



**SPECIAL ISSUE**

*Kenya Gazette Supplement No. 8*

*4th November, 2022*

*(Nandi County Legislative Supplement No. 1)*

LEGAL NOTICE NO. 1

THE NANDI COUNTY FACILITIES IMPROVEMENT FUND ACT, 2022

*(No. 3 of 2022)*

THE NANDI COUNTY HEALTH FACILITIES IMPROVEMENT FUND  
REGULATIONS, 2022

ARRANGEMENT OF REGULATIONS

*Rules*

PART I — PRELIMINARY PROVISIONS

- 1—Citation and commencement.
- 2—Interpretation.

PART II — APPLICATION OF THE FUND

- 3—Application of the Fund resource.
- 4—Vote heads.
- 5—Apportionment of the fund resources.

PART III — FEE COLLECTION AND ACCOUNTING

- 6—Guidelines and Operation manuals.
- 7—Efficiency in collection of fees.
- 8—Reports.
- 9—Billing.
- 10— Health facility accounting procedures.
- 11— Planning cycle.



THE NANDI COUNTY FACILITIES IMPROVEMENT FUND ACT,  
2022

(No. 3 of 2022)

IN EXERCISE of the powers conferred by section 38 (2) of the Nandi County Health Facility Improvement Fund Act, 2022, the County Executive Committee Member for Finance and Economic Planning, makes the following Regulations—

THE NANDI COUNTY HEALTH FACILITIES IMPROVEMENT  
FUND REGULATIONS, 2022

PART I – PRELIMINARY PROVISIONS

1. These Regulations may be cited as the Nandi County Health Facilities Improvement Fund Regulations, 2022, and shall come into force upon publication in the *Kenya Gazette*.

Citation and commencement.

2. In these Regulations, unless the context otherwise requires—

Interpretation.

“Act” means the Nandi County Health Facility Improvement Fund Act, 2022;

“Board” means the Board administering the Nandi County Health Facility Improvement Fund established in section 13 of the Act; and

“Fund” means Nandi County Health Facility Improvement Fund established under section 4 of the Act.

PART II – APPLICATION OF THE FUND

3. There shall be paid from the Fund money—

Application of the Fund resources

- (a) for medical supplies and equipping of health facilities in the county;
- (b) to support capacity building in the management of health facilities;
- (c) operational expenses incurred in the administration of the Fund;
- (d) health education and promotion;
- (e) nutrition and food rations;
- (f) maternal child health/family planning;
- (g) immunization (division of vaccines and immunization);
- (h) environmental health;
- (i) lab services;
- (j) control of communicable diseases;
- (k) community health services;
- (l) curative services;
- (m) health products and technologies;

- (n) mental health services;
- (o) dental health services;
- (p) ophthalmic services;
- (q) ambulance and emergency services;
- (r) health management and information systems;
- (s) community based rehabilitation;
- (t) non-communicable diseases;
- (u) infection prevention; and
- (v) any other health services approved by the Board and recommended to the County Executive Committee Member responsible for fiancé for regulation. Health.

4. The programs and sub programs as enlisted under rule 3 above shall be expended as per the Schedule to these regulations.

Vote heads.

5. (1) All revenue collected from within the department of health shall be deposited in the Fund Account.

Apportionment of the fund resources.

(2) The resources of the Fund shall be shared as follows—

- (a) 70% shall be sent back to the collecting entity;
- (b) 20% shall be used at the county-level targeting primary health care facilities; and
- (c) 10% of the money in the Fund shall be utilized for administration of the Fund, and administrative services of the County Health Management Team and Sub-County Health Management Team level.

(3) The resources allocable under sub-rule (2) (c) above shall be shared out in the following manner—

- (a) two (2) percent to cater for administration of the Fund; and
- (b) eight (8) percent to cater for administrative services of County Health Management Team and Sub-County Health Management Team level.

(4) Any unspent balances in the Fund shall be repaid to the Fund account and a refund statement shall be prepared and sent to Fund Administrator.

(5) There shall be protection of the vulnerable persons as prescribed in the Nandi County Waivers Committee.

#### PART III – FEE COLLECTION AND ACCOUNTING

6. The County Executive Committee Member responsible for Finance shall, in consultation with the County Executive Committee Member responsible for Health, develop guidelines and operation manuals for the following—

Guidelines and Operation manuals.

- (a) The manner of supervision and monitoring of collections as well as approvals of expenditures
- (b) The review of revenue targets and expenditure plans and

collection performance, service improvement and impact on utilization

- (c) Clients/patients representation and prudent use of funds
- (d) Handling consumer complaints
- (e) Operation of bank accounts
- (f) entry of transactions in accounting systems
- (g) Control of official receipt books, payment vouchers, cash book payment registers, vote books and accompanying trial balances.
- (h) Management of user charges
- (i) The charging of inpatient, outpatient treatment fees and laboratory charges

7.(1) Fees must be collected in a way that causes minimum inconvenience to patients and staff, ensures maximum collections and can be easily accounted for.

Efficiency in collection of fees.

(2) There shall be extensive pursuit of revenue collection including National Health Insurance Fund and other health insurance reimbursements for services rendered to patients.

(3) Revenue shall be collected through a cashless system.

8. The following measures shall be adhered to by all health facilities and revenue collecting entities—

Reports.

- (a) Daily and monthly totals shall be entered in the registers
- (b) Daily abstracts of receipts and payments shall be used to tabulate the monthly abstracts and end of financial year reports by the health facilities and entities
- (c) Each revenue generating section shall maintain their financial and non-financial records
- (d) Monthly reports shall be compiled by officer in charge of the facilities and revenue collecting entities by 5<sup>th</sup> of every month, and forwarded to the Fund Administrator for onward transmission to the Chief Officer responsible for matters relating to health.
- (e) The Fund Administrator shall prepare and compile quarterly reports and forward the same to the Board for approval, and onward transmission to the County Treasury.

9.(1) The following provisions apply to inpatient billing at the health facilities—

Billing.

- (a) An inpatient charge sheet summary form must be opened for every patient on admission and maintained in the ward with the patient records.
- (b) All charges shall be recorded in the inpatient charge sheet summary form when services are carried out.
- (c) When the patient is discharged, the ward nurse shall make

Handwritten notes in the top left corner: "Missing", "2019", "2020", "2021", "2022", "2023", "2024", "2025", "2026", "2027", "2028", "2029", "2030".

sure that all charges are reflected from the billing point and shall submit it along with supporting documents to the nursing officer in charge or their lawful designate, for approval.

- (d) If payment is to be made, the patient shall take the inpatient charge sheet summary form to the payment point, and pay the total dues, and the revenue clerk shall issue a receipt for the payment.
- (e) The patient shall then return to the ward and present the receipt or evidence of waiver or exemption to the nurse.
- (f) Details of the payment made shall be entered in the inpatient register.

(2) Without prejudice to the foregoing sub-rule (1), each department or section shall capture the records of services offered and revenue collected from the billing point.

(3) Processes relating to waiver of fees for hospital services shall follow the Ministry of Health Standard Operating Procedures.

10. The following procedures shall be used in accounting for revenues in health facilities—

Health facility accounting procedures.

- (a) Only official receipt books and automated cash registers (where in use) shall be used for collecting money from facilities.
- (b) Each section that provides chargeable services shall record fees earned and services provided.
- (c) The officer in charge of a health facility shall ensure that bank reconciliations are done on a monthly basis.
- (d) A copy of the reconciliation statement, bank statement and bank certificate of balance should reach the Fund Administrator not later than the 5th of the following month.
- (e) Health facilities must maintain a vote book control in which payments and commitments are recorded in line with types of expenditure approvals on authority to incur expenditure with a similar vote book control being maintained with the Fund Administrator.
- (f) All receipts and payment vouchers shall be processed in line with Government accounting procedures and financial regulations.

11.(1) Planning for expenditure of revenue under the Fund shall follow a routine schedule in line with the government budget cycle.

Planning cycle.

(2) The following plans are required to be submitted to the Board before an authority to incur expenditure is issued-

- (a) An annual expenditure plan shall be submitted by 30<sup>th</sup> April of every financial year which sets out the health facility's financial needs over the coming fiscal year taking into account areas where there are general deficiencies in

recurrent budget allocations.

- (b) Quarterly authority to incur expenditure requests that state specific expenditures shall be made on or before the 15th day of the following month of the next quarter.
- (c) The authority to incur expenditure request should follow the priorities shown in the annual work plan based on the allocation by the Board.

(3) The plans and approved authority to incur expenditure must be captured in the minutes of the Board with the details of unspent balances and list of requested expenditure, costs and justification for the same shall be recorded.

Made on the 3rd November, 2022.

ALFRED K. LAGAT,

*County Executive Committee Member for Finance and Economic Planning.*