

**COUNTY GOVERNMENT OF BUNGOMA**

**COUNTY ASSEMBLY OF BUNGOMA**

**COUNTY ASSEMBLY DEBATES**

**THE DAILY HANSARD**

**WEDNESDAY, 4<sup>TH</sup> DECEMBER, 2024**

**Morning Sitting**

**3<sup>rd</sup> County Assembly**

**3<sup>rd</sup> Session**

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# COUNTY ASSEMBLY OF BUNGOMA

## THE DAILY HANSARD

**WEDNESDAY, 4<sup>TH</sup> DECEMBER, 2024**

The House met at the County Assembly Chamber at 9:30 a.m.

(Mr. Deputy Speaker [Hon. Stephen Wamalwa] in the Chair)

### PRAYER

### COMMUNICATION FROM THE CHAIR

Hon. Members, our Speaker is held up in a Board meeting which is a crucial component of this institution therefore we have him within the precincts but doing other business.

### QUESTIONS AND STATEMENTS

#### QUESTION BY HON. HENTRY NYONGESA ON THE MANAGEMENT OF CESS MONEY

**Mr. Deputy Speaker:** I can see the Chairperson is around but the owner of the statement Hon. Hentry Nyongesa is not in the House, so if you respond, it will lack the very intent and therefore we set that aside and to the next item.

### MOTIONS

#### REPORT BY SECTORAL COMMITTEE ON HEALTH SERVICES ON COMPLETION OF MATERNAL AND CHILD HEALTH UNITS AT BCRH, BUMULA AND NAITIRI HOSPITALS AND ADMINISTRATION BLOCK AT MT. ELGON KMTC BY KENYA DEVOLUTION SUPPORT PROGRAMME

**Hon. Vitalis Wangila:** Thank you, Mr. Speaker sir. I am on my feet to move a report on the status of construction and completion of maternal and child health units at BCRH, Bumula and Naitiri hospitals and administration block at Mt. Elgon KMTC by Kenya devolution support programme.

#### Executive Summary

This report covers a site visit to Kenya Development Support Projects (KDSP) in Bungoma County which includes: maternity wings at Bungoma County Referral Hospital (300 beds), Bumula Sub County Hospital (60 beds), and Naitiri Sub County Hospital, (30 beds) as well as a mortuary at Naitiri Sub County Hospital and an administration block at KMTC in Mt. Elgon Sub-County. The Committee also inquired into the status of the 100-bed maternity wing at Sirisia Sub County Hospital, which was not part of the KDSP but of interest to the committee.

The main objective of the site visit was to investigate and inquire into the utilization of the Kenya Devolution Support Programme funds appropriated by the County Assembly and to ascertain the reasons for non-operationalization of the projects.

The report contains findings and observations made by the committee during the site visit. Further, the report documents recommendations made by the committee to the County Government of Bungoma derived from its main findings from the site visit.

## **Committee Membership**

The Committee on Health Services comprises the following Members:

1. Hon. George	Makari	-Chairperson
2. Hon. Jerusa	Aleu	-Vice Chairperson
3. Hon. Jack	Wambulwa	-Member
4. Hon. Anthony	Luseneka	-Member
5. Hon. Miliah	Masungo	-Member
6. Hon. Tony	Barasa	-Member
7. Hon. Orize	Kundu	-Member
8. Hon. Grace	Sundukwa	-Member
9. Hon. Vitalis	Wangila	-Member
10. Hon. Mourine	Wafula	-Member
11. Hon. Meshack	Simiyu	-Member
12. Hon. Joan	Kirong	-Member
13. Hon. Dorcas	Ndasaba	-Member
14. Hon. Jacob	Psero	-Member
15. Hon. Job	Mukoyandali	-Member

## **ESTABLISHMENT OF THE COMMITTEE**

The Committee on Health Services is constituted under Standing Order 217 (1) of the County Assembly of Bungoma Standing Orders and its mandate is pursuant to Standing Order 217(5) shall be to -

### **Objectives of the exercise**

The committee sought to:

- i. Investigate and inquire into the utilization of the KDSP funds as appropriated by the County Assembly
- ii. Ascertain the reason for non-operationalization of the projects

## **ACKNOWLEDGEMENT**

The Committee is grateful to the offices of the Speaker and the Clerk of the County Assembly for the logistical support accorded to it in the discharge of its mandate.

I wish to thank the Honorable Members of the Committee for their commitment during the fact-finding visits and their invaluable input during the report writing exercise. Further, the committee appreciates the secretariat for their dedication towards the compilation of this report.

It is therefore my pleasant duty and privilege, on behalf of the Sectoral Committee on Health Services to table this report on report on status of construction and completion of maternal and child health units at Bungoma County Referral, Bumula and Naitiri hospitals and administration block at Mt. Elgon KMTC by Kenya Devolution Support Programme its recommendations to the Assembly for deliberation and approval.

The report is signed by Hon. George Makari, MCA Musikoma Ward and chairperson of the committee.

### **Background Information**

The Kenya Devolution Support Program is a large-scale World Bank program to support Kenya's broader devolution reform that started following the 2010 constitution. KDSP supports both national and the 47 County Governments to build capacity and establish systems and institutions that have underpinned service delivery.

In Bungoma County, the KDSP projects were initiated during the FY 2019/2020 in two phases; I and II. Appropriation was done in phases from the FY 2019/2020 to FY 2021/2022 as outlined:

FY 2019/2020	Kshs 212,537,789.00(Released and spent at BCRH)
FY 2020/2021	Kshs 212,537,789.00(Not Released)
FY 2021/2022	Kshs 112,815,048 (Released)

Implementation of the KDSP projects was domiciled in the County Secretary's Office.

The World Bank under the Kenya Devolution Support program (KDSP) sponsored the following projects:

#### **Phase I**

Erection and completion of 300 bed capacity maternity wing at BCRH

#### **Phase II**

- a) Erection and completion of 100 bed capacity at Bumula Sub-County Hospital
- b) Erection and completion of maternity wing and Mortuary at Naitiri Sub-county Hospital
- c) Erection and completion of Administration block at Mt. Elgon Kenya medical Training College

Up to date the projects have not been operationalized save for Bumula maternity wing where the Maternal and Child Health Unit is operating at the ground floor. Due to this stalemate, the Committee on Health Services conducted a fact-finding visit to the aforementioned facilities to inquire into the completion status and operationalization of the same.

## **COMMITTEE FINDINGS**

### **Phase I**

#### **Rationale for construction of the maternity wings in the County**

The County faced several challenges that this KDSP project aimed to address. As a result, maternal and child care was selected as the exclusive initiative to be executed in the first phase as captured in the project implementation plan to address the following problems:

- i. High expectant mother fatality
- ii. Inadequate space and bed capacity
- iii. High neonatal deaths
- iv. High numbers of Caesarian deliveries arising from delayed delivery

The objective of the project was to solve the above stated problems by:

- i. Expansion of the maternity wing
- ii. Increase in bed capacity of the hospitals

The expected results as captured in the project implementation plan were reduction in infant mortality, reduction in caesarian deliveries and improved medical services.

### **KDSP Project Management**

The KDSP project was to be managed by a project/contract implementation committee by establishing three levels of project governance in Bungoma County as shown below:

- a. County Management Committee (Apex), Chaired by H.E the Governor.

Ministerial/Departmental Project Management Committee chaired by CECM and

- b. Project/Contract Implementation Committee chaired by the Project Manager that has the following membership.

- i. Chief Officer Health and Sanitation (Owner)
- ii. Chief Officer Roads and Public works (Technical)
- iii. Facility Medical Superintendent (Main User)
- iv. Procurement officer (Contract Management)

- v. Stakeholders (Representative from The Religious Groups, Area Chief and Community Health Volunteer)
- vi. Public Works/Public Health officer
- vii. Other to be brought on Board as and when required. This will include external and independent Quality Assurance experts.

### **Erection and completion of 300 bed capacity maternity wing Bungoma County Referral Hospital (BCRH)**

The contract was awarded to M/S INTERLECT Contractors Ltd at a contract sum of KES. 239,665,436.60 On 7<sup>th</sup> June 2019 between the County Government of Bungoma and M/S INTERLECT Contractors Limited. The intended completion date was 104 weeks from the date of possession.

#### **Funding**

Funding was sourced from two main channels: 212.5 million Shillings from the KDSP grant, and 27 million Shillings from the department as outlined in the project implementation plan. The KDSP funds were disbursed during the 2019/2020 fiscal year. A second phase of the project was included in the investment plan. This subsequent stage focused on equipping and was budgeted at Kshs. 100 million.

#### **Variations**

During the course of the project, the contractor for 300 bed maternity for BCRH submitted three requests for contract variations. These modifications were approved for various reasons, which are detailed as follows:

On 14<sup>th</sup> Dec 2021 a period variation of 18 months which was to be effective from 1<sup>st</sup> February, 2022 due to poor weather conditions, delayed payments and covid-19 protocols in year 2020& 2021.

On April 15, 2022, a variation in works and costs amounting to KES.59 million was approved. This adjustment was necessitated by a change in the project site and the addition of several essential components, including: Drainage and sewerage systems, Water supply, installation of a bed lift, modification of structural design from concrete to pot floor, provision for gas flow, acoustic ceiling installation, a generator house, Three-phase power supply setup. These changes increased the total contract sum to KES. 299,370,039.20.

Addressing why these critical elements were omitted from the initial Bill of Quantities (BQ), the director of public works explained that the original plan/site was to utilize the existing infrastructure at the old BCRH site. This included water supply, power supply, drainage, generators, gas flow, and three-phase power supply. However, the decision to relocate the project to the KMTC grounds necessitated the creation of entirely new installations, accounting for the significant variations.

A contract extension was requested and granted on June 15, 2023. This variation extended the project timeline by six months, pushing the completion date to December 2024. The primary reason for this extension was delays in payment.

## Payments

The financial summary for the project is as highlighted:

Contract Sum:	Kshs 239,665,436.60
Variation Amount:	Kshs.59, 704,602.60
Revised Contract Sum:	Kshs 299,370,039.20
Amount Paid	Kshs. 280,447,357.80
<b>Outstanding balance</b>	<b>KES. 18,922,681</b>

The table provides a breakdown of the KES. 280,447,357.80 paid

	Operating Unit	Financial Year	Amount paid
1	Health and Sanitation(NHIF)	2018/2019	25,045,531.00
2	Public Administration(KDSP)	2020/2021	54,443,857.60
3	Public Administration(KDSP)	2020/2021	41,489,558.70
4	Public Administration(KDSP)	2020/2021	38,149,813.20
5	Public Administration(KDSP)	2021/2022	30,478,675.20
6	Public Administration( KDSP)	2021/2022	13,420,126.40
7	Public Administration(KDSP)	2021/2021	32,882,186.70
8	Health(Exchequer)	2022/2023	21,927,277.60
9	Health (Exchequer)	2023/2024	22,610,331.40
			280,447,357.80

## Projects Status

The following is the project status overview as reported by the Department

Completed Works:

1. Generator power house construction

2. Structural design alteration from concrete to hollow pot flooring
3. 90% completion of passenger and hospital bed lift installation
4. External painting finalized
5. 80% progress on mechanical works, with adjustments needed for door functionality
6. 90% completion of electrical works
7. Ramp and staircase construction finished
8. Full completion of both slab and pitched roofing
9. Terrazzo flooring installed
10. Internal painting completed
11. Window installation finished
12. Door installation completed, with minor adjustments required for some units
13. Glazing work finalized
14. Acoustic ceiling installed on designated floors
15. Entry paving completed

**Pending Tasks:**

- 1) Drainage and sewerage systems
- 2) Water supply infrastructure
- 3) External components installation for passenger and hospital bed lifts
- 4) Three-phase power supply setup
- 5) External works including road access, car park sheds and markings, kerbs, and channels
- 6) Alarm system installation
- 7) Lightning protection system implementation
- 8) Underground tank construction
- 9) Firefighting system installation
- 10) CCTV camera procurement and installation

**General Observations by the Committee**

The committee noted as follows during the site visit:

1. The project was in the final stages of completion;
2. Electrical works had been done, however, the Three-Phase transformer was yet to be installed;
3. Drainage works for delivery rooms was not done;
4. Wall tiles for delivery rooms was not done;
5. Major works had not been done in exterior of the building;

6. External works including cabros had not been placed;
7. Incinerator installation had not been done; and
8. The building doors were notably weak.

Overall, the project remains incomplete with pending works especially in regard to drainage and sewerage systems, water supply infrastructure, three-phase power supply installation, External works including road access, car park sheds and markings and channels and installation of security aspects. The balance of KES 18,922,681 if availed should be utilized to finish the incomplete works.

## **Phase II**

Phase II of the project encompassed maternal and child block at Bumula Sub-County Hospital, construction of maternity wing and mortuary at Naitiri Sub County Hospital and an Administration block at Mt. Elgon Kenya Medical Training.

The work plan as submitted by the department is as follows:

<b>NO.</b>	<b>FACILITY</b>	<b>PROJECT</b>	<b>Budget</b>	<b>Contract Sum</b>
1	Bumula Sub-County Hospital	Construction of 100 Bed Capacity Maternity Wing	65,000,0000	63,317,961.59
2	Naitiri Sub-County Hospital	Construction of 30 Bed Capacity Maternity Wing and Mortuary	27,315,048	26,851,385.00
3	Mt. Elgon Sub- County	Administration/Tuition Block at KMTC Phase 1	20,000,000	19,258,876.80
<b>Totals</b>			<b>112, 815,048</b>	<b>109,428,223.39</b>

### **Erection and Completion of Maternity Wing at Bumula Sub County Hospital**

The contract for erection and completion of maternity wing at Bumula Sub County Hospital was awarded to Getrans Solutions Limited in April 2022 at a contract sum of Kshs. 63,317,961.59 and contract period of 40 weeks.

### **Project Status**

The project implementation status as submitted by the Department was as follows:

Preliminaries: Hoarding on site done, site office and material store done and Signboard not yet done

Sub-structure works :Setting out ,excavation of footing trenches, excavation of bases, casting of trip foundations, foundation walling, foundation columns, hard core compaction, murram blinding, DPM laying and Anti-termite treatment had been done

### **Ground floor**

- Casting of floor RC slab completed
- Casting of columns to ring beam done
- Ramp done
- Main stair case done
- Masonry Walling to ring beam done
- Starter bars for fire escape stair and entry stair done
- Steel fixing of the ring beams done

### **First floor**

- Formwork for the suspended floor slab done
- Steel fixing for the suspended floor slab done
- Walling done
- RC ring beam done
- Roofing done
- T&G eave ceiling done
- Fascia board fitted
- Horizontal keys on external wall facades done
- Timber joists for internal ceiling done
- Piping for electrical works done

### **Finishes**

- Internal wall plaster done
- Plaster works on columns and beams done
- Fitting of steel casement windows done
- Doors done
- Railing on stair cases, ramps and balconies done
- Floor screeding done
- Internal ceiling board done
- Gutters and downpipes done
- Plumbing fittings done
- Ceramic floor tiles in wards done
- Window sills and casing out done
- Glazing done
- Electrical piping and wiring done and sockets fitted

## **Committee Findings on Bumula Sub County Hospital Maternity Wing project**

As at the time of the site visit, the committee noted as follows:

1. The building roof was not uniformly done as indicated by one side of the roof that was fading;
2. There were no drainage works connecting the ward to the septic tank;
3. The new born unit was not done as per the standards and additionally there was no changing room;
4. The theatre not done as per the standards as there was no changing room and the washing room was not well designated;
5. There were notable cracks on the wall from the theatre extending to the post-natal ward, an indication of poor workmanship;
6. There was notable evidence of roof leakages within the building,
7. Electrical works had been done at the maternity ward. The committee was informed that the electrical works were cost shared with the hospital doing one side and the contractor another side of the building;
8. Toilets had been constructed and water connection done. However, due to lack of a drainage system the toilets were unusable;
9. Landscaping had not been done, and the parking area had not been paved.

The committee noted that the full contract amount for the erection and construction of the maternity ward had been paid and the contractor had since exited the site; despite incomplete works especially with regard to the draining system.

Overall, the committee noted that equipping and operationalization of the maternity wing remained the major challenge. Save for the new born unit, the rest of the maternity ward remains unequipped.

### **Payments**

	Operating Unit	Financial Year	Invoice mount
1	Public Administration	2021/2022	27,552,137.59
2	Public Administration	2021/2022	9,152,716.77
4	Public Administration	2021/2022	8,747,981.00
5	Public Administration	2022/2023	5,412,563.48
6	Public Administration	2022/2023	6,384,416.12
7	Public Administration	2023/2024	6,039,685.65
8	Public Administration	2023/2024	3,164,175.05

	<b>Total payment</b>	<b>66,453,675.66</b>
	Balance	Nil

The committee was unable to verify whether the incomplete items were originally included in the contract scope, as the Bill of Quantities (BQ) was not made available for review.

The cumulative payments exceeded the approved contract sum by Kshs.3.1 million. This overpayment occurred without any documented request/approval for cost variation or contract amendment.

There is no evidence of a retention fund being set aside to address the documented incomplete works and defects in the project. Such a fund would typically be used to ensure the contractor completes all outstanding tasks and rectifies any identified issues.

There is need for the department to submit the BQ and inspection and acceptance report.

### **Erection and Completion of Maternity Wing and Mortuary at Naitiri Sub-County Hospital**

The project had an approved budget of KES. 27,315,048 with a contract awarded to M/S SESSION BLUE CONTARCTORS LIMITED in April 2022 at a contract sum of Kshs. 26,851,385 for a period of 52 weeks.

The BQ breaks down the contract sum as follows:

**Preliminaries Kshs 2,750,000;** This includes Kshs 800,000 for project management for documentation, Kes.50,000 bid bond and Kes.100,000 for signboard

**Contingency Kshs 1,000,000**

**Maternity Wing Kshs 14, 586,650**

The BQ captures the following breakdown:

- a) Substructure Kshs 3,065,080
- b) Reinforced concrete frame Kshs 502,300
- c) Walling Kshs 762,040
- d) Roofing Kshs 2,129,890
- e) Windows Kshs.907,475
- f) Doors Kshs.600,440
- g) Finishes Kshs 2,915,975
- h) Electricals Kshs 830,150
- i) Water works Kshs 2,040,100.00 ( Include steel tower @ 900K, storage tank 90,000,

**Mortuary Kshs. 8,514,735** detailed as below in the BQs:

- a) Site preparation, excavation and excavation and earth works Kshs.276,950
- b) Substructure Kes.1,915,440
- c) Walling Kshs 629,000
- d) Roofing Kes.1,466,200
- e) Windows Kshs 811,545
- f) Doors Kshs 627,050
- g) Finishes Kshs 2,041,400 (Floor, wall, ceiling)
- h) Electricals Kshs. 747,150
- i) Cold room o

### **Department Submissions**

The department did not submit their project implementation report.

### **Committee findings on the 30-bed capacity maternity wing**

As at the time of the visit, the committee noted as follows:

1. There was notable poor workmanship on the ceiling;
2. The floors were tiled and not done using terrazzo;
3. The sluice room did not have a slab and the floor was also tiled instead of terrazzo;
4. The new born unit sink was leaking;
5. The ramp had not been constructed making it difficult to transfer patients from the maternity wing to the theatre.

### **On the Naitiri mortuary**

1. The project had not been handed over
2. The committee's inspection was hindered as members were unable to gain entry to the building since it was locked.

### **Payments**

The contractor was awarded a contract valued at Kshs. 26,851,385. To date, the contractor has received payments amounting to Kshs. 26,847,641.20. This leaves an outstanding balance of Kshs 3,743 on the original contract sum.

<b>Contractor</b>	<b>Financial Year</b>	<b>Amount</b>
Session Blue Contractors Ltd	2021/2022	11,465,625.60

Session Blue Contractors Ltd	2021/2022	5,145,574.40
Session Blue Contractors Ltd	2021/2022	4,204,402.60
Session Blue Contractors Ltd	2021/2022	4,820,380.00
Session Blue Contractors Ltd	2021/2022	1,211,658.60
<b>TOTAL</b>		<b>26,847,641.20</b>

Given that the contract was handed over in April 2022 with a 1 year contract period, it is unusual and practically implausible for all payments to have been completed by June of the same year against the evident incomplete status of the works.

The Committee is urged to conduct a repeat fact finding on the state of the mortuary and also examine the frequency and justification of the payment certificates issued during this short timeframe noting the incomplete works in the maternity wing.

The committee also needs to check on the status of payment of the retention funds.

#### **Erection and Completion of Administration/Tuition Block at KMTC In Mt.Elon Sub-County.**

The project had an approved budget of Kshs. 20,000,000 with a contract awarded to M/S SKY PORT LOGISTICS LIMITED in May 2022 at a contract sum of Kshs. 19,258,876.80 for a period of 20 weeks. The BQ breaks down the contract sum vis a vis works to do as follows:

- a) Preliminaries Kshs 1,300,000 which include project management Kshs. 700,000 and insurance Kshs. 100,000,
- b) Ground floor Kshs. 10,150,420 which includes sub-structure, walling, windows, doors finishes and BWIC.
- c) Driveway and Parking Kshs. 1,192,100
- d) Gate Kshs. 908,530
- e) Sentry Kshs. 1,140,580
- f) Electricals & Water supply Kshs.900,000
- g) Contingencies Kshs. 1,000,000
- h) VAT Kshs 2,656,396.80

#### **Payment**

<b>Contractor</b>	<b>Financial Year</b>	<b>Amount</b>
SKY port logistics	2021/2022	10,027,005.20
SKY port logistics	2021/2022	9,231,491.10
<b>TOTAL</b>		<b>19,258,496.30</b>

The contract agreement was signed on 4<sup>th</sup> May 2022 and the contract period was 20 weeks (5 months), hence the construction works were expected to be completed by October 2022. The second and last payment certificate for the project was raised on 16<sup>th</sup> December 2022 and payments duly done for the following outlined works:

a) Preliminaries	Kshs 1,300,000
b) Builder's work	Kshs 10,150,420
c) Driveway and Parking	Kshs 1,202,950
d) Gate	Kshs 908,530
e) Sentry	Kshs 1,140,580
f) Electrical works	Kshs 600,000
g) Mechanical works	Kshs 300,000
h) Contingency	Kshs 1,000,000
<b>Totals</b>	Kshs 16,602,152

#### **Less deduction**

i) VAT (16%)	Kshs 2,656,344
<b>Total</b>	Kshs 19,258,496

This amount was paid less retention of Kshs.1, 925,849 and withholding tax and VAT amounting to Kshs. 892,970, thus the total amount paid was KES. 16,439,676.50

The department should provide a status report on implementation of this project.

#### **Sirisia Sub County Hospital**

The proposed erection and completion of maternal and child ward block for Sirisia Sub County was awarded to M'BIG LTD, P.O BOX 732-50200,BUNGOMA in June 2019 at a contract sum of Kshs. 80,854,204 and a contract period of 78 weeks( 2years)

#### **VARIATION**

In July 2020, the contractor submitted their first variation request, seeking an extension of time. This adjustment became necessary due to an unexpected change in the construction site, which occurred after significant preparatory work had already been completed at the original location. The initial site had already undergone clearance, and temporary structures including

a store and offices had been established. The relocation to the new site presented additional challenges, as it contained an existing incinerator that required demolition and several large trees that needed removal. Furthermore, the contractor had to reconstruct the site offices and storage facilities. Covid- 19 protocols also affected the implementation of the project. A 10 months extension was granted on the contract period.

The variation in January 2021 was on the contract sum varied by Kshs 20,093,682 varied to Kshs 100,947,886. The reasons for contract sum variation were adverse ground conditions characterized by swampy clay soil with underground running water. This forced a change in substructure designs including provision of suspended ground floor slab. Perforated pipes to drain water were introduced.

### **Status Report (by the Department)**

<b>S/NO</b>	<b>ITEM</b>	<b>REMARKS</b>
1.	Interior wall plastering	At 70%
2.	Roof facia board	Done
3.	Window casements	Done
4.	Exterior wall keying	Done
5.	Reinforced concretes	Done
6.	Walling	Done
7.	Reinforced concrete beams	Done
8.	Suspended reinforced concrete floor	Done
9.	2No. Staircases	Done
10.	Piping of plumbing works	70%
11.	Fitting of internal timber door frames	Done
12.	Ramp	Done
13.	Railing on the ramp	Done
14.	Fixing of steel casements done awaiting glazing	Done
15.	Spatial revisions at theatre area ,washroom.	Done
16.	Outdoor connection, walkway ongoing	Done

### **Committee's Observations (Site Visit)**

As at the time of the site visit, the committee noted as follows:

1. Construction works in the building had stalled from November 2023;
2. The project did not have budgetary allocations in this financial year (2024/2025);

3. Projects done centrally
4. The contract period had expired but was renewed;
5. The BQ did not contain aspects of the sewerage system;
6. Consider waste management in the budget
7. Theatre services were operational in the facility but the there was notable inadequate space.

The committee took note of the need to make budget provisions for the facility's waste management.

The payment schedule is as follows:

	Operating Unit	Financial Year	Invoice mount
<b>Revised Contract sum</b>			100,947,886
1	Payment 1	2019/2020	24,678,257.60
2	Payment 2	2020/2021	8,463,520.00
3	Payment 3	2020/2021	25,930,968.45
4	Payment 4	2022/2023	10,164,674.00
5	Payment 5	2023/2024	10,089,239.20
	<b>Total</b>		<b>79,326,659.25</b>
	<b>Balance</b>		21,621,226.75

## COMMITTEE OBSERVATIONS AND RECOMMENDATIONS

### Committee Observations

The committee made the following observations:

1. With the exception of the Maternity Wing at BCRH, erection and completion of the other KDSP projects were fully paid, however the sites were yet to be handed over to the County Government;
2. Information on payment of retention monies for the project was not submitted to the committee for scrutiny. In the absence of this information, it was not possible to ascertain whether the projects were fully closed or were still in the liability period.
3. As at the time of the visit, the Maternal Wing at BCRH had a pending balance of Kshs 18,922,681 which had not been paid.

4. All the KDSP projects have not achieved their intended objectives due to lack of equipment for their operationalization;
5. There were pending works in all the KDSP projects despite full payments being done (with exception of BCRH). Works were especially pending with regard to drainage and sewerage works, water supply and external works.
6. There was notable over-expenditure of Kshs 3.1M for the erection and construction of the 100-bed maternity wing at Bumula Sub-County Hospital. The overpayment occurred without any documented request/approval for cost variation or contract amendment.
7. Supervision of the projects was done centrally by the headquarters
8. The design of all the projects as per the bill of quantities save for administration block at Mt. Elgon sub-county did not meet the standards of the user department.

## **Committee Recommendations**

The committee recommends that:

1. **That** the Department of Health and Sanitation in liaison with the Office of the County Secretary should ensure that all the pending works are completed before payment of the retention monies and handing over of the sites. A status report should be submitted to the County Assembly within 14 days of adoption of this report
2. **That** the County Assembly should appropriate Kshs. 18,922,681 balance for the BCRH Maternity wing to ensure completion of the pending works and handing over of the site;
3. **That** to ensure that the KDSP projects achieve the intended objectives, the Department of Health and Sanitation should plan, budget and seek the County Assembly approval for equipping and operationalization of all the KDSP projects in the FY 2025/2026 ;
4. **That** henceforth, the Department of Health and Sanitation must ensure that all projects are implemented within the stipulated timelines and within the approved budget provisions. Any requests for variations must be justifiable within the acceptable limits and must be submitted to the County Assembly for approval.

5. **That** projects in the department of Health should be supervised in conjunction with hospital management in order to address any complaints in good time
6. **That** the public works department should prepare design for projects in consultation with the user department in order to avoid any defects during project implementation

Mr. Speaker Sir, that's the report from the Committee of Health and with me we have the adoption schedule of the report.

We the undersigned member of the sector committee on health affix our signatory adopting this report with the recommendation therein is a list of members signed.

Mr. Speaker with your permission, allow me to call upon Hon. Job Mukoyandali to support the motion.

*(Applause)*

**Mr. Deputy Speaker:** Thank you, Hon. Vitalis. Now it's the honour of Hon. Job Mukoyandali Lumbwani to second.

**Hon. Job Mukoyandali:** Thank you, Hon. Speaker. I am only worried that whoever the mover of the motion was calling to second decided to throw the ball across but let me first laud the mover of the motion. That is the true picture of how our KDSP projects are. We went round and that report gives the true reflection of actually what is on the ground.

The recommendations of the report are very clear and self-explanatory. That in future when we come up with such projects, let proper consultation be done. We cannot be having a whole storey building minus the drainage system. You wonder whoever designed those projects what was behind his brains.

Most of those projects like the report has put it are now just like monuments and yet they are very good projects which initially had a very good intention for helping the health sector in this county, but currently you go to visit those sites., most of those projects or 100% of those projects are just monuments sitting there minus nothing happening. Maybe inside them you can only get cockroaches and rats.

The report has given a very good recommendation for consideration of this House that we need to actually raise about 18 million in our budget, so that it can help in operationalization of this project. Having those good projects in our facilities and they are doing nothing is a big shame. For instance we have a very good building without the cold chambers inside. If this House thinks like the way I am thinking, then in this coming budget, let us think so hard so that we can provide such money within our budget, so that we can make sure that by the end of the year these projects are operationalized.

The County Secretary should get the facts of what should be done. Let him engage just like the report has given. Let him engage the donors of these projects, so that they also get to understand what we are lacking now that these projects are squarely in his hands. Let him understand the need of our people. Let him understand the importance of operationalizing these projects. Once that is done we will move this county to the next level. We will begin thinking of different projects apart from what we have that has stalled. I second the report.

*(Applause)*

**Mr. Deputy Speaker:** Thank you, Hon. Job Lumbwani Mukoyandali.

*(Question proposed)*

On the line we have the Hon. Zakayo,

**Hon. Jack Kawa:** Thank you, Hon. Speaker for giving me this opportunity, so that I can also put my voice over the same. First, allow me to applaud the mover of the report and the seconder of the report. Also allow me laud the Committee of Health headed by my good friend Hon. George Makari. From where I sit, the Health Committee has done a lot but because we are leaders and we represent our people down there, we always talk or speak on their behalf and you have seen the body language of the Chair. He is my good friend; he has not seconded the report because we have reached a place, especially us who is in the government. We are not doing well and we must just say it boldly. As much as we want to point fingers at the donors, who are the beneficiaries of the said projects?

So I want to point a finger at the executive not the donor because we have gotten the donor. The donor has sacrificed, sympathized with us, gave us the money. Now as people who are going to benefit or to use the said project, we must be on forefront to advice because it is not only the said projects funded by donors Even our own projects. As Hon. Members, we can allocate monies because how can you start building a house without toilets or without latrines? Surely;

So I want to go with that report and put the department on toes that let them follow up, communicate with the donors so that the said facilities can be completed and be in use. That is what I can say because in the last regime and I want to request the clerk when an Hon. Member is contributing you give time so that we look at our speaker on his face

*(Applause)*

So that he can also see our face how we react on the report on the floor of the House. Kindly Daktari next time you give us space because it is a sort of respect, you talk while looking at your boss. So Hon. Makari and the team in the last regime, sincerely speaking and I want to be on record they did a lot of work but two years down the line, since we were sworn on this House in 2022, the Health Department has done little to us.

So it is like we want to use two years to destroy the good name of the department or of the said membership of the health sector. Without much I support the report.

*(Applause)*

**Mr. Deputy Speaker:** Thank you, Hon. Jack Kawa Member for Bokoli. We have now the Hon. George Kwame Tendet Member for Elgon.

**Hon. George Tendet:** Thank you, Hon. Speaker Sir for allowing also chipping in on this report. First of all, I would like to laud the mover of the motion Hon. Vitalis and the seconder for doing a wonderful job. I would also like to laud the committee concerned for doing a wonderful report. I want to laud the chairman who is my neighbour here for doing quite well.

Elgon KMTC Administration Block is my ward. This project was meant to assist not only students from Bungoma County but also from other regions in Kenya. It was also going to help stakeholders who work together in that section. This project stalled because the truth is high corruption made the project stalled.

It stalled a long time ago and it is my wish that this report will unlock so that that project can continue. I know the benefits of that project not only going to help my ward; it is going to help Kenya as whole. So I pray that we support the report so that it will at least unlock, let it not be another white elephant just like other projects in our county.

**Mr. Deputy Speaker:** Thank you, Hon. George Tendet. Online we have the Hon. Masai Chemion member for Kaptama.

**Hon. Francis Chemion:** Thank you. I have two issues; one is to thank the mover Hon. Vitalis Wangila and seconder Hon. Job Mukoyandali for ably moving and seconding the report respectively. This committee is doing good work. Hon. Tendet and I had an issue about Elgon KMTC, and I can confidently that they have addressed it. This is a very good report and its recommendations we need to ensure are implemented so that we make most of this projects viable.

The 300 bed capacity hospital, you remember it was officially launched but up to now we have nothing happening in that hospital. We have the same issue with KMTC title from the contract, if you read that report they are saying they were to construct administration block/a tuition block. But what has been done is the administration block and the tuition block is not there. I don't know what needs to be done to ensure that the facilities are functional.

Even in Naitiri on the issue of the mortuary, I was imagining when we have deaths in that region where are the bodies taken to? Are they brought to Webuye or they are taken to Kitale? You can imagine the distance. It should be completed and utilized. In the near future we will also require one in Mt. Elgon so that we don't bring our bodies all the way from Chepkitale around 60 kilometres to Kimilili.

Otherwise, I support the report and I appreciate the committee because did good work.

*(Applause)*

**Hon. Henry Nyongesa:** Thank you, Hon. Speaker. First, I want to laud the committee for a comprehensive report they have brought to this House. This report is long overdue and I want to bring to the attention of the House that the H.E. President Hon. William Ruto commissioned the 300 bed capacity building for Bungoma Referral Hospital and it was to provide services to the expectant mothers, but up to today we have not heard any information on what is going on as pertains the same facility. This applies to other facilities including Bumula that the report has alluded to.

An architect coming up with a design to be used by the members of the public without human components like toilets such a persons should be blacklisted and not allowed to practice in this country. Part of the monies on these projects is from donor funds that are always keen on the utilization of the funds on the intended purposes. If they visit and realize that they donated funds to put a 300 bed capacity and 100 bed capacity for purposes of maternal care and up to now the projects remain un-operational is wanting. We want to look at how the projects were done and I think there is a person that had interest in these projects. How I wish the projects could have been undertaken within our resource envelope. The report has been read and issues have been raised especially on the quality of the works undertaken in particular for Bumula the project is not in use as speak, yet the report has indicated that this project has a leaking roof. This means the contractor was in a hurry may be to be paid or whatsoever reasons.

The ablution block in Bumula Sub-County Hospital was not part of the design works to be undertaken. The report has indicated that there were variations and it doesn't indicate such variations were done at what level. Why do a variation on a project with serious shortcomings especially the ablution block and you don't indicate that you require an extra funding for the same. The mover of the motion should explain why variations were done and why the projects are not operational up to now. Why does the government lack answers for the same and does it mean that funding from that entity has stopped, because after construction it is now almost 4 years and some funds were from external funding. Does it mean that external funding stopped?

As Members have indicated we have respect to the Chairperson of this committee who has done some good work for us. Apart from this project there are many brief case companies in the same docket, other projects have started including CEF projects and the contractors have not completed these projects. It brings about many questions that should we do away with this department or we merge it with other departments like Education, so that we can get services or what is happening? Those are some of the questions we would want the chairperson to respond to.

How I wish that the questions being raised you direct that the concerned officers appear before this House to clarify on the same. I submit.

**Hon. Martin Chemorion:** Thank you, Hon. Speaker. I want to laud the committee through the mover of the motion for an extensive review of what transpired when these constructions

works were being done. They have given us the gaps that exist and the challenges and what remains for the county to do. I had a high powered delegation from British High Commission coming to Cheptais yesterday and they highlighted these projects as the projects they have been funding. We moved around with them and the issues they have highlighted in this report were talked about yesterday. For example drainage they asked about the Environmental Impact Assessment if it was done for the said projects. If it is done definitely issues like drainage and sanitation facilities can be highlighted at that level. These are the gaps that the client ought to undertake.

Issues of design as alluded to my Hon. Hentry; you wonder what kind of designs are these. You have to design a project, do the bill of quantities to come up with a clear cost of the projects. Why do we have these cost overruns and time overruns, getting projects extending beyond that time period given? The extra variations sometimes you question such actions yet other basic facilities like toilets and drainage systems are not provided. Those are issues the executive and those in charge should look into.

One interesting thing also I had an interaction with them, they talk about working with some partners those trying to engage the community. For instance there is an organization called Act Kenya that engages the community to sensitize the importance of these projects so that they can put the executive to task.

An issue of supervision for these projects is wanting in this department. The project manager who is supervising this project has seen that the roof is leaking yet the project has not been completed? Are they compromising the quality of works and quantity of works also? These are issues that those in charge should be put to task to explain and if possible held accountable for such kind of misdeeds. I support the motion.

**Hon. George Makari:** Thank you, Mr. Speaker. I want to contribute as a Member and not as a Chairperson of the Committee. I want to thank the mover of the motion and the seconder of the motion for work well done. Members are concerned and I am equally concerned about these issues. You realize as well enumerated by Hon. Jack Kawa these were donor funds and the said donor from the time he executed the monies given to the county at that time he has not done another project. Can we now ask ourselves questions; why hasn't he been able to channel more money to Bungoma County? It is because the money was misused. The money was domiciled in the County Secretary's Office and it was being used as personal money. Somebody was dishing money anyhow and not properly on the intended purpose.

Another key factor is that why should you do variations on money that is not yours. This is money from a donor but you will find that there are variations worthy Kshs. 59 million or a project and the donor earmarked that Kshs. 212 million will complete the 300 bed capacity project. Along the way variation is done thrice, 59 million, 27 million and 21 million on the same project. You find that you will now not complete the project because of the variations. I

think somebody must be able carry that blame for the projects that are not complete. Most of these projects are not complete.

In Naitiri the mortuary is not complete and bodies of dead people are placed along the corridors waiting for relatives to come and pick and take to other mortuaries. The mortuary is there but incomplete thus not in use.

You go to Mt. Elgon represented by Hon. Tendet the KMTC is not complete. Even in the Bill of Quantities whatever was put there is not in the BQ's. In Bumula where my good Hon. Henry Nyongesa comes from the facility is put without a sewerage line. A beautiful building is there but where will the users of the building even if they use the toilets there is no sewerage connection to the facility yet money was paid and contractor left site.

When you come at our own Referral Hospital they said it was already completed, paid and commissioned but it is not yet complete. Those are the issues and I think somebody must be able to carry this blame from the County Secretary's Office. I support the call for inviting those people to this House to answer the questions.

*(Applause)*

**Hon. Anthony Luseneka:** Thank you, Hon. Speaker. I have a few comments to make. When you look at observation 8 it says the design of the projects as per Bills of Quantities safe for Administration Block at Mt. Elgon Sub-County did not meet standards of the user department; this points at the department of public works. They either don't have the requisite personnel or they are incompetent. Arising from this we have a lot of variations and incomplete works across the county.

I support what Hon. Makari said that someone must be held responsible because you can't be employed, earning a salary undertake certain work instead you do substandard work. Something must be done and this House has the mandate to summon these officers to come and explain because these are donor funds which are sensitive. If you don't use them well you may not get any additional funding.

Looking at various departments and supporting what Hon. Kawa said the government is failing us. Most departments are not working. When you look at Trade Department all lights are off on our markets. I don't know if is lack of payment or we don't have personnel to repair those lights.

Looking at the Department of Agriculture many programmes are not in operation. We have issues in this department like the insurance money disappeared and nothing has been done up to now.

When you look at our roads they are now impassable. I don't know what we are going to do. When you look at the Education department the CECM was here the other day, bursaries delayed and money for scholarship not released. This Assembly appropriates money for those programmes but implementation is a problem.

When you look at the department of Finance we have the issue of pending bills which is affecting our projects in this county. The issues of projects being undertake timely, late advertisement although this year they have tried but we are waiting for contractors to report on our sites. I don't know if they have been given award letters but our expectations were that by the time we begin the Christmas season all contractors should be on site.

Looking at the department of water especially on climate change we were given about Kshs. 300 million donor funds but the works being done by these contractors is shoddy. They come to plan tree seedlings in a forest and after 3 days the trees have tired up. These are donor funds, how are we going to account for this money? The government must wake up otherwise we are going to lose many programmes especially that donor funded because of poor implementation strategies.

As I support this report, I put the government on notice that they must up their game especially our chairpersons of committees; they should make sure that their departments are up and running, otherwise, if the government fails we will also blame the chairperson for failing to oversight properly their departments.

**Mr. Deputy Speaker:** Hon. Members, having listen to you I will now allow the mover of the motion to reply.

**Hon. Vitalis Wangila:** Thank you, Mr. Speaker. First of all, let me appreciate fellow Members for their contributions towards this report. I agree with Hon. Kawa that it is true as a County we are not doing well as far as implementation of projects is concerned. Hon. Chemion your concerns are well captured and recommended in our report and our prayer is that the recommendations should be implemented to achieve value for money. Otherwise, I urge the House to adopt this report with recommendations therein.

**Mr. Deputy Speaker:** Hon. Members, I will now proceed and put a question;

*(Question put and agreed)*

The ayes have it.

Hon. Members, having listened to your contributions and having adopted the report, I want to urge the table Clerks to transmit the report to relevant sections as required. I addition to that, I want to direct that the said Committee on Health to conduct an investigations of the usage of donor funds on the said projects on bring to this House a report so that all the persons involved can be called to answer so that we have tangible recommendations emanating from the committee. This report should be brought to this House the second week after resumption after recess next. I so direct.

Next item,

## BILLS

## 1. THE BUNGOMA COUNTY FINANCE BILL, 2024

**Hon. Francis Chemion:** Thank you, Hon. Speaker. I rise under Standing Order 141 to move that The Bungoma County Finance Bill, 2024 be read for the second time. I call upon Hon. Orize to second the reading.

**Hon. Orize Kundu:** Thank you, Mr. Speaker Sir. I rise to second.

(Applause)

**Mr. Deputy Speaker:** Hon. Members, allow me now propose the question

(Question proposed)

(Question put and agreed to)

The ayes have it. I now call upon the Clerk to read for the second time

*A Bill of the County Assembly of Bungoma to provide for revision of various taxes, fees and charges for the services and other revenue raising measures by the County Government and the Natters incidental thereto. Second Reading*

**Mr. Deputy Speaker:** Hon. Members as per the Standing Order 142 (1) committal of a Bill to the Committee of the Whole House. A Bill having been read a second time shall stand committed to the Committee of the Whole House. Therefore, Hon. Members, we now collapse the House to the Committee of the Whole House. Members arise.

### COMMITTEE OF THE WHOLE HOUSE

(Order of the Committee Read)

[Mr. Deputy Speaker (Hon. Stephen Wamalwa) left the Chair]

IN THE COMMITTEE

[Temporary Chairperson (Hon. Christine Mukhongo) in the Chair]

### THE BUNGOMA COUNTY FINANCE BILL, 2024

**Hon. Christine Mukhongo (Chairperson Committee of the Whole House):** Members welcome to the Committee of the Whole House. I now direct the Table Clerk to read through the clauses as we proceed. The Bill was circulated was circulated on our walls.

#### Clause 3: On All Directions, Resolution, Orders and Authorizations

Question proposed that clause 3 as proposed be part of the Bill

*(Question put and agreed to)*

The ayes have it

#### **Clause 4: Other Applicable Laws**

Question proposed that clause 3 as proposed be part of the Bill

*(Question put and agreed to)*

The ayes have it.

#### **Clause 5: On Schedules**

##### **First Schedule on Finance and Economic Planning**

*Question proposed that the schedule as proposed be part of the Bill.*

Chairperson Committee on Finance and Economic Planning please?

**Hon. Francis Chemion:** Thank you, Madam Chair. I move that First Schedule on Finance and Economic Planning of the amended under Item code 1-0011 on the penalty for scanning, forging and photocopying trade license per instance be increased from Kshs. Kshs. 70,000 to Kshs150, 000. I now call upon Hon. Zddy to second!

**Hon. Godfrey Mukhwana:** Thank you, Madam Chair. I rise to second the amendment.

*(Question proposed)*

*(Question put and agreed to)*

The ayes have it!

Lets proceed!

Second amendment, Chair Finance and Economic Planning, please!

**Hon. Francis Chemion:** Thank you, Hon. Chair. I rise to move that the First Schedule on Finance and Economic Planning of the Bill be amended under item code 11003 on the penalty on cash transaction by officers without issuance amount of official receipt per instance be increased from the 100% of the amount transacted to 200 % of the amount transacted.

I call upon Hon. Jack Kawa to second the amendment.

**Hon. Jack Kawa:** Thank you, Hon. Chair. I rise to second the amendment.

*(Question proposed)*

*(Question put and agreed to)*

The ayes have it!

### **Second Schedule: Agriculture, Livestock, Veterinary and Fisheries**

**Temporary Chairperson:** I now propose the question that the second schedule as proposed be part of the Bill. Chairperson Finance!

**Hon. Francis Chemion:** Thank you Chair. I move that the Second Schedule on Agriculture, Livestock, Fisheries Bill be amended under item code 1/2110 on the planting fertiliser per 50kg per bag be reduced from Kshs 2200 to Kshs 2000.

I now call upon Hon. George Makari to second the amendment.

**Hon. George Makari:** Thank you Chair, I rise to second the amendment.

*(Question proposed)*

*(Question put and agreed to)*

The ayes have it

Second amendment, Chair Finance!

**Hon. Francis Chemion:** Thank you, Hon. Chair. I move that the Second Schedule on Agriculture, Livestock, Veterinary and Fisheries of the Bill be amended under item code 1/2110 on the topdressing fertiliser per 50kg bag be reduced from Ksh.2200 to Ksh.2,000. I now call upon Hon. Mutiembu to second the amendment.

**Hon. Everlyne Mutiembu:** Thank you Chair. I rise to second the amendment.

*(Question proposed)*

*(Question put and agreed to)*

The ayes have it.

Third amendment, Chair Finance!

**Hon. Francis Chemion:** Thank you Chair. I move that Second Schedule on Agriculture, Livestock, Veterinary and Fisheries department of the Bill be amended under item code 1-2120 crop development services on soil testing per sample be reduced from Ksh.1000 to Ksh.500 shillings. I now call upon Hon. Vitalis Wangila to second the amendment.

**Hon. Vitalis Wangila:** Mr. Speaker, I second the amendment Mr. Chair.

**Temporary Chair:** Madam Chair!

**Hon. Vitalis Wangila:** I second the amendment.

*(Question proposed)*

*(Question put and agreed to)*

The ayes have it.

Hon. Members, taking note of the approved amendments, I now put a question that the Second Schedule on Agriculture, Livestock, and Fisheries as amended be part of the Bill.

*(Question put and agreed to)*

The ayes have it!

Third schedule, Environment, Water and Tourism

Temporary Chairperson: I now propose that the Third Schedule as proposed be part of the Bill. Chair Finance!

**Hon. Francis Chemion:** Thank you Chair. I move that Third Schedule on Environment, Water and Tourism of the Bill be amended under item code 1-290 on the illegal dumping of wastes construction material, construction demolition debris per instance be increased from Kshs. 10,000 to Ksh.30,000.

I now call upon the Vice Chair of the committee to second the amendment.

**Hon. Orize Kundu:** Thank you, Madam Chair. I rise to second the amendment.

*(Question proposed)*

*(Question put and agreed to)*

Hon. Members, taking note of the approved amendments, I now put a question that the Third Schedule as amended be part of the Bill.

*(Question put and agreed to)*

The ayes have it.

#### **Fourth Schedule: Health and Sanitation.**

**Temporary Chairperson:** I propose that the Fourth Schedule as proposed be part of the Bill. Chair Finance!

**Hon. Francis Chemion:** Thank you, Hon. Chair, I move that Fourth Schedule on Health and Sanitation of the Bill be amended under item code number 1/3508 on the blockage removal within premises per blockage covered per premise be reduced from Ksh.1,000 to Kshs 0

I now call upon Honourable Kawa to second the amendment.

**Hon. Jack Kawa:** Thank you, Madam Chair. I rise to second the amendment.

*(Question proposed)*

*(Question put and agreed to)*

The ayes have it.

The ayes have it! Next!

### **Fifth Schedule: Lands, Urban and physical planning**

**Temporary Chairperson:** Hon. Members, I now propose the question that the Fifth Schedule as proposed be part of the Bill.

*(Question proposed)*

*(Question put and agreed to)*

The ayes have it!

### **Sixth Schedule: Roads, Transport, Infrastructure and Public Works**

**Temporary Chair:** I now propose a question that the sixth Schedule as proposed be part of the Bill. Chairperson Finance!

**Hon. Francis Chemion:** Thank you, Hon. Chair. I move that the Sixth Schedule on Roads, Transport, Infrastructure and Public works of the Bill be amended by inserting new code 1/6824 penalty for using wrong lane on the penalty for motor vehicles using a wrong lane along dual carriage way per instance with Kshs. 1,000.

I now call upon Hon. Everton Nganga, member of the committee to second the amendment.

**Hon. Everton Nganga:** Thank you, Madam Chair. I rise to second the amendment.

*(Question proposed)*

*(Question put and agreed to)*

The ayes have it!

Next amendment!

**Hon. Francis Chemion:** Hon. Chair, I move that sixth Schedule on Roads, Transport, Infrastructure and Public works of the Bill be amended by inserting new code 1/6824 penalty for using wrong lane on the penalty for motorbikes using wrong lane along dual carriage way per instance with Ksh.500. I now call upon Hon. Zeddy Mukhwana to second!

**Hon. Godfrey Mukhwana:** Thank you, Madam Chair. I rise to second the amendment.

**Temporary Chairperson:** Thank you. Chair Finance, you are a senior of this House and you are giving nicknames!

*(Applause)*

*(Question proposed)*

*(Question put and agreed to)*

The ayes have it.

Hon. Members, taking note of the approved amendment, I now put a question that the Sixth Schedule as amended be part of the Bill.

*(Question proposed)*

*(Question put and agreed to)*

The ayes have it!

Seventh Schedule, Trade, Energy and Industrialisation

Eighth Schedule -Maximum Threshold weights

Ninth schedule, Bungoma and Kimilili municipalities

Tenth Schedule - Gender Culture, Youths and Sports

Hon. Members, I now propose a question that seventh, eighth, ninth and tenth schedule as read be part of the Bill.

*(Question put and agreed to)*

The ayes have it!

Next!

Hon. Members, when we started we had clause 5, First schedule, we did not put a question; we had already made it so we have to go back and put a question.

*(Question put and agreed to)*

Hon. Members, we will go again! Members are sleeping in the House. Kindly be awake because amendments are very important and they are being passed by this House. Stop resting your eyes here. Wake up please! I will come again, yes please!

**Hon. Francis Chemion:** We had done that. What we are supposed to do is the central approval of the two.

**Temporary Chairperson:** That is exactly what I am doing because for others I had done it but I forgot to do the first one.

**Hon. Francis Chemion:** Now do the central one for the both.

**Temporary Chairperson:** Kindly let me do this... exactly what I am doing.

Hon. Members, taking note of the approved amendments, I now put a question that the first schedule as amended be part of the Bill.

*(Question put and agreed to)*

The ayes have it!

### **Clause two: Interpretation**

**Temporary Chairperson:** Hon. Members, I now propose that clauses two as proposed be part of the Bill.

*(Question put and agreed to)*

### **Clause providing for citation of the Bill and commencement**

**Temporary Chairperson:** Hon. Members, I now propose clauses providing the citation of the Bill and commencement as proposed be part of the Bill!

*(Question put and agreed to)*

The ayes have it!

Chairperson Finance!

**Hon. Francis Chemion:** Thank you Chair. Hon. Chair. Pursuant to Standing Order 145(16), I beg to move that the committee reports to the House its consideration of the Bungoma County Finance Bill 2024. I now call upon Hon. Jack Kawa to second the reporting.

**Hon. Jack Kawa:** Thank you, Madam Chair. I am on my feet to second the reporting.

**Temporary Chair:** Thank you, Hon. Members. I now put a question that the Chair of the Committee of the Whole House reports to the House

*(Question put and agreed to)*

The ayes have it!

**Mr. Deputy Speaker:** Thank you, Hon. Members. Allow me now welcome the Chair of the committee of the whole House.

**Temporary Chair:** Thank you, Mr. Speaker for giving me an opportunity to report the work of the whole House as approved.

Under Standing Order 147, I report that the Committee of the Whole House has considered the Bungoma County Finance Bill 2024 as follows:

Clause 3 -Approved without amendments

Clause 4 Approved without amendments

Clause 5-First Schedule Finance and Economic Planning was approved with amendments

Second schedule -Agriculture, Livestock, Veterinary and Fisheries-Approved with amendments

Third schedule - Environment, Water and Tourism -Approved with amendments

Fourth Schedule -Health and Sanitation -Approved with amendments

Fifth schedule- Lands, Urban and Physical Planning- Approved without amendments

Sixth Schedule - Roads, Transport, Infrastructure and Public works-Approved with amendments

Seventh schedule –Trade, Energy and Industrialisation -Approved without amendments

Eight schedule- Maximum Threshold weights-Approved without amendments

Ninth Schedule -Bungoma and Kimilili municipalities-Approved without amendments

Tenth schedule- Gender, Culture, Youths and Sports was approved without amendments

Clause two -Interpretation was approved without amendments.

Clause providing for citation of the Bill and the commencement -Was approved without amendments.

*(Applause)*

**Mr. Deputy Speaker:** Thank you, Hon. Christine Mukhongo. Hon. Members, I now call upon Hon. Chemion to move.

**Hon. Francis Chemion:** Thank you Honourable Speaker. Pursuant to Standing Order 148(1), I beg to move that the House does agree with the committee in the said report and now request Honourable Kawa to second the agreement.

**Mr. Deputy Speaker:** Very well. Hon. Jack Kawa Zakayo, you are privileged to second!

**Hon. Jack Kawa:** Thank you, Hon. Speaker. I rise to second!

**Mr. Deputy Speaker:** Thank you, Hon. Kawa. Hon. Members, under Standing Order 148, I now put the question to the House that this House does agree with the committee in the said report.

*(Question put and agreed to)*

The ayes have it

*(Applause)*

Therefore, the Bill moves to the next stage which will be handled this afternoon that is Third Reading!

#### **ADJOURNMENT**

Hon. Members, there being no other business on the Order Paper and that being the last item, this House Stands adjourned, will resume this afternoon at 2:30.p.m.

*The House rose at 11:55 a.m.*