

COUNTY ASSEMBLY OF SAMBURU



THE HANSARD

Thursday, 21th November, 2024

The Assembly met at the County Assembly Chambers at 2:30 pm

Temporary Speaker, (Hon. Lorunyei Lawrence) in Chair

PRAYER

STATEMENTS

Report on Maternity Congestion at Samburu County Teaching and Referral Hospital

Temporary Speaker, (Hon. Lorunyei Lawrence): Hon. Members, it is notified that the following statements are due for response today Thursday 21st November, 2024 at 2:30 PM pursuant to Standing Order No 45 (c):

1. Statement No. 039/2024 requested by Hon. Lekireneyei Sarah; nominated MCA, to the Chairperson Sectoral Committee on Health, Medical Services and Sanitation; regarding the status of Samburu Referral Hospital maternity wing being congested.

Chairperson Committee on Health, Medical Services and Sanitation, (Hon. Leitoro Jeremiah): I beg to respond to the statement sought by Hon. Lekireneyei Sarah on issues to do with congestion of maternity bed, factors contributing to the reported congestion and concerns related to staff conduct, particularly issues to do with negligence.

On the Issue of bed capacity: The maternity ward has 28 physical beds and 2 incubator units. This capacity can handle an average daily occupancy rate of 100%. On average, the maternity ward attends to 34 clients per day (October, 2024) which translates to a bed occupancy rate of 124.3% as depicted in the table below:

Hon. Speaker Sir, the point to note is that a rate close to more than 100% suggests full capacity which can strain resources and affect the quality of care.

Hon. Speaker, the table is an analysis of the number of patients they had in the maternity in month of October. During all the days from 1st October, 2024 to 1st November, 2024; there is no a single day that the 28 bed capacity was unoccupied, for example; on 1st October, 2024, the patients were 43 and the normal bed capacity available is 28, so, the bed occupancy rate is 153.6%.

The factors that contributed to bed congestion in the maternity ward are:

1. Increased patient inflow: there has been a notable rise in the number of patients seeking maternal healthcare at the facility partly due to population growth in the catchment area

and referrals from peripheral lower-level facilities. We have been receiving many emergency and non-emergency referral cases.

2. Increased number of gynecological cases: there has been a number of increased patients admitted for gynecological care, these same clients are admitted in the maternity ward and contribute to increase occupancy rate since they are adding up to the numbers of maternity ward admissions and they are not necessarily labour and delivery cases.
3. Straining admission flow: there has been a high turnover rate for admission which adds to the occupancy levels. This is a key performance indicator in healthcare management as it measures the flow and efficiency of the patient care.
4. Insufficient bed allocation: the current bed capacity does not meet the demand of delivery rate and the gynecological admission rate; particularly during peak periods or during a surge in complicated cases arising from referrals requiring extended stays.
5. High number of self-referral patients: many patients self-refer/walk into this facility hence increasing the patient load and straining the resources. This clearly shows the need to have this facility prioritized in every matter.

Nurse conduct and potential negligence: This office and the Department does not entertain any cases of negligence by all our staff including the nurses. My office has not received so far any complaints from maternity patients/other patients about any case of negligence. In case it does, necessary disciplinary action will be taken against the concerned officer or staff.

Recommendation and proposed actions:

1. Increase bed capacity: explore options to expand bed capacity in the maternity ward to accommodate the growing demand for maternal services. We request budgetary allocations to help create a new a modern maternity wing with over 100 bed capacity. In the meantime, we shall have short-term solutions as we await that will include setting up temporary beds or converting adjacent spaces to cub this. Completion of the new inpatient building and equipping it will help in partly addressing this as the adjacent female ward will be frees for maternity use.
2. Optimize admission and discharge process: improve workflow for patients discharge and admission to reduce wait times and manage bed turnover more effectively, this will

involve streamlined protocols for discharge and coordination with other Departments to minimize delays.

3. Enhance staff training and support: provide targeted training for nursing staff to address areas of potential negligence and improve patients care quality. Staffing is not that insufficient, but will come up with protocols as the management to address incompetency and negligence scenarios. Additionally, staffing during high-demand periods should also be considered to ensure adequate care for all patients, this can be done by the facility on local locum engagement terms.
4. Implement measures to manage self-referrals: develop guidelines to manage self-referrals effectively; we can start by coordinating with lower-level facilities to provide pre-referral support, ensuring that only cases requiring higher-level care are directed to the facility. The current Social Healthcare Authority (SHA) policy on primary health care fund and referral policies will go a long way in also reducing self-referrals to this level 4 facility.

Conclusion: The maternity ward at Samburu County Teaching and Referral Hospital is currently facing challenges due to increased patient demand, limited bed capacity and staffing constraints. To address these issues it is essential to expand resources, streamline process, and provide additional support and training to the staff. Immediate actions on these fronts will help alleviate congestion and enhance patient care quality and update regularly to track the progress of this initiative.

Hon. Speaker, I want to also make a little contribution on that. The Committee on Medical Service, Public Health and Sanitation made an initiative and visited Samburu County Teaching and Referral Hospital to ascertain the truth of the matter we had a good number of the Hon. Members you included Hon. Speaker and the secretariat.

We went an extra mile to ascertain and confirm the level of drugs shortages. Mr. Speaker, the Committee met with the Department's Chief Executive Committee, two Chief Officers and the Medical Superintendent of the Samburu Teaching and Referral Hospital. We were satisfied with the Department's responses and the measures they have put in place to cub the identified issues.

Hon. Speaker, now that we got a confirmation from the CEC on the implementation of Social Healthcare Authority/Insurance Authority (SHA/SHIA) model that will emphasize on

progressive treatment from level 1 or dispensary to referral to the Samburu County Teaching and Referral Hospital hence decongestion at the Hospital. Mr. Speaker, this will also be achieved if our level 1 hospitals will be able to handle these maternal cases and County Referral Hospital will be managing emergency cases for example the cases that will need cesarean section and other complex services, thank you Hon. Speaker.

Specially Elected MCA, (Hon. Lekirenyei Sarah): Ahasante Mheshimiwa Spika. Ningependa kumwambia mwenyeki wa kamati ya afya kwamba hii statement tuliandika na kuuliza kwa lugha ya Kiswahili;ningependa angejibu kwa lugha ya Kiswahili, ahasante Mweshimiwa Spika.

MCA Elbarta Ward, (Hon. Leitoro Jeremiah): Thank you Mr. Speaker. It is true that the Statement was sought in Swahili. I also anticipated that the Department will also respond in the same language and now that they have responded in English I can try to do some little translation but I may not be that perfect in translating. Ningependa kujibu swali lililoulizwa na Mheshimiwa Sarah kuhusu sababu ya msongamano katika wadi ya uzazi na kupendekeza suluhu ya haraka ya kupungunguza tatizo hilo.

Swalal la pili linahusu uzembe na uvivu ya wafanyikazi wa afya katika kazi zao. Waziri wa afya amekiri kuwa vitanda vya wadi ya maternity ni vitanda ishirini na nane vya akina mama wanaokuja kujifungua. Pia wako na vitanda viwili vinanvyosimamia Watoto walio zaliwa kabla ya muda. Wametuelezea nambari ya kina mama wanaojifungu kila mwezi; mfano ni tarehe moja mwezi wa kumi kina mama 43 walikuja kujifungua na ukumbuke tuko na vitanda ishirini na nane, tarehe mbili ni ishirini na tisa, tarehe tatu 35, tarehe nne 37. Unaona kuwa hakuna siku kina mama wamepungua 28 kumaanisha ni kweli kina mama wetu wanapata changamoto wanapojifungua katika hospitali yetu ya rufaa.

Sababu zinazo sababisha msongamano ni;

1. Wamesema kuwa wagonjwa wameongezeka kwa kiwango ambayo si ya kawaida na hii imechangiwa na nambari kubwa ya wagonjwa wanaokuja kutafuta matibabu. Kumbuka kuwa hii ni hospitali ambayo ilianza ikiwa china level 4 na sahii tuko level 5 na idadi yetu inaendelea ikiongezeka kila wakati hii ndio imesababisha vitanda vyetu kuwa na msongamano kila mara.

2. Vitanda hivi pia vinatumika kushughulikia magonjwa ambavyo vinahusiana na uzazi sio tu wale kina mama wanaojifungua.
3. Wagonjwa wengi pia ni wakujileta hospitali(Self-referral) kutafuta matibabu katika hospitali ya uzazi; mkakati ambao umewekwa katika tatizo hilo ni kuna mpangilio ya kuongeza vitanda, tayari wamejenga wadi ya kujifungua lakini hawana vitanda ambalo lona nafasi ya vitanda mia moja, wanajaribu kupata bajeti ili waweze kununua vitanda hivi.
4. Kuna pia wadi ya in patient linalojengwa na karibu likamilike ambalo litamaliza shida hili.
5. Pia kuna hili shida la Social Health Insurance kuna policy linalosema kabla mgonjwa atoke akuje katika hospitali ya rufaa lazima kwanza upitie hospitali lililo upande wa chini, upitie dispensary kisha uende health center hadi ufike katika County Referral hospital; kina mama lazima wapiti ratiba hili. Dispensaries zetu zinapeana offer ya kulaza kina mama wetu kwa kujifungua. Itafika mahali kuwa akina mama wanaokuja katika County Referral ni kina mama wanaohitaji upasuaje ama huduma zingine ambazo hawapati katika dispensaries ama health centers.

Kuhusiana uzembe na uvivu katika kutoa huduma na uwajibikaji, waziri amesema kwa kweli hawatakubaliana na mtu yeyeote ataharibu usimamizi na uwajibikaji katika hospitali na amesemba hajakata malalamishi yeyote kutoka kwa wagonjwa ama wasimamizi ambayo wameripoti uzembe na uvivu ya wafanyikazi. Amesema pia atafanya juhudi ili hawa wauguzi watapokea mafunzo na pia watachunguza kwa undani ili huduma zote zinapeanwa kwa njia inalostahili. Ni hayo tu Mheshimiwa Spika.

Specially Elected MCA, (Hon. Lenolkulal Esther): Asante Mheshimiwa Spika. Ni vizuri waheshimiwa wajue kuwa wale wasioelewa Kiingereza wanapitia hali mgumu, ni vyema ikiwa Tunauliza kwa Kiswahili tujibiwe kwa Kiswahili. Namshukuru Mheshimiwa Sarah kwasababu hoja hilo hata kama sikuwepo alipoleta. Ni kweli kuwa akina mama wanapitia hali mgumu kwa upande kwa wadi ya kujifungua.

Wakati mwingine hakuna maji pale na ningeomba mwenyekiti wa afya aangazie mambo ya maji. Casuals pia wanafanya kazi nyingi na hawajalipwa. Wengi ya wafanyikazi ni akina mama na wako na familia zao ilhali hawajalipwa kwa mwaka mzima, naomba idara hiyo iwajibike.

Naomba mwenyekiti kuwa kuna idara ya walemavu kama vile nilongea hapa kitambo nikiwa na hoja langu; walemavu wanapitia hali mgumu hospitalini kwani wanenda kujisajili ili wapate kadi ya ulemavu lakini wanapoenda kujaza barua hizo hakuna mtu anaowasaidia ili wapate cheti zao ya walemavu.

Niko na mtoto wangu mlemavu na ninaongea mambo ambayo mimi mwenyewe nimeshuhudia wakati nilikuwa natafutia huyo kijana wangu kadi amejaza mara mbili na ya tatu ni mimi mwenyewe nilienda. Na nikakuta walemavu wengi wako na shida kwa sababu watu wengi wanafuatilia kama mimi. Naomba mwenyekiti aangalie maneno kama hayo kama mambo ambayo akina mama wanapitia. Naskia kuwa hakuna hata dawa ya uchungu kama Panadol ambayo kina mama wanadungwa wakati wa kujifungua. Asante Mheshimiwa Spika.

Temporary Speaker, (Hon. Lorunyei Lawrence): Asante sana Mheshimiwa Esther. Unajua kuwa kile kilicho mbele yetu ni hali ya Samburu Referral Hospital maternity wing msongamano katika hospitali. Tuangazie swali lilombele yetu na hayo mengine ni baadae. Umeenda nje kidogo lakini nashukuru. Asante.

MCA Wamba West Ward, (Hon. Lemartile Francis): Asante sana Mheshimiwa Spika. Nashukuru Mheshiwa Sarah kwa kuleta hoja hilo. Nashukuru pia mwenyekiti, amejaribu na natumai amepata jibu. Waziri wetu wa afya ni kama ametupatia ukweli wa mambo katika hospitali yetu ya kujifungua, ameeleza kuwa tuko na vitanda ishirini na nane na ameeleza kuwa kutoka tarehe moja hadi kumi na mbili mwezi wa kumi na moja alikuwa na wateja zaidi ya ishirini na nane, kweli tuko na shida ya msongamano. Ameelezea shida hiyo na ni kweli kuwa tuko na shida.

Hospitali yetu ya kujifungua imekuwa ikipokea wagonjwa kutoka hospitali zingine na hiyo ndio sababu ya msongamano. Waziri ameelezea vile atashughulikia na kwahivyo naona kama tumepewa habari vile ilivyo na tutajaribu kumuelezea vile ilivyo pole pole.

Temporary Speaker, (Hon. Lorunyei Lawrence): Asante sana Mheshiwi kwa kujaribu. Inaonekana kuwa unaongea Kiswahili sanifu na nimeshukuru.

Specially Elected MCA, (Hon. Lenamatiyo Silapia): Asante sana Mheshimiwa Spika. Ningependa kuchukua fursa hii kushukuru Mwenzangu Mheshimiwa Sarah kwa hoja lake la changamoto ya msongamano katika idara ya afya katika wadi ya akina mama ya kujifungua Bw.

mwenyekiti wa Afya utanisamehe kwa kuwa Swahili ni changamoto kwangu ningependa kushukuru pia kwa yale mikakati yamewekwa hadi tukapewa majibu yale, ningependa kushukuru ingawa pia bado tuko na changamoto nyingi katika sekta ya Afya ama ukiangalia majibu haya kuna kadhaa inaongea kuhusu bajeti yao ni ndogo nakubaliana na hao ingawa pia hawajaweka bajeti mwaka huu tunatarajia watakuwa na Bajeti kubwa kidogo, maana utaangalia ile kuokota kwao kwa ushuru unaona wako chini kuokota huo ushuru yao kwa sababu kama wangukuwa wameweka mikakati ya kuokota hiyo ushuru tungeona kuwa wako na mipango kuwa wangukata hiyo bajeti yao mwaka ujao iongezwe. Ningehimiza kwa mwenyekiti wa hiyo kamati ya Afya waweze kuangalia pia ingawa kuna changamoto ingawavkuna ile wao wanajiletea kwa sababu wangeweka mikakati ili waweze kuweka bajeti ya Department au ushuru iokotwe kwa njia ambayo inastahili.

Jambo la pili vitanda katika Maternity Ward, ingawa tuko na tuko na wamama wengi ambao wanakuja kujifungua yale ambayo yanasababisha ni kuwa hamna higher services huko mashinani unakuta mama kutoka Ngilai, shida ni hawa wamama hawapati services pale Ngilai na kwa sababu hiyo wako wamejazana na vitanda kuwa chache, kwa hayo mimi ningependa mwenyekiti wa Afya waweze kuangalia kabisa kuwa hata wale wafanyikazi wako kwa maternity wings wanaqualify kuwa huko na pia maneno nilichunguza wakati mwingine tunao wale tunawaita casuals wanakuwa crowded. Tuliaangalia pia auditor report ya 2023 unaona kuna 36 million ya kulipa only casual workers. Hii inamaanisha kuwa we are not addressing our first priorities hata ndani ya hospitali. Kaunti hii maternity wing ingekuwa first priority alafu sasa tuandike hawa casual workers. Kwa hayo machache ningependa kushukuru mwenyekiti na mwenzangu ambaye ameuliza maswali hayo siku nyingine nafikiri atajaribu.

Specially Elected MCA, (Hon. Lenolkulal Esther): Asante sana Bw. Spika ningependa pia kuchukua nafasi hii kumpongeza mwenyekiti alifanya kazi nzuri kujibu maswali haya na kuwapongeza pia waheshimiwa wenzangu kwakuchangia na mimi hivi nmeridhika asante.

Temporary Speaker, (Hon. Lenamparasio Phelix): Asante sana Mheshimiwa na ninafikiri Mwenyekiti nimeona yale ambayo Mheshimiwa amesema si vitanda peke yake ya kwamba anasema kwamba wale ambao wanasidia wamama, wafanyikazi wana matatizo, kuwapatia

moyo ili kazi iweze kuendelea vizuri nafikiri umesikia mchango ya waheshimiwa wale wengine kutola hapo tutaendelea zaidi, asante sana mwenyekiti ama unasemaje?

Chairperson of Medical Services Health and Sanitation Labour, Social Welfare, Justice and Legal Affairs, (Hon. Leitoro Jeremiah): Asante sana Bw. Spika, mimi ningependa kushukuru mheshimiwa mwenzangu, Sera Lekirenyi umesikia waheshimiwa wetu nominated ambao pia ni kina mama wameongea pia kwa upole na pia wameongea kwa uchungu, uchungu wa mwana au juaye ni mama, wamama ndio wanaoelewa, kujifungua na kukaa katika kitanda kimoja (ucheshi) na pia ningependa fursa hii sisi kama County Assembly ya Samburu tutakuwa na siku yetu ambayo itakuwa kuongea na kufanya shughuli zetu ya bunge kutumia lugha ya Kiswahili kwa sababu unaona kidogo Bw. Spika tunapotea kila wakati ikifika tu ni kuulizwa maswali na kujibu kwa Kimombo unakuta tunapotea zaidi lugha yetu wakati nyingine ijapokuwa lugha zote ni za kitaifa kiingereza na kiswahili.

Ningependelea kuwa siku moja tuwe na siku moja imetengwa kuongea lugha yetu ya Kiswahili (ucheshi) kwa sababu jana nilishangaa nilikuwa kamati ya PIAC kumbe kuna Waheshimiwa huwa wanasema waelewi kiingereza, jana kuna mmoja wetu walipeperusha kiingereza ingine (ucheshi) sio haelewi kiingereza kabisa kwa sababu Mheshimiwa Sarah ni mwalimu na mimi namwelewa vizuri sana (ucheshi) najua anaelewa kiingereza lakini ni vizuri wakati mwingine kujibu maswali kutumia lugha yetu ya Kitaifa nani lugha nambari moja tunatumia lugha ya wazungu na wakati mwingine inakuwa aibu tunakuwa wazuri kwa kupeperusha taarifa zetu kwa kutumia lugha ya kiingereza lakini ikifika wakati wa kutumia Kiswahili tunabagua, tunaanza kutumia lugha nyingine ambazo haifai. Kwa hivyo, ningeshukuru kwa challenge ambayo nimepata leo na kwenda mbele tutazidi kuimarisha kutumia lugha yetu ya Kiswahili, asante Mungu akubariki.

Temporary Speaker, (Hon. Lenamparasio Phelix): Asante mwenyekiti nafikiri yale yote yamejitokeza hapo ni katika Standing Orders yetu tunaweza kusema tunaweza kuweka wakati maswali yanaulizwa ijibiwe katika lugha yote mbili, nafasi ya kujibu kwa Kiswahili au kiingereza na tuwe na nakala katika lugha zote mbili, asante.

Nachola Ward MCA, (Hon. Lorunyei Lawrence): Members, the following Statement are due for response today, the second statement is the Statement No. 040/2024 requested by Hon.

Lenamatiyo Silapia nominated MCA to the chairperson Sectoral Committee Environment Water and Natural Resources regarding the status of implementation of FLLOCA funds, Hon. Chair?

Mr. Speaker I read the response from the Department, reference is made to your request Ref: No. SBU/CA/CK/LLA/VOL1/028 dated 4th Nov, 2024 regarding the below subject matter. Am pleased to forward the attached detailed report in response to the following issues as raised in your letter;

- 1) The Implementation status of the FLoCCA funds for the year 2023-2024.
- 2) Mechanisms in place to monitor, evaluate the effectiveness of FLoCCA funded projects
- 3) That the Department should indicate the amount of every done project and the projects that are yet to be completed

The Finance Locally-Led Climate Change Action (FLoCCA) The program is on course for implementation. Implementation is currently going on for the FY 2023-2024 due to delay disbursement of funds by the National Treasury. Implementation of the status as a locally-led program FLoCCA implementation is made at the grassroots level is the community impacted by forgeries of climate change that proposed projects to be implemented in order to deal their resilience against climate change currently the Department is finalizing on collection of project proposals from ward climate change planning committee (WCCPC). The County Climate Change Unit which is a technical committee comprising mainly of technical officers most of them, County Directors from this Department has selected projects to be implemented this year with last year financial year allocation from the proposals received from the community and will implement start the projects screening process which is mandatory to ascertain that;

- 1) Communities are well aware of and approve the proposed projects
- 2) There is no ownership contains ions of land meant for implementation of the proposed projects
- 3) The projects that must undergo Environmental and Social Impact Assessment before implementation are identify and they are done

4) The cost at which identified project is precisely becoming under the County Marching Fund of kshs 41,500,000 has started since they are already becoming in the Financial year Budget. The projects are as follows

- i) Drilling and quipping Latakweny Kshs. 9 Million
- ii) Borehole drilling and equipping at Lolmoti Kshs. 9 Million
- iii) Dam distilling at Loosuk Ward Kshs. 5 Million
- iv). Rehabilitation and extension of Ntepess Water Project Baawa Kshs. 5 Million
- v) Development of Soil Conservation Structures Wamba Kshs. 8 Million
- vi) Strengthening the County Climate Change Unit 5, 500,000 was allocated.

All the projects under the county projects Climate Change Resilience Investment (CCRI) grants from the National Treasury Kshs. 105, 632,523 are planned to start on November and end in December currently the Climate Change Unit is Planning on screening on all projects identified by communities and determine the cost of each project before procurement commences. Partners such as NEMA and National Government Department of Safety and Health (DoSH) will be involved in the screening process and projects implementation to ensure social and environmental integrity of each project from inception to implementation. Funds will be allocated to each individual project based on determined costs each ward will benefit from the FLoCCA program each FY to ensure equity.

Second Question which was asked Mechanisms in place to monitor, evaluate the effectiveness of FLoCCA funded projects- The Department has a grievance the vocal person to receive an Act on community input concerns and complains. Ensure that the Department is well aware of any issue arising to the county on the program promptly to address them. Every ward Climate Change Planning Committee has a grievance reference subcommittee whose role is to take into consideration the views and the concerns of the beneficiaries before, on during or after the implementation of the projects.

This mechanism ensures that issues are dealt with promptly at the grassroots level each ward Climate Change Project Planning Committee has contact of the Department reference vocal person for smooth communication. The County Climate Change Unit monitors the implementation of the projects at every stage and makes reports as evident of periodic monitoring and evaluation.

Chairperson, (Hon. Lemartile Francis): At the tail head of the implementation of the projects of the year the FLoCCA project implementation unit which is the technical group of the national level and the representatives of every donors will visit every project site to carry out a public satisfaction survey. This survey is meant to get the views of the beneficiaries of their projects on their awareness and involvement in the entire spectrum of projects formulation, implementations and management.

The County climate change unit in conjunctions with respective ward climate change planning committee will continue monitoring the projects after the implementations to projects on their long term sustainability and advice accordingly for remedial actions where there maybe need. Thank you Hon. Speaker. That is the response from the department and I just want inform this House maybe as we aware the FLoCCA funding is among the conditional grants which the donor funds haws a very clear criteria of formulating and monitoring of those projects. The projects are on the formulations due to funding not released in time. Thank you Hon. Speaker.

Yes Hon. Silapia.

Specially Elected MCA, (Hon. Lenamatiyo Silapia): Thank you Hon. Speaker, let me thank you for giving me this opportunity to shed light for the response about the questions I sorted on the FLoCCA funds. I will also want to thank the Hon. Chair, who really tried to follow up from the department on the same and I am not really on support of this respond but I will comply with it just because it shows that the department have not yet started to implement the 105 million. Also apart from the 41million for the marching funds, the decided has decided to tell this house, and basing on the implementations status.

Allow me to read just one paragraph of it that as a locally led program on FLoCCA

Implementations is led of grassroots level, it is the communities impacted by the climate change that proposed projects to be implemented in order to build resilience against climate change. Currently the department is finalizing on collection of projects proposal for fifteen Wards on climate change planning committees. This shows that they are not yet prepared to implement the 105 million. The Country climate change unit which is a technical committee, comprising of mainly technical officers most of them are County directors from key departments has selected projects.

They are also confusing this House because they are telling us that they are finalizing to collect the proposal across the fifteen Ward with the last financial year allocations and why the department is not listing those selected projects based on implementations?

They are telling us here that the communities are well aware of the approved projects. I understand that the community is aware and they have already accepted the proposals and there is no ownership contestation on the land means for the implementations of the proposed projects. How can you identify the project when you not yet put the allocations?

How long will it take for the department to carry social impact assessment before the implementations of the identified projects? I am saying I am not satisfied and I am also seeing the department are saying they are going to implement these projects, within November and December, so let me allow the department to take those two months, God willing I will go to my records and I will bring my statement again. Thank you but I am not satisfied. Thank you.

Temporary Speaker, (Hon. Lorunyei Lowrence): Hon. Members as you have heard from the Hon. Member that the response here is contradicting because if you here that the County climate change unit which is a technical committee comprising mainly of technical officers most of them are County directors from key departments are selected projects to be implemented this year with last financial years allocations from the proposals received from the communities ad immediately starts the implementations screening process which is a mandatory to ascertain that. They are also saying that the communities are aware of the proposed projects. The Chairperson can you clarify how you understood the response? Thank you.

Chairperson, (Hon. Lemartile Francis): I think Hon. Speaker you supposed to give us directions. I think what I read is from the department. I have not given on what I know but it was

purely response from the department and how I understand on what they are saying, to this conditional grants, there were those units that they need to form for them to be able to receive those funding's the conditions the world bank or the donor has given out so on what the department say, the climate change unit is planning and doing screening for all the projects identified by the communities.

So we have a Ward climate change planning committee which are the one to identify the projects and then forward to the County Climate Change Unit for technical and evaluations so that they can allocate funds per projects. So they are still on the process of identifying projects. That was what I have to explain and I hope they will conclude on the month of December as stated by the response from the department. Thank you.

Temporary Speaker, (Hon. Lorunyei Lawrence): Chair, you know there is this technical unit, every ward units and it is bit confusing so may I give Hon. Silapia to dig more into the response.

Specially Elected MCA, (Hon. Lenamatiyo Silapia): Thank you Hon. Speaker, I do not want to dig more on this statement because it is unsatisfactory and I just want to remind you that when we are approaching the end of financial year 2023/2024, I do remember very well we have considered and passed a supplementary of 105 million for the implementations of these projects but what I am asking myself and also these House, how long will department take to implement these projects but because they are saying by November and December they will complete, let me preserve my statement and God willing I will ask. Thank you.

Temporary Speaker, (Hon. Lorunyei Lawrence): Hon. Chair, respond is not very clear, we want projects listed per respective Wards and the cost, then since you said it will be completed in December, it is good to be clear while we are waiting for the completion in December, so may I give this direction because we are not all satisfied to this statement, so can you refer again for them to come clear to list the projects in every ward and the costs and when it has started and it will be completed so I can direct that one Hon. Chair, maybe I give you the last right of reply.

Chairperson, (Hon. Lemartile Francis): Hon. Speaker, I think we go by the directions you have given us. As a chair this is the second time, so as a committee what we want to beg to Hon. Member saying that still she not satisfied but she will drop the question. That should not be the correct way and as a committee we will invite the department to come and put this information

clear to the Hon. Member so that everybody get the information on how it is, they will tell us which way will be followed, so I will lies with the Hon. Member so that the committee will invite the department which also invite her. Thank you.

Temporary Speaker, (Hon. Laurence Lorunyei): We want things to be straight Hon. Chair as the Member is not satisfied so I direct that you go back and ask the department to give us the right responses come clear to list the projects in every ward and the costs and when it has started and when will be completed.

Chairperson, (Hon. Lemartile Francis): Speaker, we need to put things right. I have requested the Hon. Member and the Hon. House that we will invite the department considering that this is the second time with same statement, let us invite as whole House and as a committee to come here in the House. I think we go by that because telling to right back; they will still give back unsatisfactory information. So let us invite.

Temporary Speaker, (Hon. Laurence Lorunyei): Thank you Hon. Chair, so directed that the committee to invite the department for more inputs on the statement. Thank you. When do we really expect it?

Chairperson, (Hon. Lemartile Francis): Hon. Speaker maybe we will deliberate when we have the committee meeting on the same on when we will decide as a committee the time and dates and then we will the House know.

Temporary Speaker, (Hon. Lorunyei Lowrence): Next Tuesday, you will bring the report that when you will bring the report after meeting with the committee.

Chairperson, (Hon. Lemartile Francis): As per the law, we meet as a committee when we decided after giving them a notice of not less than seven days. So as a committee we meet on Tuesday then we deliberate the dates we will be inviting them.

Temporary Speaker, (Hon. Lorunyei Lawrence): So to be clear you are going to meet next Tuesday and after that the department will be invited and then can we give at least fourteen days? Maybe after fourteen days as you all know that we are going for recess, so we are giving a maximum of fourteen days to complete so that we can communicate when will the report will be brought to this Hon. House. Thank you.

ADJOURNMENT

Temporary Speaker, (Hon. Lorunyei Lawrence): Hon. Members, the time being fifteen minutes past 4 o'clock and there being no other business, this Assembly stands adjourned until Tuesday 26th November 2024 at 2:30 pm.