any valuing in our community. So it is urge to this committee on health to do a finding on the issue of CHEWs and also CHVs because there is a big cry that they are not getting anything. Thank you.

**The Speaker, (Mr. Lenamarle Stephen):** Hon. Lemantaan

**MCA Waso Ward, (Hon. Lemantaan Kelvin):** Thank Hon. Speaker, I have the above statement from the Department of health which I find it is very answered to the CEOs. On the issue of taskforce, we all know that it was supposed to be there for six months to collect the data especially the tourism taskforce and from now what I understand from the tourism is that the Report was concluded but the taskforce committee which was elected are not giving out the Report because they have never been paid.

That is what I understand and I think as County Assembly, we need to follow up on that because it is a serious issue, it was to be six months and the period has elapse and we are yet getting the Reports. I think we have followed, I heard my members also went to see the Chairman for the

above taskforce especially for tourism and the issue is committee taskforce have not been paid.

Thank you

**The Speaker,** (Mr. Lenamarle Stephen): Hon. Lemartile

**MCA Wamba West,** (Hon. Lemartile Francis): Thank you Hon. Speaker, I rise to comment on the taskforce due to the department response, it seems the department was not aware of anything work responsibilities of these taskforce. They were not informed so we need your direction Mr. Speaker because it seems there are other authorities who are in charge of this taskforce. The department was not aware of it. Secondly, my concern is the stipend paid to the CHVs because the concern authority for health gave us a data that the total number of the community health promoters in our country is 1549.

On the other side Mr. Speaker, they gave us total wages paid per month given 1<sup>st</sup> January is 4,599,000 amounts given by the authority by the department by total number of the health promoters, it gives a higher figure. It is 2900 per person, so I do not know which figure is correct. So I direct the department to give a correct information because Mr. Speaker, when you calculate the total payment per month, that is the total number of the health promoters in our County by 2500, the figure should be 3,872,500, so the information given by the department on the payment of community health promoters is not correct, I do not know whether the number is higher or their other payments not reflected. Thank you Mr. Speaker, I think the department needs to clarify that.

**The Speaker,** (Mr. Lenamarle Stephen): Hon. Leitoro, can you clarify that.

**MCA Elbarta Ward,** (Hon. Leitoro Jeremiah): Thank you Hon. Speaker, as the Chair of committee on health, I know there some clarities which have not been mention in this response that despite the number of CHVs being 1549, I know the response has not been written but from the knowledge because I have interacted with the department, the number of CHVs that are being paid per community units are usually 10 CHVs, so it is not like all CHVs are being paid the 1,949 CHVs paid amount , no, the only number of CHVs that being paid per community health unit is only 10.

You find their community units that have for example like in Nachola with 60, it is not that the all 60 CHVs are usually being paid, the number that is being paid per CHVs are 10 and payment are usually done best on monthly reporting, that is one of the condition, condition number two monthly meetings, condition number three, community dialogue, if you do community dialogue and action days, if you do referrals, households visits, that is the only time you are going to be paid. So you might be having the 1549 CHVs but majority are dormant.

So this is the parameter that the department is using to make payments. However, this has not been responded in writing. I would like also to task the department so that they can be able, I will raise the issue so that they can be able to bring that clarity in writing to this Hon. House., because I do not want to mislead the Hon. House and that is the reason as to why am requesting that we be given at least 2 weeks. One we can be able to go to the department and inquire on all these other months that have not been paid. The reasons as to why you find... ..there is payment for April but there is no payment for March and there is payment for May, we need some clarity on that. Honorable Speaker, I know we also have some complain issues and if actually the payment reaches the CHVs (Community Health Volunteers) on ground and I want to really request this Honorable House, to grant the Committee permission to go on a fact-finding mission on this to ascertain if payments were made.

Honorable Speaker, on the issue of the task force, it is quite clear that the task force is not attached to the department; they are not responsible to the CEC Member for Health. I think they were even to report directly to the Governor and not to the CEC responsible for Health. So Honorable Speaker, I think it would not be prudent for us to take again this question to the department of Health because the task force was not responsible directly to the department; they were responsible to the Governor.

So, we can trace these issues or question directly to the Office of the Governor and actually, now that you also heard from the chair, the Committee of Tourism, that even the task force that was responsible for Tourism, are actually not willing to surrender the report simply because they were not paid. I want to request Hon. Silapia whom I respect so much, to raise another statement specifically to the Office of the Governor pertaining to the block budgetary allocation of 12 million that was made to these three Committees task forces. That is the only time they can be

able to tell exactly where these monies went to. Did the whole amount go to the pending bills task force? Now that the task force for Health and Tourism are complaining that they have never received this amount of money.

We really need to enquire on this amount that was budgeted for, so I want to request the Honorable House so that anything in this question that relate to task force we can actually raise the question through the Office of the Governor or the CEC finance for that matter.

Honorable speaker, there were questions rose pertaining to the distribution pattern of CECs in various CUs. As the chair, I am not able to actually tell the criteria that were used to give some CUs more number of CHVS and others less CHVs. So, these are some of the questions that we ask the department to make clarity on that. Thank you, Honorable Speaker.

**The Speaker, (Mr. Lenamarle Stephen):** Point of information from Honorable Leshimpiro.

**MCA Ang'ata Nanyokie Ward, (Hon. Leshimpiro Paul):** Thank you Honorable Speaker, I wanted to add something on top of what the chair has just clarified, that not all CHVs are being paid, but the amount that is totaling to 2,900 also includes 500 that was supposed to have been NHIF. So that brings a slight deviation difference between the two. Thank you.

**MCA Nyiro Ward, (Hon. Lemoosa Jonathan):** Thank you Honorable Speaker, this House is actually trying to juggle between the task force and the CHVs whereas actually we should also borrow a leave from the Nation Government that of course when a task force is formed, it is the Executive powers that actually does that and the report should go to the Executive power.

For instance, actually, The President, His Excellency Ruto did appoint so many tasks force on Education, the police and so forth. All the reports if actually we have been following carefully goes back to the appointee authority, meaning the appointing authority should have some clear guidelines on what needs to be achieved. Also, the budget should be very clear and the time frame or the lifespan of a particular task force.

So, in this case if actually, say we go the department of Health to enquire on the appointment of this task force would have lost direction also. This goes straight to the Office of the Governor

since he is the appointing authority and has that executive powers trying to understand what was the lifespan, what was the budget and the desired objective to be achieved.

We have seen actually from the report; the chair tourism is also trying to enquire how about the tourism task force did they actually laydown or brought back the desired objective? And the answer is NO. So maybe we should also give some space and we re-structure our own statement that goes straight to the appointing authority of the task-force that of course what was the time frame, what was the desired objective, what was the budget and so forth. I think this will also bring us to light because you find some public funds have been used whereas there was no objective and we even do not know what were some of the dutiful recommendations that would have come as such.

I also agree with the Honorable chair and Honorable Member for Ang'ata Nanyokie, Paul Leshimpiro, matters CHVs. I think he was privileged to be the chair in the last Assembly whereas we did actually pass an act that guides activities of CHVs. Meaning; we had actually looked into budgetary issue, maybe if there are challenges, distribution and water view. So, this I think the department of Health cannot run away from matters CHVs because it is domicile in their department.

So, I think with that Speaker, we seek your indulgence and guidance on how we are going to go about the two because these are separate entities and of course the House wants to understand the task force, the life, the budget, the desired objective and such whereas also the department to give us the CHVs all those concerns, the budgetary issue, deviation from maybe the stipends and forth.

So, Speaker I think we cannot just put public funds without proper objectives because I think, I want to believe when the Executive were actually bringing forth the task force, they really wanted to improve our health facilities like just the tourism and such but when it is hanging and we let go, I think then maybe we cannot call that prudent spending. So, with that Speaker sir, the House looks upon your guidance to give direction on how this can be handled. Thank you.

**The Speaker,** (Mr. Lenamarle Stephen): Thank you Members, Honorable Members, I want to direct this statement to the Majority leader to enquire for more information regarding this



statement from the appointing authority, in this case the County Secretary and then get the report and report back to the House in one-week time, that is next week on Wednesday especially question one, two and three.

Question one states that, “what were the terms of reference for the health task force?”

Question two, is whether the task force has concluded its work and if not, what was its lifespan?

Question three, whether the task force has delivered its report to the appointing authority.

So, the majority leader to go to the office of the County secretary and get this report and report here next week Wednesday at 2:30PM. Honorable chair Leitoro, are you contented with that? and I want the Majority Leader to take part.

**MCA El' barta Ward**, (Hon. Leitoro Jeremiah): Honorable Speaker, I was requesting if we can be able to give the responsibility to the minority leader because he is the leader of the government side. Now that both the majority and the Minority leader are not in this House perhaps if you can be able to give a direction whether it is the Majority leader or the Minority leader for that issue.

Then Honorable Speaker, before forgetting they wanted direction on the issue to do with the CHVs and the community helpers. If we can be able to give directions on that.

**The Speaker**, (Mr. Lenamarle Stephen): Concerning the CHVs, let us get the report first, that is, let the three questions being answered about the task force and then later on we can see whether we can now facilitate the Committee, but let us have the report first from the County secretary because he is the appointing authority.

**MCA El' barta Ward**, (Hon. Leitoro Jeremiah): Honorable Speaker, now that we have separated these two issues; issues pertaining to the health task force is now solely out of the department of Health but issues to do with CHVs is strictly on the department of Health.

So, without wasting much time, I think if you can be able to give direction on that so that we cannot be able to... given that very soon we are going to adjourn this House, so it would be prudent if we can be able to do our tasks as early as possible before we actually go for recess.

That is a request Honorable Speaker.

**The Speaker,** (Mr. Lenamarle Stephen): Honorable Leitoro I said let.... you said let the Minority leader is the one inclined to the Government, it is okay. Let us have the Minority leader giving us the report on the first three questions. I have separated, the issues of CHVs it is the department that is going to give us information but the first three questions about the task force it is the County secretary.

So, let us have that on next week Wednesday and then now from there, once we are satisfied with this, we can now make a decision on your request.

**MCA Nyiro Ward,** (Hon. Lemoosa Jonathan): Honorable Speaker, I think for me, with their own guiding, I think the senior Members of the House will understand, once the Speaker has actually pronounced a ruling; he does not stand and debate. Thank you.

### **ADJOURMENT**

**The Speaker,** (Mr. Lenamarle Stephen): Thank you for guiding us. Honorable Members the time being 4 minutes past 4 O'clock, and there being no any other business, this Assembly now adjourns until Wednesday 15<sup>th</sup> November 2023 at 9:00AM.

