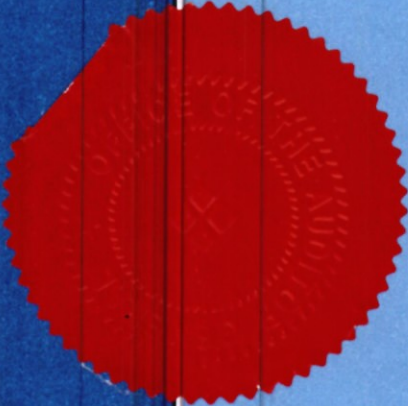


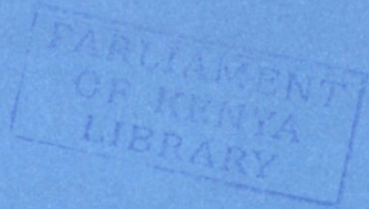
REPUBLIC OF KENYA



Enhancing Accountability



REPORT



THE NATIONAL ASSEMBLY
PAPERS LAID

OF

DATE: 06 MAR 2024

DAY

WED

TABLED
BY:

Hon Owen Baya MP
Deputy Leader of the Majority

THE AUDITOR-GENERAL

PLACED AT
THE TABLE:

Five days

ON

CLINICAL OFFICERS COUNCIL OF KENYA

**FOR THE YEAR ENDED
30 JUNE, 2023**



OFFICE OF THE AUDITOR GENERAL
P. O. Box 30084 - 00100, NAIROBI
REGISTRY

19 FEB 2024

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CLINICAL OFFICERS COUNCIL OF KENYA

ANNUAL REPORT AND FINANCIAL STATEMENTS

FOR THE FINANCIAL YEAR ENDED

30TH JUNE 2023

Prepared in accordance with the Accrual Basis of Accounting Method under the International
Public Sector Accounting Standards (IPSAS)

**Clinical Officers Council of Kenya
Annual Report and Financial Statements
for the year ended June 30, 2023.**

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**Clinical Officers Council of Kenya
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1. Acronyms, Abbreviations and Glossary of Terms

A: Acronyms and Abbreviations

CEO	Chief Executive Officer
DG	Director General
CBK	Central Bank of Kenya
ICPAK	Institute of Certified Public Accountants of Kenya
IPSAS	International Public Sector Accounting Standards
MD	Managing Director
NT	National Treasury
OCOB	Office of the Controller of Budget
OAG	Office of the Auditor General
OSHA	Occupational Safety and Health Act of 2007
PFM	Public Finance Management
PPE	Property Plant & Equipment
PSASB	Public Sector Accounting Standards Board
SAGAs	Semi-Autonomous Government Agencies
SC	State Corporations
WB	World Bank
COC	Clinical Officers Council

B: Glossary of Terms

Fiduciary Management- Members of Management directly entrusted with the responsibility of financial resources of the organisation

Comparative Year- Means the prior period.

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2. Key Entity Information and Management

(a) Background information

The Clinical Officers Council of Kenya is a body corporate established under an Act of Parliament, Act No. 20 of 2017 Laws of Kenya. In accordance with this Act, the Clinical Officers Council of Kenya's mandate is to regulate the training, registration, licensing and practice of all Clinical officers. Clinical Officers Council of Kenya ensures that the Clinical Officers are trained to address Kenyans' health needs and deliver high-quality health services. While the training of Clinical Officers started in 1928 with hospital-based certificate programs, today Clinical officers are trained at Diploma and Degree levels in over 71 (seventy-one) institutions across Kenya. To date the Clinical Officers Council of Kenya has registered over 28,000 Clinical Officers with staff establishment of (12)

(b) Principal Activities

The core functions of the office of the Clinical Officers Council of Kenya include Training, Registration and Licensing of Clinical Officers in Kenya.

Vision

Competent and responsive Clinical Officers

Mission

To ensure standardized training, registration and licensing of Clinical Officers for quality healthcare service delivery.

Mandate

The core mandate of Clinical Officers Council of Kenya is to regulate the training, registration, licensing and practice of clinical Officers as per Clinical Officers Council (Training, Registration & Licensing) Act, No. 20 of 2017.

Core Values

The Clinical Officers Council of Kenya and its staff are committed to providing a high quality services.

In our dealings the Clinical Officers Council of Kenya commits to be guided by the following values deeply rooted in the DNA of the council:

- Integrity
- Customer-focused
- Accountability
- Respect
- Ethical

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(c) Key Management

The Council's day-to-day management is under the following key organs:

- Council Board
- Registrar/Chief Executive Officer
- Deputy Registrar –Training and Examinations
- Senior Management Team

(d) Fiduciary Management

The key management personnel who held office during the financial year ended 30th June 2023 and who had direct fiduciary responsibility were:

No.	Designation	Name
1.	CEO/Registrar	Ibrahim Boru Wako
2.	Deputy Registrar/Head of Training & Examinations	Eunice Muthoni Kuria
3.	Head of Finance	Henry Mwinya Wandera
4.	Head of Registration & Licensing	James Proso Akudian
5.	Head Of Indexing	Jacinta Kamene Waa

e) Fiduciary Oversight Arrangements

The primary organ responsible for fiduciary oversight arrangements is the Council members. Other Government bodies and agencies also provide oversight. COC exercises this oversight through its committees. The key function of the Council is to guide and control the performance and management of the affairs of the council. The committees were Finance Committee, Risk and Audit, Training and Education Committee, Disciplinary Committee and Licensing and Registration Committee.

Finance Committee

The primary responsibility of the Finance Committee is to oversee the Financial, human resource, legal and ICT advancement of the Council. It makes recommendations to the council on ways raising and utilizing funds and established systems and procedures for efficient

financial management. It further advises the Council on Human Resource, ICT, Legal and Supply Chain policies and guidelines.

Training & Examinations and Registration and Licensing Committees
These committees set the criteria, and oversees implementation of regulations governing the enrolment, registration and licensing of Clinical Offices in Kenya. These Committees are also in charge on the registers, rolls and records required to be kept under the Clinical Officers (Training, Registration and Licensing) Act, 2017. These Committees are also involved in the development of performance evaluation study guidelines, training and research guidelines.

Disciplinary Committee

The Disciplinary Committee is responsible for establishments, improvement and control of conditions, standards and quality of Clinical Officers education and practice within the ambit of the Clinical Officers (Training, Registration and Licensing) Act, 2017. It is also responsible for determining issues against persons or institutions brought before the Council.

Risk and Audit Committee

The scope of this committee includes risk management, compliance with regulatory requirements. It broadly oversees the council standards of integrity and behaviour, reporting of financial information and internal control systems.

f) Entity Headquarters

P.O. Box 19757-K.N.H.
Blue Violet Plaza, Suite 203,
Kindaruma Road, Off Ngong Road,
Nairobi, KENYA

g) Entity Contacts

Telephone: (254) 725 705 144
E-mail: info@clinicalofficerscouncil.org
Website: www.clinicalofficerscouncil.org

h) Entity Bankers

1. Absa Bank Kenya Ltd
Moi Avenue Branch
P.O. Box 30011-00100
Nairobi, Kenya

2. Cooperative Bank of Kenya Ltd
Nairobi Business Centre Branch
P.O. Box 48231-00100
Nairobi, Kenya

3. Kenya Commercial Bank Ltd
Village Market Branch
P.O. Box 48400-00100
Nairobi, Kenya

i) Independent Auditor


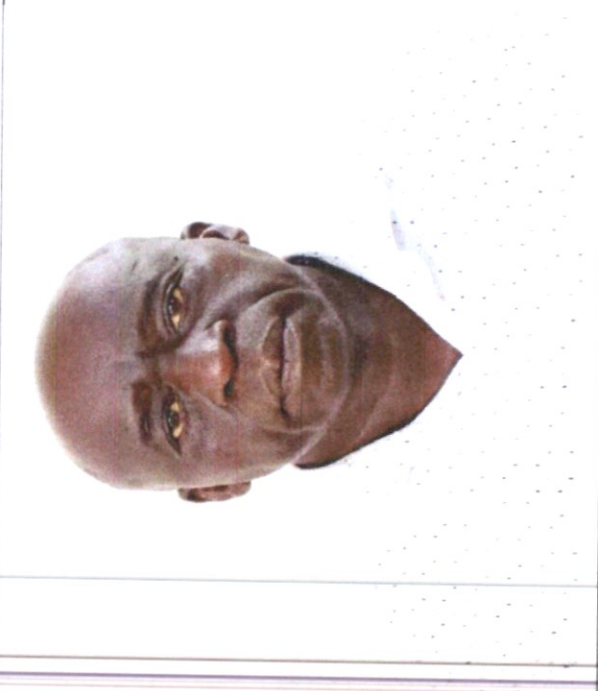
Auditor-General
Office of the Auditor General
Anniversary Towers, University Way
P.O. Box 30084
GPO 00100
Nairobi, Kenya

j) Principal Legal Adviser

The Attorney General
State Law Office and Department of Justice
Harambee Avenue
P.O. Box 40112
City Square 00200
Nairobi, Kenya

**Clinical Officers Council of Kenya
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3. The Council Members

Ref	Directors	Details
		<p>Prof. Simon Kangethe Independent Council Member and Chairman, Clinical Officers Council. Prof. Simon Kangethe, born on 03rd June 1953, was appointed to the Council on 28th July 2022. He holds DCM, (Ophth)B Ved, M.Ed, ED. D, CAS (Harvard)</p>
		<p>Dr. Joseph Kiprop Choge Independent Council Member Dr. Joseph Kiprop Choge was born on 7th September 1964. Was appointed for another term on 13th July 2022, He hold PhD in Parasitology, M.Phil. (Parasitology); BSc. (Hons); Biological Sciences; HND (Paediatrics); Diploma Clinical Medicine. He is currently Senior Lecturer at the University of Kabianga</p>



Manasseh A. Bocha

Independent Council Member

Manasseh A. Bocha was born on 15th February 1965. Was appointed for another term on 13th July 2022, He hold MSc International Health. He is currently the Head of Clinical Services -MoH



Philip Musyimi Mwololo

Independent Council Member

Philip Mwololo was born on 13th May 1958. Was appointed for another term on 13th July 2022. He is the Chairperson of Planning, Research and Development Committee. Private Practitioner Clinical Officer. He Holds Higher Diploma –Management Healthcare Business Program, Diploma in Clinical Medicine and surgery.

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Felix Mwendwa Mutua

Independent Council Member

Felix Mwendwa Mutua was born on 3rd June 1974. Was appointed for another term on 13th July 2022. He is the Chairperson of Training, Registration, Licensing and Compliance Committee. He holds Masters in Public Health



Jacqueline Anyango Ressa

Independent Council Member

Jacqueline Anyango Ressa was born on 11th May 1974. Was appointed to the Council on 5th August 2022, She hold Master of Psychology (Health). She is currently Program manager under Covid 19 health emergency response Project (CHERP) MoH

**Clinical Officers Council of Kenya
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**Harriet Wakiuru Njiru
Independent Council Member**

Harriet Wakiuru Njiru was born on 30th March 1982. Was appointed to the Council on 13th July 2022, She hold Bachelor of Science in Human Nutrition and Dietetics. She is currently the Lead minister at the Dunamis Christian Network, Secretary General Nutrition Association of Kenya.



**Albert Wangurah Taiti
Independent Council Member**

Albert Wangurah Taiti was born on 9th June 1968. Was appointed for another term on 13th July 2022. He holds a Master's degree in Community Health and Development, Postgraduate Diploma –Dermatology, Venereology and Tropical Medicine from the University of Dares Salaam (UDSM) He is the current chairman of Kenya Clinical Officers Association (KCOA)

**Clinical Officers Council of Kenya
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**FCPA Edwin Nyabuga Makori
Independent Council Member**

Edwin Nyabuga Makori was born on 4th November 1975. Was appointed for to the Council on 13th July 2022, He hold Masters, MBA Finance, B-com Finance, CPA(K), CISA, Data and Business analytics. Chairperson of Audit and Risk Committee



**Ibrahim Boru Wako,
Registrar/CEO, Secretary to the
board.**

Ibrahim Wako was born on 20th December 1965, he is currently the CEO/Registrar of Clinical Officers Council. He holds Masters-Public Health, Masters –Health Systems Management





Mr Albert Mokuu

Independent Council Member




Mr. A.D. Mokuu was born on 01st January, 1969. Was appointed for another term on 13th July 2022. He holds a Master's degree in Sociology, Specializing in Human Resource Management. He is Currently the Director of Human Resource Management and Development at the state department of Water and Sanitation.

**Clinical Officers Council of Kenya
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4. Key Management Team

	Management	Details
1.		<p>Ibrahim Boru Wako, Registrar/CEO, Masters-Public Health Masters –Health Systems Management</p>
2.		<p>Eunice Muthoni Kuria, Principal Clinical Officer, Deputy Registrar and Head of Training/Education and Examination Department Masters - Health Professional Education</p>

**Clinical Officers Council of Kenya
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3.		<p>Henry Mwinya Wandera Head of Finance and Accounting CPAK, Masters - Science Financial Economics.</p>
4.		<p>James Proso Akudian, Principal Clinical Officer, Head of Registration and Licensing Masters - Public Health</p>
5.		<p>Jacinta Kamene Waa, Clinical Officer, Head Training and Indexing Higher Diploma –Family Health</p>

**Clinical Officers Council of Kenya
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5. Chairman's Statement

On behalf of the Council, I have the pleasure of presenting the Annual Report and Financial Statements for the financial year ended 30 June 2023. Established under the Clinical Officers (Training, Registration and Licensing) Act, 2017, the Council is mandated to regulate Clinical Officers education and practice in Kenya, through making provisions for training, registration, enrolment and licensing of nurses and midwives. The Council also regulates their conduct to ensure maximum participation in health care of the community and connected purposes.

I am pleased to report that the Council was able to achieve most of the targets set for the financial year 2022-2023. We have continued to work within our mandate as stipulated in the Clinical Officers Act. To enhance service delivery, the Council has digitized most of its services including payment platform, retention and registration of Clinical Officers. In addition, the Council now administers its exams online.

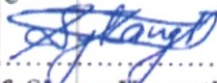
The Council is committed to ensuring its prosperity by collectively directing its affairs, whilst meeting the diverse interests of stakeholders. The Council Policies guides the operations of the Council, as well as defining the roles and responsibilities of the Council members and Management. We strive to observe the highest standards of corporate governance and corporate ethics in providing overall policy and strategic direction.

The Council acknowledges the unique contribution that clinical officers play in the healthcare system. We are very proud of the clinical officer's professionals at the frontline in response to the health issues. We also continue to Implement our five-year Strategic Plan 2021- 2025 under four key strategic pillars namely:

1. Education & Accreditation
2. Registration & Licensing
3. Financial Sustainability
4. Institutional Capacity Strengthening

The plan is aligned to the national aspirations as envisioned in the Kenya Vision 2030, the Medium Term Plan and the Constitution of Kenya 2010.

Lastly, I wish to express my sincere appreciation to my fellow Council members, management and staff for their dedication in improving the operations of the Council. In addition, I wish to thank our clients and all other stakeholders for their continued patronage and support of our activities. Finally, I would like to thank the Government for the continued support, guidance and good



**Prof. Simon Kangethe
Chairman**

19/2/2024

**Date
Nairobi**

**Clinical Officers Council of Kenya
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6. Report of the Chief Executive Officer

I am pleased to present the annual report and financial statements for the year ended 30th June 2023.

The Clinical Officers Council of Kenya is a body corporate under an Act of Parliament, Act No. 20 of 2017 Laws of Kenya. In accordance to this Act, COC mandate is to regulate training, registration, licencing and practice of all Clinical officers. The Council was first established in 1988 through an Act of parliament Cap 260 Laws of Kenya which was repealed in 2017. The Strategic Plan of the Council is designed to ensure 100% compliance with the requirements under the Clinical Officers Act and other relevant laws and regulations.


The core business of the Council is to make provision for training, registration, enrolment and licensing of Clinical Officers: to regulate their conduct and to ensure their maximum participation in the health care of the community and for connected purposes. This is in line with the mission and vision statement of the Council as nurtured by our core values.

During the financial year under review, the Council reported an increase in revenue reported from Kshs.80.779 million FY 2021-2022 to Kshs.118.41 million FY 2022-2023. There was an increase in surplus for the year from the deficit of Kshs. (10.48) million to kshs.4.286 million as a result of utilization of the previous years' surplus to fund current operations and general increase in revenue collection throughout the year occasioned by serious campaigns for licensing compliance. The value of total assets rose from Kshs. 127.189 million to Kshs. 144.028 million the current year. The Council achieved most of its intended plans, programs and activities as set out in the annual work plan and procurement plan.

The Council successfully administered Online exams.

The Council considers its customers experience an integral part of measure of success of operations. Therefore, the Council continually strives to remain customer centric in its service delivery. We are aware that in order to be successful, we need to continually change and adapt to the customers' ever-changing needs and wants. In this regard, processes have been designed and re-engineered to ensure that customer get the best service in the Council.

I appreciate the support and guidance received from the Council and the devotion of Council staff members.



Ibrahim B. Wako
Registrar/CEO



Date
Nairobi

**Clinical Officers Council of Kenya
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7. Statement of Performance against Predetermined Objectives for FY 2022-2023

Clinical Officers Council of Kenya has four strategic themes and objectives within the current Strategic Plan for the FY 2021 -2025. These strategic themes are as follows:

- Theme 1: Education and Accreditation
- Theme 2: Registration and Licensing
- Theme 3: Financial Sustainability
- Theme 4: Institutional Capacity Strengthening

The Council develop its annual work plans based on the above 4 Themes. Assessment of the Board's performance against its annual work plan is done on a quarterly basis. The Council achieved its performance targets set for the FY 2023 period for its 4 strategic pillars, as indicated in the strategic model table below:

Strategic Model 1: Training
<ul style="list-style-type: none">i) Publishing of four (4) policy documents – training & accreditation standards; examination policy; internship policy; and indexing policy. Exceed the set target (200 copies) by 100 copies.ii) Dissemination of the four (4) policy documents to the set target 135 training institutions/hospitals.iii) 12 training institutions inspected pa (240 in 5years).iv) 9988 students indexed from the set target of 12500 in 5 years.v) Accreditation of 40 new training institutions.vi) 3500 candidates examined annually (set target of 3500 candidates).
Strategic Model 2: Registration
<ul style="list-style-type: none">i) 10 annual sensitization meetings held from a set target of 16 to enhance clinical officers' registration and retention.ii) Developed an online application system and put in place a dedicated server to enhance digitization.iii) 90% penalty reinforcement for late registration and retention.iv) 100% developed registration and licensing guideline for COC.
Strategic Model 3: Licensing
<ul style="list-style-type: none">i) 100% developed Licensure, scope and fitness to practice policies for Clinical Officers with ongoing sensitization to CO's on the policy guideline.ii) 10 counties sensitized from the set 16 annually to enhance licensure requirement from the CO's and employers.iii) 80% achievement on an online renewal system with required ongoing sensitization to our clients.iv) 80% practice license renewed resulting from a developed system for Linking CPD to practice licensing renewal with ongoing sensitization to clients on the significance of CPD compliance.v) 100% review of the Inspection checklist to optimize licensing of Clinical Officers.

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Strategic Model 4: Internal Systems and Processes

- i) Extra office space purchased to enhance the working environment.
- ii) 6 laptops purchased from a set target of 6.
- iii) 1 dual purpose shredder acquired.
- iv) 3 benchmarking areas identified.
- v) 100% reviewed compliance with legal requirements.

Strategic Model 5: Human Resource Development

- i) Reviewed organizational structure achieved.
- ii) 100% of the JD's and Job Specification done awaiting categorization by SCAC

Strategic Model 6: Leadership and Governance

- i) RRI and SCAC Trainings done to build strong relations with existing and potential partners from the set target of 2.
- ii) A reviewed organogram in place to create a high-performance, sustainable Council.
- iii) Developed online platforms for licensure and CPDs, Private Practice registration and Examination procedures.

Strategic Model 7: Resource Mobilization and Financial Management

- i) Audit Report undertaken for prudent financial management.
- ii) Cash flow Report & Evaluation report done to streamline Cash Flow Management.
- iii) Partnership with Liverpool School of Tropical Medicine (LSTM) as an output for developing and maintaining strategic partnerships.

**Clinical Officers Council of Kenya
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8. Corporate Governance Statement

The Management of Clinical Officers Council of Kenya is responsible for the overall management of the organization and is accountable to its stakeholders for ensuring that the organization complies with the law and the highest standards of best practices in corporate governance and quality service delivery. The Council is committed to integrity in accordance with the generally accepted corporate governance practices and endorses the principles of good corporate governance.

Composition of the Council:

The Council is made up of Ten members and who consist of a Chairperson and nine members appointed by the Cabinet Secretary in the Ministry of Health to represent major stakeholders. A representative from the office Director General Medical services, and Office of Chief Clinical Officer included and the Registrar / Chief Executive Officer of the Council who is ex-officio members of the Council.

The Council exercises leadership, enterprise, integrity and judgement in managing the Council. The Council members are provided with full, appropriate and timely information that enables them to maintain full and effective control over strategic, financial, operational and compliance issues.

The day-to-day running of the operations of the Council is delegated to the Registrar / Chief Executive Officer but the Management is responsible for establishing and maintaining the Council's system of internal controls for the realization of the Council's mandate.

Council Committees:

The Council is assisted in its work by Council Committees attending to specific matters. The Committees report to and remain accountable to the Council for all their activities. The Council Committees' main function is to reinforce the wholeness of the Council's responsibility.

The Council has four standing committees which meet at least once per quarter and work under the terms of reference set by the Council. The Council co-opt members to enhance its performance in specific areas where there is need of expertise.

Members who served in the in the committees during the financial year are as follows;

Finance, Audit, Strategy and Development

- a) FCPA Edwin Nyabuga Makori (Chairperson)
- b) Mrs Jacqueline Anyango Mbala
- c) Mr A.D Mokua
- e) Ibrahim Wako

Registration and Licensing Committee

- a) Mr Philip Mwololo (Chairperson)
- b) Prof Simon Kangethe
- c) Mrs Harriet Njiru
- d) Mrs Jacqueline Anyango Mbala

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Discipline, Standards and Ethics Committee

- a) Dr Joseph Choge (Chairperson)
- b) Mr. Albert Taiti
- c) Mr Felix Mutua
- d) Ibrahim Wako

Training and Education Committee

- a) Mr. Felix Mutua (Chairperson)
- b) Dr Joseph Choge
- c) Mr. Manasseh Bocha
- d) Ibrahim Wako

Council Meetings:

The Council meets quarterly or more often, in accordance with the requirements of the business. The Council work plan and calendar are prepared at the beginning of the year and adequate notice is given for all meetings. The agenda and Council papers are circulated within the stipulated timelines.

The table below is a summary of Council members' attendance to council meetings held in the period under review:

Council Member	Committee Meetings	Full Council	Special Meetings	Total Meetings
Pro. Simon Kangethe	4	4	4	12
Albert D. Mokua	4	4	3	11
Manasseh Bocha Asser	4	4	4	12
Dr. Joseph Kiprop Choge	4	4	4	12
Jacqueline Anyango Ressa	4	4	4	12
Felix 'Mwendwa Mutua	4	4	4	12
Philip Musyimi Mwololo	4	4	4	12
Edwin Nyabuga Makori	3	4	4	11
Harriet Wakiuru Njiru	3	3	3	9
Albert Wangurah Taiti	3	3	3	9

The Role of the Council

As guided by Clinical Officers Act, the State Corporations Act, Cap 446, and other relevant laws of Kenya, the Council's role is to provide effective leadership and control, in terms of approving Council's strategy and ensuring best practice of corporate governance.

The Council retains full and effective control over the Council by monitoring the implementation of Council plans and strategies, review of management accounts and major capital expenditure. It

**Clinical Officers Council of Kenya
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reviews processes for the identification and management of risks as well as those concerning compliance with key regulatory and legal areas.

The Council also reviews succession plans for the management team and endorses senior executive appointments, organisational changes and remuneration matters. It is concerned with key elements of the governance processes which sustain the operations of the Council, performance reporting processes as well as other disclosure requirements.

Council effectiveness

The independence of the Council from the COC's corporate management is ensured by the separation of the functions of the Chairperson and Registrar / CEO, and a clear definition of their responsibilities.

The Chairperson is a non-executive Council member and is primarily responsible for providing leadership to the Council while the Registrar / CEO is responsible for the day-to-day management of the Council. This achieves an appropriate balance of power, increased accountability and improved capacity for decision making.

The Council has a Charter to facilitate its governance system. Each Council member has signed the Charter.

Director's remuneration

In accordance with guidelines provided in the State Corporations Act, the Council members are paid taxable sitting allowance for every meeting attended, as well as travel and accommodation allowance while on the Council's duty. The Chairperson is also paid a monthly honorarium.

Statement of Compliance

The Council Member's participation and attendance confirms that Clinical Officers Council has throughout the 2022/2023 financial year complied with the entire Statutory and Regulatory requirement and that the Council is committed to the principles of good corporate governance as stipulated by Mwongozo: The Code of Governance for State Corporations.

Internal control and risk management:

Internal Control

The Council Members are responsible for reviewing the effectiveness of the Council's system of internal control which is designed to provide reasonable, but not absolute, assurance regarding the safeguarding of the assets against unauthorized use or disposition and the maintenance of proper accounting records and the reliability of financial information used within the business or for publication. These controls are designed to manage rather than eliminate the risk of failure to achieve business objectives due to circumstances which may reasonably be foreseen and can only provide reasonable and not absolute assurance against material misstatement or loss.

Standing Instructions

The Council is developing a Code of Ethics and a Service Charter that is applicable to all employees. These two are standing Instructions to employees of the Council designed to enhance internal control. The Council is also designing other set of standing instructions to be followed in the management of various functions in the organization.

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Organization Structure

A clear organizational structure exists, detailing lines of authority and control responsibilities. The professionalism and competence of staff is maintained both through rigorous recruitment policies and a performance appraisal system which establishes targets, reinforces accountability and awareness of controls, and identifies appropriate training requirements. Training plans are prepared and implemented to ensure that staff develop and maintain the required skills to fulfil their responsibilities, and that the Council can meet its future management requirements.

Strategic Plan

The business of the Council is determined by the Strategic Plan. It sets out the objectives of the Council, and the annual targets to be met to attain those objectives. The Strategic Plan is evaluated annually to assess the achievement of those objectives. The Council on an annual basis, approves the work plan supported by the financial plan for the year. Progress against the plan is monitored on a quarterly basis.

Internal Control Framework

The Council continues to review its internal control framework to ensure it maintains a strong and effective internal control environment. Business processes and controls are reviewed on an ongoing basis. A risk-based audit plan, which provides assurance over key business processes and operational and financial risks facing the Council, is approved by the Audit Committee.

The Audit Committee considers significant control matters raised by management and both the internal and external auditors and reports its findings to the Council. Where weaknesses are identified, the Audit Committee ensures that management takes appropriate action. No significant failings or weaknesses were identified during 2022/2023.

Risk Management

The Council has a structure and process to help identify, assess and manage risks. The process was in place for the period up to the time this report was approved. This team reviews all the risks in the Council and updates the risk register and ensures that all new and emerging risks are appropriately evaluated and any further actions identified. The identified risks are reported to the Audit Committee to assist the Council in the management of risk.

Management Team

The management team headed by the Registrar / CEO implements the Council decisions and policies through action plans. The team meets regularly to review these action plans to ensure that the Council's objectives are achieved effectively and efficiently. Such policies developed include the financial management policy, internal audit policy, procurement policy, education policy, examination policy, among others.

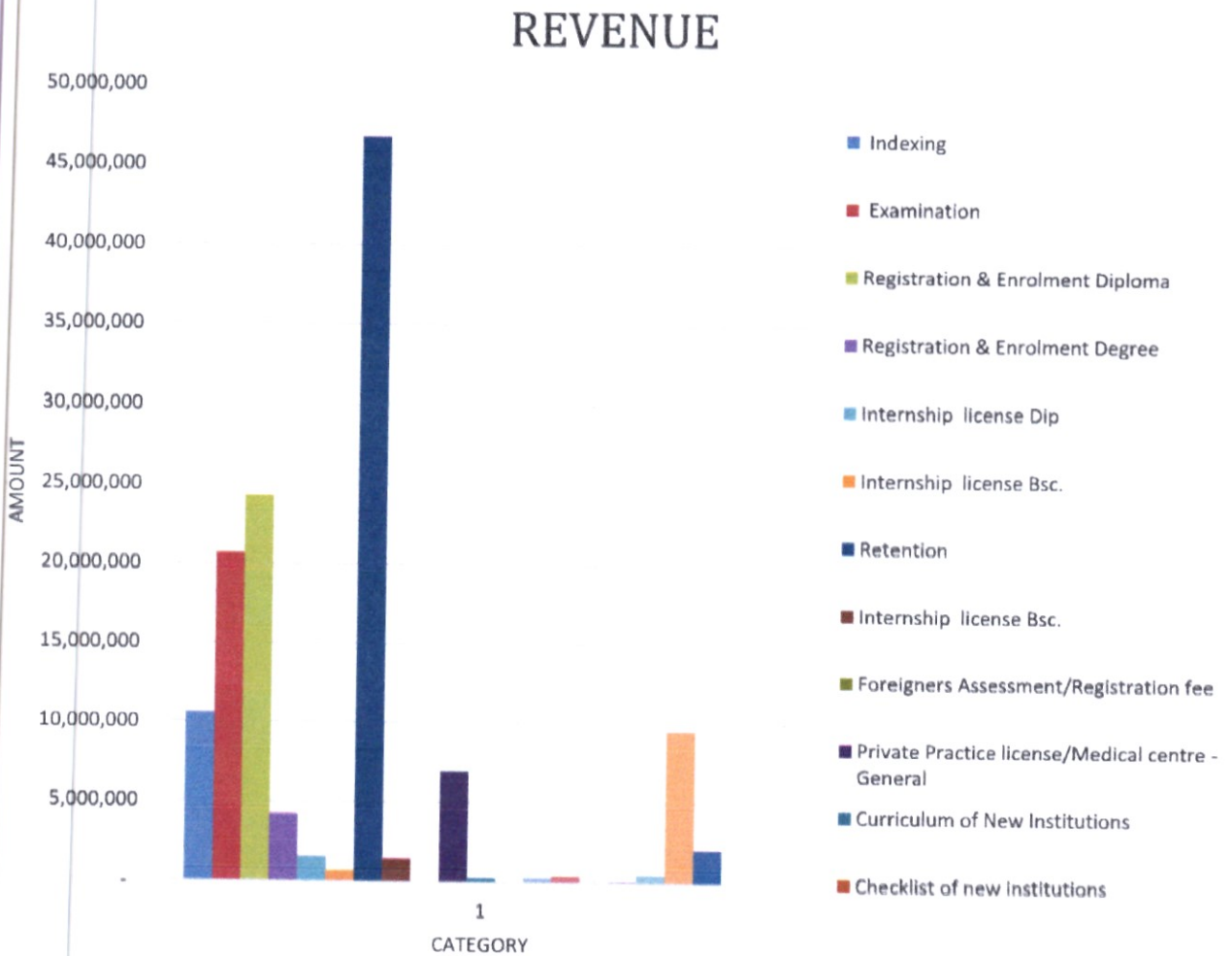
**Clinical Officers Council of Kenya
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9. Management Discussion and Analysis

Revenue Performance

Total Revenue generated recorded an improvement in FY 2022-2023 recording Kshs. 118,412,745 against the previous year's figure of Kshs. 80,779,717. This reflected an increase of Kshs. 37,633,028 or 32%. The performance was however, below the budget figure of Kshs. 178,310,000 by Kshs. 59,897,255 or 34% unfavourable performance. This is because we did not receive any funding from the exchequer as was anticipated. We had expected to get 67,000,000 from GOK. Increase in revenue collections was as a result

The chart below shows revenue received by categorisation

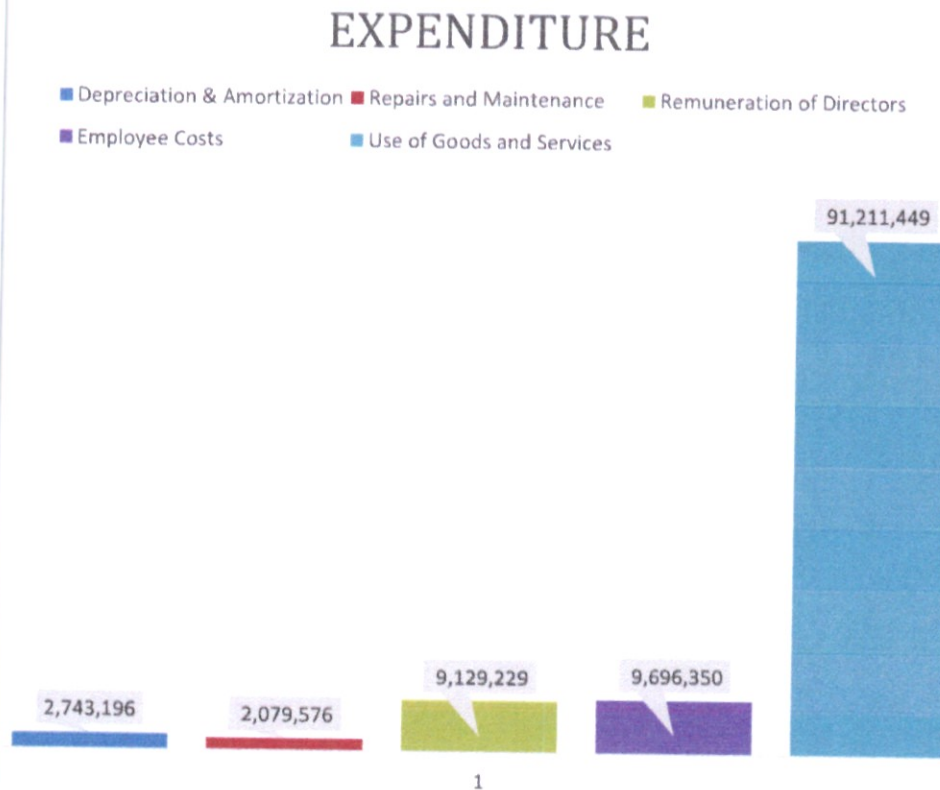


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Expenditure Performance

Total expenditure in the period under review increased by 26% to Kshs. 114,859,800 from Kshs. 91,263,742. This was however, below the budgeted figure of Kshs. 170,766,000 by Kshs. 58,649,396. This was mainly on account of increased operating costs attributed to increased compliance visits and inspections, acquisition of retention cards to cater for increased numbers of clinical officers renewing their licenses and costs of exam execution. There was a notable increase in repairs and maintenance costs whose huge component was driven by repairs and maintenance of the Council's motor vehicle infrastructure.

The chart below shows expenditure incurred during the period by categorisation;



Total Assets

The Council's total assets rose from Kshs. 127,189,945 FY 2021-2022 to Kshs. 144,028,339 FY 2022-2023 representing a 11% growth level.

Current Assets

The Current assets stood at Kshs. 86,481,514 up from Kshs. 68,464,658 the previous FY 2021-2022 an increase of 21%. The increase was mainly on account of growth in Cash and cash equivalent over the same period.

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Liabilities

The Council's balance of liabilities as at 30 June 2023 were Kshs. 13,031,824 compared to previous financial year's balance of Kshs. 480,213 representing an increase of 96%. This was due to recognition of differed income of Kes. 12,126,000

10. Environmental and Sustainability Reporting

i) Sustainability strategy and profile

The Council strive to become an ever more sustainable organization by maximizing the positive impact we have on all our stakeholder groups while minimizing our negative impact throughout the value chain. We seek to be characterized by our passion, integrity, entrepreneurialism and innovative spirit, as we fulfil our vision.

Our activities are designed to create value for and through our main stakeholders, which includes the governments, customers, suppliers and the citizen community

Many members of our leadership team have participated in our operations and understands how sustainability may be best combined with day-to-day Council operations.

We analyse our performance using different techniques, so not to only driven by positive financial growth but also positive impact on the community.

The Council sets examples to encourage and enable our customers to make better choices and leads a more productive and sustainable life

Year-round engagement with diverse stakeholders informs our sustainability reporting and overarching sustainability strategy. We publicly report on topics that are priorities for both our business and our key stakeholders.

We closely monitor and respond to market and society needs and prefer to address those needs prior to them surfacing at a large scale if possible

ii) Environmental performance

With our increase in revenue, the council has been able to allocate more funding to environmental causes for example, tree planting exercise.

All new hires are now required to participate in eco initiatives and have been introduced to them during their on boarding.

iii) Employee welfare

By building an inclusive workplace environment, we seek to leverage the talent, insights and ideas of our employees. Our aspiration is not only to mirror, at every level of leadership, the diversity of the communities we operate, but also to exceed industry norms. We share diversity and inclusion metrics across our workforce with our Council members and senior leaders on a quarterly basis, highlighting progress and driving accountability

As a Council, our ability to understand, embrace and operate in a diverse world—both in the marketplace and in the workplace—is critical to our long-term sustainability and to doing business the right way.

As was the case in the previous years, we ensure all employees are respected and feel safe at work

iv) Corporate Social Responsibility / Community Engagements

Clinical Officer's Council of Kenya plays an important role in the provision for training, registration, enrolment and licensing of Clinical Officers in Kenya and regulates their conduct to ensure their maximum participation in the health care of the Community and for connected purposes. Corporate Social Responsibility (CSR) is increasingly becoming an integral part of business today as it influences the long-term success of any organisation. In the process of carrying out our activities as the Council, we are keen to work closely with communities and other stakeholders around us, to empower, create value and better their lives.

The Council recognizes its obligations to act responsibly, ethically and with integrity in its dealings with staff, customers, stakeholders and the environment as a whole.

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In striving to fulfil the corporate social responsibility in the financial year, the Council embarked on the following activities;

- i. Community engagement and support with Clinical Officers through the county clinical officers
- ii. Participation and supporting in the Beyond zero marathon
- iii. Support of activities/events organized by Clinical Officer's Associations

The Council has been an active participant in Beyond Zero campaigns. The main cause of the initiative was to create a one stop healthcare services to achieve zero maternal death. The initiative also focused on raising awareness and funds for neglected health challenges such as fistulae, children living with disabilities, multiple HIV risks faced by young people, breast, cervical and prostate cancers and eye care for the elderly.

The Clinical Officers fraternity has vibrant associations which have been established to champion their various needs and initiatives. On yearly basis the associations do organize events with particular thematic areas for sensitization of their members. The Council is invited as one of the corporate sponsors and participates in such events as well. For the year under review, the Council supported the 24th Annual National Scientific Conference for Kenya Clinical Officers Association (KCOA).



KCOA Conference 2022

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KUCO Field Activity 2022



Members Championing for Primary Healthcare

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Council Staff at the KCOA Conference

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11. Report of the Directors

The Directors submit their report together with the audited financial statements for the year ended June 30, 2023, which show the state of the Clinical Officers Council of Kenya's affairs.

Principal activities

The core functions of the office of the Clinical Officers Council of Kenya include Training, Registration and Licensing of Clinical Officers in Kenya.

Results

The results of the Entity for the year ended June 30, 2023, are set out on page 1

Council Members

The Council Members who served during the year are shown on page ix to xiv. During the year Council members Albert Mokuu resigned and Hashim Omar Warfar was appointed.

Auditors

The Auditor-General is responsible for the statutory audit of the Clinical Officers Council of Kenya in accordance with Article 229 of the Constitution of Kenya and the Public Audit Act 2015.

By Order of the Board


.....

**Ibrahim Boru Wako
Secretary to the Board**


.....

**Date.
Nairobi**

12. Statement of Directors Responsibilities

Section 81 of the Public Finance Management Act, 2012 and section 14 of the State Corporations Act, and the Clinical Officers of Kenya Act no.20 of 2017 require the CEO/Registrar to prepare financial statements in respect of the Council, which give a true and fair view of the state of affairs of the council at the end of the financial year/period and the operating results of the Clinical Officers Council of Kenya for that year/period. The council members are also required to ensure that the council keeps proper accounting records which disclose with reasonable accuracy the financial position of the Council. The council members are also responsible for safeguarding the assets of the council.

The Council Members are responsible for the preparation and presentation of the Council's financial statements, which give a true and fair view of the state of affairs of the Council for and as at the end of the financial year ended on June 30, 2023. This responsibility includes: (i) Maintaining adequate financial management arrangements and ensuring that these continue to be effective throughout the reporting period; (ii) Maintaining proper accounting records, which disclose with reasonable accuracy at any time the financial position of the Entity; (iii) Designing, implementing and maintaining internal controls relevant to the preparation and fair presentation of the financial statements, and ensuring that they are free from material misstatements, whether due to error or fraud; (iv) Safeguarding the assets of the Council; (v) Selecting and applying appropriate accounting policies; and (vi) Making accounting estimates that are reasonable in the circumstances.

The Council Members accept responsibility for the council's financial statements, which have been prepared using appropriate accounting policies supported by reasonable and prudent judgements and estimates, in conformity with International Public Sector Accounting Standards (IPSAS), and in the manner required by the PFM Act 2012, the State Corporations Act and the Clinical Officers Act. The Council Members are of the opinion that the Council's financial statements give a true and fair view of the state of Council's transactions during the financial year ended June 30, 2023, and of the Council's financial position as at that date. The Council Members further confirms the completeness of the accounting records maintained for the Council, which have been relied upon in the preparation of the Council's financial statements as well as the adequacy of the systems of internal financial control.

Nothing has come to the attention of the Council Members to indicate that the Council will not remain a going concern for at least the next twelve months from the date of this statement.

Approval of the financial statements

The Council's financial statements were approved by the Board on 19/2/2024 2024 and signed on its behalf by:



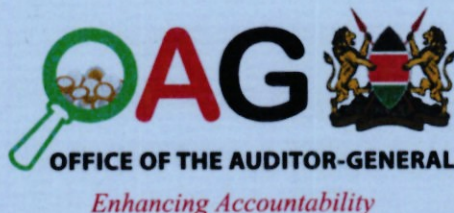
Prof. Simon Kangethe
Chairperson of the Council



Ibrahim B. Wako
Registrar/CEO

REPUBLIC OF KENYA

Telephone: +254-(20) 3214000
E-mail: info@oagkenya.go.ke
Website: www.oagkenya.go.ke



HEADQUARTERS
Anniversary Towers
Monrovia Street
P.O. Box 30084-00100
NAIROBI

REPORT OF THE AUDITOR-GENERAL ON CLINICAL OFFICERS COUNCIL OF KENYA FOR THE YEAR ENDED 30 JUNE, 2023

PREAMBLE

I draw your attention to the contents of my report which is in three parts:

- A. Report on the Financial Statements that considers whether the financial statements are fairly presented in accordance with the applicable financial reporting framework, accounting standards and the relevant laws and regulations that have a direct effect on the financial statements.
- B. Report on Lawfulness and Effectiveness in Use of Public Resources which considers compliance with applicable laws, regulations, policies, gazette notices, circulars, guidelines and manuals and whether public resources are applied in a prudent, efficient, economic, transparent and accountable manner to ensure the Government achieves value for money and that such funds are applied for the intended purpose.
- C. Report on Effectiveness of Internal Controls, Risk Management and Governance which considers how the entity has instituted checks and balances to guide internal operations. This responds to the effectiveness of the governance structure, the risk management environment and the internal controls, developed and implemented by those charged with governance for orderly, efficient and effective operations of the entity.

An unmodified opinion does not necessarily mean that an entity has complied with all relevant laws and regulations and that its internal controls, risk management and governance systems are properly designed and were working effectively in the financial year under review.

The three parts of the report are aimed at addressing the statutory roles and responsibilities of the Auditor-General as provided by Article 229 of the Constitution, the Public Finance Management Act, 2012 and the Public Audit Act, 2015. The three parts of the report, when read together constitute the report of the Auditor-General.

REPORT ON THE FINANCIAL STATEMENTS

Opinion

I have audited the accompanying financial statements of Clinical Officers Council of Kenya set out on pages 1 to 22, which comprise of the statement of financial position as at 30 June, 2023, and the statement of financial performance, statement of changes in net assets, statement of cash flows and statements of comparison of budget and actual

amounts for the year then ended, and a summary of significant accounting policies and other explanatory information in accordance with the provisions of Article 229 of the Constitution of Kenya and Section 35 of the Public Audit Act, 2015. I have obtained all the information and explanations which, to the best of my knowledge and belief, were necessary for the purpose of the audit.

In my opinion, the financial statements present fairly, in all material respects, the financial position of Clinical Officers Council of Kenya as at 30 June, 2023, and of its financial performance and its cash flows for the year then ended, in accordance with International Public Sector Accounting Standards (Accrual Basis) and comply with the Clinical Officers (Training, Registration and Licensing) Act, 2017 and the Public Finance Management Act, 2012.

Basis for Opinion

The audit was conducted in accordance with International Standards of Supreme Audit Institutions (ISSAIs). I am independent of the Clinical Officers Council of Kenya Management in accordance with ISSAI 130 on Code of Ethics. I have fulfilled other ethical responsibilities in accordance with the ISSAI and in accordance with other ethical requirements applicable to performing audits of financial statements in Kenya. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Key Audit Matters

Key audit matters are those matters that, in my professional judgment, are of most significance in the audit of the financial statements. There were no key audit matters to report in the year under review.

REPORT ON LAWFULNESS AND EFFECTIVENESS IN USE OF PUBLIC RESOURCES

Conclusion

As required by Article 229(6) of the Constitution, based on the audit procedures performed, I confirm that, nothing has come to my attention to cause me to believe that public resources have not been applied lawfully and in an effective way.

Basis for Conclusion

The audit was conducted in accordance with International Standards of Supreme Audit Institutions (ISSAIs) 4000. The Standard requires that I comply with ethical requirements and plan and perform the audit to obtain assurance about whether the activities, financial transactions and information reflected in the financial statements are in compliance, in all material respects, with the authorities that govern them. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my conclusion.

REPORT ON EFFECTIVENESS OF INTERNAL CONTROLS, RISK MANAGEMENT AND GOVERNANCE

Conclusion

As required by Section 7(1)(a) of the Public Audit Act, 2015, based on the audit procedures performed, except for the matters described in the Basis for Conclusion on Effectiveness of Internal Controls, Risk Management and Governance section of my report, I confirm that, nothing else has come to my attention to cause me to believe that internal controls, risk management and overall governance were not effective.

Basis for Conclusion

1. Failure to Establish Key Departments and Policies/Manuals

During the year under review it was noted that key departments including human resource, internal audit, procurement and legal, human resource policy and procedures manual, finance and accounting manual, assets management policy, transport management policy, information technology policy, risk management policy and disaster recovery plan had not been established.

In the circumstances, the effectiveness of internal controls, risk management and governance could not be confirmed.

2. Understaffing

Review of personnel records revealed that only eleven (11) posts have been filled out of one hundred and two (102) staff in the draft staff establishment resulting to unexplained variance of ninety-one (91) vacant posts.

In the circumstances, lack of adequate human resources may negatively affect service delivery and achievement of the organizational goals and targets.

The audit was conducted in accordance with ISSAI 2315 and ISSAI 2330. The Standards require that I plan and perform the audit to obtain assurance about whether effective processes and systems of internal control, risk management and governance were operating effectively, in all material respects. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my conclusion.

Responsibilities of Management and Council Board

Management is responsible for the preparation and fair presentation of these financial statements in accordance with International Public Sector Accounting Standards (Accrual Basis) and for maintaining effective internal controls as Management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error and for its assessment of the effectiveness of internal controls, risk management and overall governance.

In preparing the financial statements, Management is responsible for assessing the Council's ability to continue to sustain its services, disclosing, as applicable, matters related to sustainability of services and using the applicable basis of accounting unless Management is aware of the intention to terminate the Council or to cease operations.

Management is also responsible for the submission of the financial statements to the Auditor-General in accordance with the provisions of Section 47 of the Public Audit Act, 2015.

In addition to the responsibility for the preparation and presentation of the financial statements described above, Management is also responsible for ensuring that the Council's activities, financial transactions and information reflected in the financial statements are in compliance with the authorities which govern them, and that public money is applied in an effective manner.

The Council Board is responsible for overseeing the Council's financial reporting process, reviewing the effectiveness of how Management monitors compliance with relevant legislative and regulatory requirements, ensuring that effective processes and systems are in place to address key roles and responsibilities in relation to overall governance and risk management, and ensuring the adequacy and effectiveness of the control environment.

Auditor-General's Responsibilities for the Audit

The audit objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion in accordance with the provisions of Section 48 of the Public Audit Act, 2015 and submit the audit report in compliance with Article 229(7) of the Constitution. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISSAIs will always detect a material misstatement and weakness when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

In addition to the audit of the financial statements, a compliance review is planned and performed to express a conclusion with limited assurance as to whether, in all material respects, the activities, financial transactions and information reflected in the financial statements are in compliance with the authorities that govern them in accordance with the provisions of Article 229(6) of the Constitution and submit the audit report in compliance with Article 229(7) of the Constitution. The nature, timing and extent of the compliance work is limited compared to that designed to express an opinion with reasonable assurance on the financial statements.

Further, in planning and performing the audit of the financial statements and review of compliance, I consider internal control in order to give an assurance on the effectiveness of internal controls, risk management and overall governance processes and systems in accordance with the provisions of Section 7(1)(a) of the Public Audit Act, 2015 and submit

the audit report in compliance with Article 229(7) of the Constitution. My consideration of the internal control would not necessarily disclose all matters in the internal control that might be material weaknesses under the ISSAIs. A material weakness is a condition in which the design or operation of one or more of the internal control components does not reduce to a relatively low level the risk that misstatements caused by error or fraud in amounts that would be material in relation to the financial statements being audited may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions.

Because of its inherent limitations, internal controls may not prevent or detect misstatements and instances of noncompliance. Also, projections of any evaluation of effectiveness to future periods are subject to the risk that controls may become inadequate because of changes in conditions, or that the degree of compliance with the policies and procedures may deteriorate.

As part of an audit conducted in accordance with ISSAIs, I exercise professional judgement and maintain professional skepticism throughout the audit. I also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations or the override of internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by Management.
- Conclude on the appropriateness of Management's use of the applicable basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Council's ability to continue to sustain its services. If I conclude that a material uncertainty exists, I am required to draw attention in the auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify my opinion. My conclusions are based on the audit evidence obtained up to the date of my audit report. However, future events or conditions may cause the Council to cease to continue to sustain its services.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.
- Obtain sufficient appropriate audit evidence regarding the financial information and business activities of the Council to express an opinion on the financial statements.
- Perform such other procedures as I consider necessary in the circumstances.

I communicate with Management regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that are identified during the audit.

I also provide Management with a statement that I have complied with relevant ethical requirements regarding independence and communicate with them all relationships and other matters that may reasonably be thought to bear on my independence and where applicable, related safeguards.



FCPA Nancy Gathungu, CBS
AUDITOR-GENERAL

Nairobi




20 February, 2024

14. Statement of financial performance for the year ended 30 June 2023

	Notes	2023 Kshs	2022 Kshs
Revenue from exchange transactions			
Income from operations	6	118,412,745	80,179,717
Income from other sources	7	-	600,000
Total revenue		118,412,745	80,779,717
Expenditure			
Use of Goods and Services	8	90,477,613	67,486,764
Employee Costs	9	8,386,348	12,696,206
Remuneration of Directors	10	10,439,231	7,707,900
Depreciation and Amortization Expense	11	2,743,196	3,323,627
Repairs and Maintenance	12	2,079,576	49,250
Total Expenditure		114,125,964	91,263,747
Surplus (Deficit) for the period		4,286,781	(10,484,030)

The notes set out on pages 8 to 22 form an integral part of these Financial Statements.

The Financial Statements set out on page 1 to 5 were signed on behalf of the Members of the Council by:

		
.....
Ibrahim B. Wako Registrar/CEO	Henry M. Wandera Head of Finance ICPAK M/No:18745	Prof. Simon Kangethe Chairperson
Date 19/2/2024	Date 19/2/2024	Date 19/2/2024

**Clinical Officers Council Of Kenya
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15. Statement of financial position as at 30 June 2023

	Notes	2023 Kshs	2022 Kshs
ASSETS			
Current assets			
Cash and cash at bank	13	86,439,014	68,422,158
Deposits	15	42,500	42,500
		<u>86,481,514</u>	<u>68,464,658</u>
Non-current assets			
Property, plant and equipment	17	56,796,825	58,725,287
Intangible Assets	18	750,000	-
		<u>57,546,825</u>	<u>58,725,287</u>
Total assets		<u>144,028,339</u>	<u>127,189,945</u>
LIABILITIES			
Current liabilities			
Payables, Provisions and accruals	14	13,031,824	480,213
Total liabilities		<u>13,031,824</u>	<u>480,213</u>
Net assets		<u>130,996,515</u>	<u>126,709,732</u>
Equity			
Accumulated surplus	16	130,996,514	126,709,733
Total equity		<u>130,996,514</u>	<u>126,709,733</u>
Total net asset and liabilities		<u>144,028,339</u>	<u>127,189,945</u>

The financial statements set out on pages 1 to 5 were signed on behalf of the Members of the Council by:



Ibrahim B. Wako
Registrar/CEO

Date 19/2/2024



Henry M. Wandera
Head of Finance

ICPAK M/No:18745

Date 19/2/2024



Prof. Simon Kangethe
Chairperson

Date 19/2/2024

16. Statement of changes in net assets for the year ended 30 June 2023

	Accumulated Surplus Kshs	Total Kshs
At 1st July 2021	137,193,763	137,193,763
Surplus for the year	(10,484,030)	(10,484,030)
At 30th June 2022	126,709,733	126,709,733
At 1st July 2022	126,709,733	126,709,733
Surplus for the year	4,286,781	4,286,781
At 30th June 2023	130,996,514	130,996,514

**Clinical Officers Council Of Kenya
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17. Statement of Cash flow as at 30 June 2023

	Notes	2023 Kshs	2022 Kshs
Cash flows from operating activities:			
Receipts	6		
Indexing		10,585,000	12,070,000
Examination		20,813,465	8,360,000
Registration & Enrolment Diploma		24,240,000	9,319,500
Registration & Enrolment Degree		4,410,000	1,290,000
Internship license Dip		2,350,000	2,509,000
Internship license Bsc.		43,500	498,000
Retention		34,456,280	24,920,517
Internship license Bsc.		64,000	996,000
Foreigners Assessment/Registration fee		75,000	15,000
Private Practice license/Medical centre - General		8,924,000	7,950,000
Accreditation of Higher Diploma program		600,000	3,000,000
Curriculum of New Institutions		-	350,000
Inspections of new institutions		-	500,000
Checklist of new institutions		20,000	60,000
Assessment of students		270,000	290,000
Indexing fee/Post Basic		1,895,000	650,000
CPD Provider Appliation		-	15,000
CPD Provider Certification		-	60,000
Temporal licence (Foreigner)		60,000	-
Re-Inspection of Institutions		400,000	750,000
CPD Diary		8,652,500	4,809,700
CODE of Professional Conduct		538,500	1,752,500
Supplementary attachment Logbook		15,500	14,500
Donation from Partners		-	600,000
Total Receipts		118,412,745	80,779,717
Payments			
Use of Goods and Services		90,477,613	67,486,764
Employee Costs		8,386,348	12,696,206
Remuneration of Directors		10,439,231	7,707,900
Repairs and Maintenance		2,079,576	49,250
Total Payments		111,382,768	87,940,120
<i>Net cash from operating activities</i>		<i>7,029,977</i>	<i>(7,160,403)</i>
Cash flows from investing activities			
Purchase of PPE	17	(1,564,704)	(14,192,357)
Change in Payables & accruals	15	12,551,611	42,064
Net cash used in investing activities		10,986,907	(14,150,293)
Net increase (decrease) in cash and cash equivalents		18,016,856	(21,353,196)
Cash and cash equivalents at 1st July	13	68,422,158	89,775,354
Cash and cash equivalents at 30 June	13	<u>86,439,014</u>	<u>68,422,158</u>

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for the year ended June 30, 2023.

18. Statement of comparison of budget and actual amounts for the year ended 30 June 2023

	Original budget	Adjustments	Final budget	Actual on comparable basis	Performance difference	% Utilization	% Explanation
	a	b	c=(a+b)	d	e=(c-d)	f=d/c	
	Kshs	Kshs	Kshs	Kshs	Kshs	%	
Indexing	15,750,000	-	15,750,000	10,585,000	(5,165,000)	67%	a
Examination	18,750,000	-	18,750,000	20,813,465	2,063,465	111%	b
Registration & Enrolment Diploma	24,000,000	-	24,000,000	24,240,000	240,000	101%	
Registration & Enrolment Degree	2,500,000	-	2,500,000	4,410,000	1,910,000	176%	c
Internship license Dip	1,500,000	-	1,500,000	2,350,000	850,000	157%	d
Internship license Bsc.	500,000	-	500,000	43,500	(456,500)	9%	
Retention	27,000,000	-	27,000,000	34,456,280	7,456,280	128%	e
Internship license Bsc.	500,000	-	500,000	64,000	(436,000)	10%	
Foreigners Assessment/Registration fee	250,000	-	250,000	75,000	(175,000)	30%	f
Private Practice license/Medical centre - Gen	5,250,000	-	5,250,000	8,924,000	3,674,000	170%	g
Accreditation of Higher Diploma program	800,000	-	800,000	600,000	(200,000)	75%	h
Curriculum of New Institutions	500,000	-	500,000	-	(500,000)	0%	i
Inspections of new institutions	1,500,000	-	1,500,000	-	(1,500,000)	0%	j
Checklist of new institutions	160,000	-	160,000	20,000	(140,000)	13%	k
Assessment of students	500,000	-	500,000	270,000	(230,000)	54%	l
Indexing fee/Post Basic	2,500,000	-	2,500,000	1,895,000	(605,000)	76%	m
Inter-institutional transfer application	100,000	-	100,000	-	(100,000)	0%	n
CPD Provider Appliation	150,000	-	150,000	-	(150,000)	0%	o
CPD Provider Certification	150,000	-	150,000	-	(150,000)	0%	p
Temporal licence (Foreigner)	125,000	-	125,000	60,000	(65,000)	48%	q
Re-Inspection of Institutions	600,000	-	600,000	400,000	(200,000)	67%	r
CPD Diary	6,600,000	-	6,600,000	8,652,500	2,052,500	131%	s
CODE of Professional Conduct	1,600,000	-	1,600,000	538,500	(1,061,500)	34%	t
Supplementary attachment Logbook	25,000	-	25,000	15,500	(9,500)	62%	u
GOK recurrent Grant	67,000,000	-	67,000,000	-	(67,000,000)	100%	v
Total income	178,310,000	-	178,310,000	118,412,745	-59,897,255		w
Expenditure							
Use of Goods and Services	103,512,745	-	103,512,745	90,477,613	13,035,132	87%	x
Employee Costs	15,580,769	-	15,580,769	8,386,348	7,194,421	54%	y
Remuneration of Directors	28,822,130	-	28,822,130	10,439,231	18,382,899	36%	z
Depreciation and Amortization Expense	7,544,000	-	7,544,000	2,743,196	4,800,804	36%	a1
Repairs and Maintenance	6,545,356	-	6,545,356	2,079,576	4,465,780	32%	b2
Contracted Services	16,305,000	-	16,305,000	-	16,305,000	0%	b3
Total expenditure	178,310,000	-	178,310,000	114,125,964	64,184,036		
Surplus(deficit) for the period	-	-	-	4,286,780.97	4,286,781		

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Statement of Comparison of Budget and Actual Amounts Continued

Explanations of material variances (10% over/under) IPSAS 24.14

Revenue

- a) **Indexing.** Decline was due to court ruling stopping COC from indexing university students hence reducing the number of students being indexed.
- b) **Examination.** Increase in revenue was due to increase in the number of students doing exams after the introduction of online exams hence one can sit for exams from any locality.
- c) **Registration & Enrolment Degree.** Increase in revenue due to increase in the number of students enrolling for the program as a result of higher number of students doing and passing exams.
- d) **Internship License Dip.** Increase in revenue due to increase in the number of students enrolling for programs resulting from higher number of students enrolling for exams.
- e) **Retention.** Increase in revenue was as a result of massive and rapid campaigns following up on members to pay the licensing fee
- f) **Foreign Assessment & Registration.** Increase due to increase in the number of foreigners applying to practice
- g) **Private Practice License/Medical Centre Gen.** Increase in revenue was as a result of massive campaigns to have more facilities
- h) **Accreditation of higher Diploma programs.** The council experienced less and fewer learning facilities than was anticipated.
- i) **Curriculum of New Institution.** There was no new institution during the year unlike what the council expected.
- j) **Inspection of New institution.** There was no new institution during the year unlike what the council expected.
- k) **Checklist of new** There was no new institution during the year unlike what the council expected.
- l) **Assessment of students.** Decline due to decline in the number of students.
- m) **Indexing Post Basic.** Decline due to decline in the number of students advancing
- n) **Inter-institutional transfers.** Decline due to decline in the number of students doing transfers.
- o) **CPD provider Application.** Decline due to decline in CPD provider applications. No new applicants in the year.
- p) **CPD provider Certifications.** Decline due to decline in CPD provider applications. No new applicants in the year.
- q) **Temporal License (Foreigners).** Decline due to decline in the number of foreigners wanting to practice.
- r) **Re-inspection of Institutions.** Many institutions were compliant hence decline in the fee re-inspections.
- s) **CPD Diary.** Increase due to increase in Retention License as the payment is a package paid together.
- t) **Code of Professional conduct.** Decline is occasioned with the availability of the code of conduct online
- u) **Supplementary Attachment Logbooks.** Decline is occasioned by low numbers of students
- v) **GOK recurrent Grant.** Variance was due to failure to receive funds from the exchequer during the financial period.

Statement of Comparison of Budget and Actual Amounts Continued

Expenditure

- x.) **Use of Good and Services.** Many activities were reduced due to reduction in the GOK grant.
- y.) **Employee cost.** Personnel Instruments are still awaiting approval hence many positions are yet to be filled
- z.) **Remuneration of directors.** Many activities were not undertaken due to failure to get funding from the exchequer.
- al.) **Depreciation and Amortization.** Many activities were not undertaken due to failure to get funding from the exchequer.
- b2.) **Repair & Maintenance.** Many activities were not undertaken due to failure to get funding from the exchequer.
- b3.) **Contracted Services** Many activities were not undertaken due to failure to get funding from the exchequer.

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19. Notes to the financial statements

1. General Information

Clinical Officers Council of Kenya is established by and derives its authority and accountability from the Clinical Officers Act no. 20 of 2017. The Council is wholly owned by the Government of Kenya and is domiciled in Kenya. The Council's principal activity is to regulate training, registration, licencing and practice of all Clinical officers.

2. Statement of Compliance and Basis of Preparation

The financial statements have been prepared on a historical cost basis except for the measurement at re-valued amounts of certain items of property, plant and equipment, marketable securities and financial instruments at fair value, impaired assets at their estimated recoverable amounts and actuarially determined liabilities at their present value. The preparation of financial statements in conformity with International Public Sector Accounting Standards (IPSAS) allows the use of estimates and assumptions. It also requires management to exercise judgement in the process of applying the Council's accounting policies. The areas involving a higher degree of judgement or complexity, or where assumptions and estimates are significant to the financial statements, are disclosed in Note 5 of these financial statements.

The financial statements have been prepared and presented in Kenya Shillings, which is the functional and reporting currency of the Council.

The financial statements have been prepared in accordance with the PFM Act, the State Corporations Act, The Clinical Officers Act and International Public Sector Accounting Standards (IPSAS). The accounting policies adopted have been consistently applied to all the years presented.

3. Adoption of New and Revised Standards

- i. New and amended standards and interpretations in issue effective in the year ended 30 June 2023.

Standard	Effective date and impact:
<p>IPSAS 41: Financial Instruments</p>	<p>Applicable: 1st January 2023: The objective of IPSAS 41 is to establish principles for the financial reporting of financial assets and liabilities that will present relevant and useful information to users of financial statements for their assessment of the amounts, timing and uncertainty of an Entity's future cash flows. IPSAS 41 provides users of financial statements with more useful information than IPSAS 29, by:</p> <ul style="list-style-type: none"> • Applying a single classification and measurement model for financial assets that considers the characteristics of the asset's cash flows and the objective for which the asset is held; • Applying a single forward-looking expected credit loss model that is applicable to all financial instruments subject to impairment testing; and • Applying an improved hedge accounting model that broadens the hedging arrangements in scope of the guidance. The model develops a strong link between an

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Standard	Effective date and impact:
	Entity's risk management strategies and the accounting treatment for instruments held as part of the risk management strategy.
IPSAS 42: Social Benefits	Applicable: 1st January 2023 The objective of this Standard is to improve the relevance, faithful representativeness and comparability of the information that a reporting Entity provides in its financial statements about social benefits. The information provided should help users of the financial statements and general-purpose financial reports assess: (a) The nature of such social benefits provided by the Entity. (b) The key features of the operation of those social benefit schemes; and (c) The impact of such social benefits provided on the Entity's financial performance, financial position and cash flows.
Amendments to Other IPSAS resulting from IPSAS 41, Financial Instruments	Applicable: 1st January 2023: a) Amendments to IPSAS 5, to update the guidance related to the components of borrowing costs which were inadvertently omitted when IPSAS 41 was issued. b) Amendments to IPSAS 30, regarding illustrative examples on hedging and credit risk which were inadvertently omitted when IPSAS 41 was issued. c) Amendments to IPSAS 30, to update the guidance for accounting for financial guaranteed contracts which were inadvertently omitted when IPSAS 41 was issued. d) Amendments to IPSAS 33, to update the guidance on classifying financial instruments on initial adoption of accrual basis IPSAS which were inadvertently omitted when IPSAS 41 was issued.
Other improvements to IPSAS	Applicable 1st January 2023 <ul style="list-style-type: none"> • <i>IPSAS 22 Disclosure of Financial Information about the General Government Sector.</i> Amendments to refer to the latest System of National Accounts (SNA 2008). • <i>IPSAS 39: Employee Benefits.</i> Now deletes the term composite social security benefits as it is no longer defined in IPSAS. • IPSAS 29: Financial instruments: Recognition and Measurement. Standard no longer included in the 2023 IPSAS handbook as it is now superseded by IPSAS 41 which is applicable from 1st January 2023.

ii. **New and amended standards and interpretations in issue but not yet effective in the year ended 30 June 2023.**

Standard	Effective date and impact:
IPSAS 43	Applicable 1st January 2025 The standard sets out the principles for the recognition, measurement, presentation, and disclosure of leases. The objective is to ensure that lessees and lessors provide relevant information in a manner that faithfully represents those transactions. This information gives a basis for users of

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Standard	Effective date and impact:
	financial statements to assess the effect that leases have on the financial position, financial performance and cashflows of an Entity. The new standard requires entities to recognise, measure and present information on right of use assets and lease liabilities.
IPSAS 44: Non- Current Assets Held for Sale and Discontinued Operations	<i>Applicable 1st January 2025</i> The Standard requires, Assets that meet the criteria to be classified as held for sale to be measured at the lower of carrying amount and fair value less costs to sell and the depreciation of such assets to cease and: Assets that meet the criteria to be classified as held for sale to be presented separately in the statement of financial position and the results of discontinued operations to be presented separately in the statement of financial performance.

iii. **Early adoption of standards**

The Entity did not early – adopt any new or amended standards in the financial year

4. Summary of Significant Accounting Policies

a) Revenue recognition

The Council recognises revenue when it is probable that the future economic benefits will flow to the Council and the amount of revenue can be measured reliably.

i) Revenue from non-exchange transactions

Fees, taxes and fines

The Council recognizes revenues from fees, taxes and fines when the event occurs and the asset recognition criteria are met. To the extent that there is a related condition attached that would give rise to a liability to repay the amount, deferred income is recognized instead of revenue. Other non-exchange revenues are recognized when it is probable that the future economic benefits or service potential associated with the asset will flow to the Entity and the fair value of the asset can be measured reliably.

Transfers from other government entities

Revenues from non-exchange transactions with other government entities are measured at fair value and recognized on obtaining control of the asset (cash, goods, services and property) if the transfer is free from conditions and it is probable that the economic benefits or service potential related to the asset will flow to the Council and can be measured reliably. To the extent that there is a related condition attached that would give rise to a liability to repay the amount, the amount is recorded in the statement of financial position and realised in the statement of financial performance over the useful life of the assets that has been acquired using such funds.

ii) Revenue from exchange transactions

Rendering of services

The Council recognizes revenue from rendering of services by reference to the stage of completion when the outcome of the transaction can be estimated reliably. The stage of completion is measured by reference to labour hours incurred to date as a percentage of total estimated labour hours. Where the contract outcome cannot be measured reliably, revenue is recognized only to the extent that the expenses incurred are recoverable.

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Notes to the Financial Statements (Continued)

5. Budget information

The original budget for the Current FY was approved by the National Assembly on. Subsequent revisions or additional appropriations were made to the approved budget in accordance with specific approvals from the appropriate authorities. The additional appropriations are added to the original budget by the Entity upon receiving the respective approvals in order to conclude the final budget. Accordingly, the Entity recorded additional appropriations of 00 on the 2023 budget following the governing body's approval

The Council's budget is prepared on a different basis to the actual income and expenditure disclosed in the financial statements. The financial statements are prepared on accrual basis using a classification based on the nature of expenses in the statement of financial performance, whereas the budget is prepared on a cash basis.

6. Property, plant and equipment

All property, plant and equipment are stated at cost less accumulated depreciation and impairment losses. Cost includes expenditure that is directly attributable to the acquisition of the items. When significant parts of property, plant and equipment are required to be replaced at intervals, the Entity recognizes such parts as individual assets with specific useful lives and depreciates them accordingly. Likewise, when a major inspection is performed, its cost is recognized in the carrying amount of the plant and equipment as a replacement if the recognition criteria are satisfied. All other repair and maintenance costs are recognized in surplus or deficit as incurred. Where an asset is acquired in a non-exchange transaction for nil or nominal consideration the asset is initially measured at its fair value.

Depreciation

Depreciation is calculated on a straight line method to write off property, plant and equipment over their estimated useful lives. Depreciation is charged on pro-rata basis for assets bought during the financial year. The annual rates used are as here below;

Category	Percentage
Building	nil
Furniture and fittings	12.5
Computer	33
Software	33
Motor vehicle	25
Office equipment	12.5

7. Leases

Finance leases are leases that transfer substantially all of the risks and benefits incidental to ownership of the leased item to the Council. Assets held under a finance lease are capitalized at the commencement of the lease at the fair value of the leased property or, if lower, at the present value of the future minimum lease payments. The Council also recognizes the associated lease liability at the inception of the lease. The liability recognized is measured as the present value of the future minimum lease payments at initial recognition. Subsequent to initial recognition, lease payments are apportioned between finance charges and reduction of the lease liability so as to achieve a constant rate of interest on the remaining balance of the liability. Finance charges are recognized as finance costs in surplus or deficit. An asset held under a finance lease is depreciated over the useful life of the asset. However, if there is no reasonable certainty that the Council will obtain ownership of the asset by the end of the lease term, the asset is depreciated over the shorter of the estimated useful life of the asset and the lease term.

Notes to the Financial Statements (Continued)

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Operating leases are leases that do not transfer substantially all the risks and benefits incidental to ownership of the leased item to the Council. Operating lease payments are recognized as an operating expense in surplus or deficit on a straight-line basis over the lease term.

8. Intangible assets

Intangible assets acquired separately are initially recognized at cost. The cost of intangible assets acquired in a non-exchange transaction is their fair value at the date of the exchange. Following initial recognition, intangible assets are carried at cost less any accumulated amortization and accumulated impairment losses. Internally generated intangible assets, excluding capitalized development costs, are not capitalized and expenditure is reflected in surplus or deficit in the period in which the expenditure is incurred. The useful life of the intangible assets is assessed as either finite or indefinite.

9. Inventories

Inventory is measured at cost upon initial recognition. To the extent that inventory was received through non-exchange transactions (for no cost or for a nominal cost), the cost of the inventory is its fair value at the date of acquisition. Costs incurred in bringing each product to its present location and conditions are accounted for, as follows:

- i) Raw materials: purchase cost using the weighted average cost method.
- ii) Finished goods and work in progress: cost of direct materials and labour and a proportion of manufacturing overheads based on the normal operating capacity but excluding borrowing costs.

After initial recognition, inventory is measured at the lower of cost and net realizable value. However, to the extent that a class of inventory is distributed or deployed at no charge or for a nominal charge, that class of inventory is measured at the lower of cost and current replacement cost. Net realizable value is the estimated selling price in the ordinary course of operations, less the estimated costs of completion and the estimated costs necessary to make the sale, exchange, or distribution. Inventories are recognized as an expense when deployed for utilization or consumption in the ordinary course of operations of the Council.

10. Provisions

Provisions are recognized when the Council has a present obligation (legal or constructive) as a result of a past event, it is probable that an outflow of resources embodying economic benefits or service potential will be required to settle the obligation and a reliable estimate can be made of the amount of the obligation. Where the Entity expects some or all of a provision to be reimbursed, for example, under an insurance contract, the reimbursement is recognized as a separate asset only when the reimbursement is virtually certain. The expense relating to any provision is presented in the statement of financial performance net of any reimbursement.

Contingent liabilities

The Entity does not recognize a contingent liability but discloses details of any contingencies in the notes to the financial statements, unless the possibility of an outflow of resources embodying economic benefits or service potential is remote.

Contingent assets

The Entity does not recognize a contingent asset but discloses details of a possible asset whose existence is contingent on the occurrence or non-occurrence of one or more uncertain future events not wholly within the control of the Entity in the notes to the financial statements. Contingent assets are assessed continually to ensure that developments are appropriately reflected in the financial statements. If it has become virtually certain that an inflow of economic benefits or service potential will arise and the asset's value can be measured reliably, the asset and the related revenue are recognized in the financial statements of the period in which the change occurs.

Notes to the Financial Statements (Continued)

11. Nature and purpose of reserves

The Entity creates and maintains reserves in terms of specific requirements.

12. Changes in accounting policies and estimates

The Council recognizes the effects of changes in accounting policy retrospectively. The effects of changes in accounting policy are applied prospectively if retrospective application is impractical.

13. Foreign currency transactions

Transactions in foreign currencies are initially accounted for at the ruling rate of exchange on the date of the transaction. Trade creditors or debtors denominated in foreign currency are reported at the statement of financial position reporting date by applying the exchange rate on that date. Exchange differences arising from the settlement of creditors, or from the reporting of creditors at rates different from those at which they were initially recorded during the period, are recognized as income or expenses in the period in which they arise.

14. Related parties

The Council regards a related party as a person or an Entity with the ability to exert control individually or jointly, or to exercise significant influence over the Council, or vice versa. Members of key management are regarded as related parties and comprise the Council members, the CEO/Registrar and senior managers

15. Cash and cash equivalents

Cash and cash equivalents comprise cash on hand and cash at bank, short-term deposits on call and highly liquid investments with an original maturity of three months or less, which are readily convertible to known amounts of cash and are subject to insignificant risk of changes in value. Bank account balances include amounts held at the Central Bank of Kenya and at various commercial banks at the end of the financial year. For the purposes of these financial statements, cash and cash equivalents also include short term cash imprests and advances to authorised public officers and/or institutions which were not surrendered or accounted for at the end of the financial year.

16. Comparative figures

Where necessary comparative figures for the previous financial year have been amended or reconfigured to conform to the required changes in presentation.

17. Subsequent events

There have been no events subsequent to the financial year end with a significant impact on the financial statements for the year ended June 30, 2023.

18. Significant Judgments and Sources of Estimation Uncertainty

The preparation of the Entity's financial statements in conformity with IPSAS requires management to make judgments, estimates and assumptions that affect the reported amounts of revenues, expenses, assets and liabilities, and the disclosure of contingent liabilities, at the end of the reporting period. However, uncertainty about these assumptions and estimates could result in outcomes that require a material adjustment to the carrying amount of the asset or liability affected in future periods. State all judgements, estimates and assumptions made:

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Notes to the Financial Statements (Continued)

Estimates and assumptions.

The key assumptions concerning the future and other key sources of estimation uncertainty at the reporting date, that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year, are described below. The Entity based its assumptions and estimates on parameters available when the consolidated financial statements were prepared. However, existing circumstances and assumptions about future developments may change due to market changes or circumstances arising beyond the control of the Entity. Such changes are reflected in the assumptions when they occur. IPSAS 1.140

Useful lives and residual value

The useful lives and residual values of assets are assessed using the following indicators to inform potential future use and value from disposal:

- a) The condition of the asset based on the assessment of experts employed by the Entity.
- b) The nature of the asset, its susceptibility and adaptability to changes in technology and processes.
- c) The nature of the processes in which the asset is deployed.
- d) Availability of funding to replace the asset.
- e) Changes in the market in relation to the asset

Provisions

Provisions were raised and management determined an estimate based on the information available. Additional disclosure of these estimates of provisions is included in Notes. Provisions are measured at the management's best estimate of the expenditure required to settle the obligation at the reporting date and are discounted to present value where the effect is material.

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Notes to the Financial Statements (Continued)

	2023	2022
	Kshs	Kshs
6. Income from operations		
Indexing	10,585,000	12,070,000
Examination	20,813,465	8,360,000
Registration & Enrolment Diploma	24,240,000	9,319,500
Registration & Enrolment Degree	4,410,000	1,290,000
Internship license Dip	2,350,000	2,509,000
Internship license BSc.	43,500	498,000
Retention	34,456,280	24,920,517
Internship license BSc.	64,000	996,000
Foreigners Assessment/Registration fee	75,000	15,000
Private Practice license/Medical centre - General	8,924,000	7,950,000
Accreditation of Higher Diploma program	600,000	3,000,000
Curriculum of New Institutions	-	350,000
Inspections of new institutions	-	500,000
Checklist of new institutions	20,000	60,000
Assessment of students	270,000	290,000
Indexing fee/Post Basic	1,895,000	650,000
CPD Provider Application	-	15,000
CPD Provider Certification	-	60,000
Temporal licence (Foreigner)	60,000	-
Re-Inspection of Institutions	400,000	750,000
CPD Diary	8,652,500	4,809,700
CODE of Professional Conduct	538,500	1,752,500
Supplementary attachment Logbook	15,500	14,500
	<u>118,412,745</u>	<u>80,179,717</u>
7. Income from other sources		
Donations from Partners	-	600,000
	<u>-</u>	<u>600,000</u>

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Notes to the Financial Statements (Continued)

	2023	2022
	Kshs	Kshs
8. Use of goods and Services		
Bank charges	310,045	299,293
Bulk sms	180,000	60,000
Insurance Expenses	500,145	554,231
Internet and related costs	1,195,224	1,349,763
Motor running expenses & Fuel	1,263,304	1,451,191
Printing and stationery	13,245,215	9,555,330
Telephone and postage	687,630	891,020
Administrative Costs	-	7,423,613
Newspapers and periodicals	42,000	116,000
Audit fee	600,000	220,000
Legal fees	160,000	35,000
Consumables	-	161,600
Gifts and donations	130,000	950,200
Travelling and accommodation	2,483,962	1,048,239
Office general expenses	190,797	84,150
Hospitality and staff meals	1,393,590	344,000
Workshops, seminars and conferences	12,873,470	5,217,070
International Conference	3,081,432	-
Activities funded by Partners	-	600,000
Service charge	480,000	540,120
Electricity and water	378,471	413,147
Examinations	12,347,981	13,524,280
County Sensitization	3,230,352	5,174,400
Indexing Activities	4,230,140	2,732,250
Inspections, Surveillance & assessment	11,290,680	7,788,560
Curriculum development and reviews	4,926,600	2,846,500
Development and Reviews of policies, Strategic Plan & work plan	12,314,400	4,106,807
Local Transport, Bus fares and movements	438,875	-
Committee Activities	2,038,600	-
Advertisements and Promotions	200,000	-
Staff uniform	58,500	-
Fines and Penalties	40,000	-
Subscriptions	11,200	-
Post office box	9,450	-
Parking fee	19,700	-
Equipment hire	125,850	-
	90,477,613	67,486,764

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Notes to the Financial Statements (Continued)

	2023	2022
	Kshs	Kshs
9. Employee costs		
Salaries and Allowances	6,278,698	11,491,936
Intern Allowances	265,000	-
Telephone Allowance	300,000	-
Wages	508,500	-
Staff development	610,150	859,560
Staff Welfare	263,800	344,710
Employer statutory contributions	34,200	-
Other staff costs	126,000	-
	<hr/>	<hr/>
	8,386,348	12,696,206

10. Remuneration of Directors

Sitting allowance	2,220,004	5,047,550
Accommodation allowance	-	534,050
Lunch allowance	-	320,000
Honoraria	759,000	480,000
Transport reimbursement	430,637	704,000
Board Training	3,053,300	622,300
DSA Allowance	3,650,400	-
Airtime Allowance	325,890	-
	<hr/>	<hr/>
	10,439,231	7,707,900

**Clinical Officers Council of Kenya
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Notes to the Financial Statements (Continued)

	2023	2022
	Kshs	Kshs
11. Depreciation and Amortization		
Furniture and fittings	297,950	297,909
Computer and accessories	382,698	275,653
Motor Vehicles	2,062,549	2,750,065
	<u>2,743,196</u>	<u>3,323,627</u>
12. Repairs & maintenance		
Machinery and office equipment repairs	25,800	49,250
ICT Equipment repairs	209,720	-
Motor Vehicle	1,238,799	-
Building repairs	78,910	-
Software maintenance	401,000	-
Computer consumables and accessories	125,347	-
	<u>2,079,576</u>	<u>49,250</u>
13. Cash and cash at Bank		
Absa Bank Kenya Ltd [Ac No.0756597833]	14,126,107	16,623,525
Absa Bank Kenya Ltd [Ac No.2047487970]	2,074,811	-
Cooperative Bank of Kenya [Ac No.01143039922700]	274,170	51,646,450
Cooperative Bank of Kenya [Ac No.01102039922700]	67,832,775	-
Kenya Commercial Bank	8,246	1,183
Mpesa Account [Pay bill No.]	2,122,906	151,000
	<u>86,439,014</u>	<u>68,422,158</u>

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Notes to the Financial Statements (Continued)

14. Payables, Accruals and Provisions

Differed Income	12,126,000	-
Payables and accruals	<u>305,824</u>	<u>260,213</u>
	<u>13,031,824</u>	<u>480,213</u>

15. Deposits

KPLC Meter Deposit	<u>42,500</u>	<u>42,500</u>
	<u>42,500</u>	<u>42,500</u>

16. Accumulated fund

Balance brought forward	126,709,733	137,193,763
Surplus for the period	<u>4,286,781</u>	<u>(10,484,030)</u>
Balance carried forward	<u>130,996,514</u>	<u>126,709,733</u>

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Notes to the Financial Statements (Continued)

18 Property, Plant & Equipment -30th June 2023

	BUILDING & LEASEHOLD IMPROVEMENTS	MOTOR VEHICLE <u>KSHS</u>	COMPUTERS <u>KSHS</u>	EQUIPMENT, FURNITURE & FITTINGS <u>KSHS</u>	TOTAL <u>KSHS</u>
COST/VALUATION					
As at 1st July, 2022	47,746,540	18,639,460	2,827,070	5,484,323	74,697,393
Additions	-		516,500	298,204	814,704
As at 30th June, 2023	47,746,540	18,639,460	3,343,570	5,782,527	75,512,097
DEPRECIATION					
As at 1st July, 2022	-	10,389,266	2,183,879	3,398,931	15,972,076
Charge for the year	-	2,062,549	382,698	297,950	2,743,196
As at 30th June, 2023	-	12,451,815	2,566,577	3,696,881	18,715,272
NET BOOK VALUE					
As at 30th June, 2023	47,746,540	6,187,646	776,993	2,085,647	56,796,825
As at 30th June, 2022	47,746,540	8,250,194	643,191	2,085,392	58,725,317

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Notes to the Financial Statements (Continued)

19. Intangible Assets-30th June 2023

	Software	Totals
COST/VALUATION		
As at 30th July, 2022	-	-
Additions	750,000	750,000
NETBOOK VALUE		
As at 30th June, 2023	<u>750,000</u>	<u>750,000</u>

20. Cash Generated from Operations

	2023 Kshs	2022 Kshs
Cash flows from operating activities:		
Surplus for the period	4,286,781	(10,484,030)
Adjustments for:		
Depreciation	2,743,196	3,323,627
Operating profit before working capital changes	7,029,977	(7,160,403)
Changes in operating assets and liabilities:		
Increase / (decrease) in payable	-	42,064
Increase / (decrease) in provisions	<u>12,551,611</u>	<u>-</u>
Net cash from operating activities	<u>19,581,588</u>	<u>(7,118,339)</u>

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Notes to the Financial Statements (Continued)

21. Events after the Reporting Period

There were no material adjusting and non- adjusting events after the reporting period.

22. Ultimate and Holding Entity

The Entity is a State Corporation/ or a Semi- Autonomous Government Agency under the Ministry of Health. Its ultimate parent is the Government of Kenya.

23. Currency

The financial statements are presented in Kenya Shillings (Kshs) rounded to the nearest Kshs.