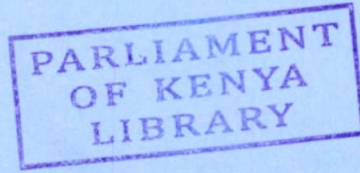


REPUBLIC OF KENYA



REPUBLIC OF KENYA



214

REPORT

OF

THE AUDITOR-GENERAL

ON

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KIANYAGA SUB COUNTY LEVEL 4 HOSPITAL

FOR THE YEAR ENDED  
30 JUNE, 2025

COUNTY GOVERNMENT OF KIRINYAGA



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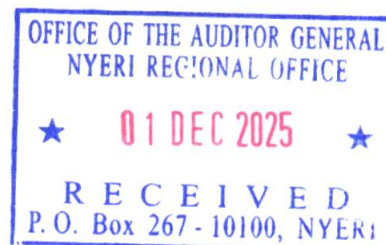
# KIANYAGA SUB COUNTY LEVEL 4 HOSPITAL (Kirinyaga County Government)

ANNUAL REPORT AND FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30<sup>TH</sup> JUNE 2025

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



*Kianyaga Sub County Level 4 Hospital (Kirinyaga County Government)  
Annual Report and Financial Statements for The Year Ended 30<sup>th</sup> June 2025*

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### **1. Acronyms & Glossary of Terms**

CSR	Corporate Social Responsibility
OSHA	Occupational Health & Safety Act
PFMA	Public Financial Management Act
MED SUP	Medical Superintendent
Fiduciary Management	Key management personnel who have financial responsibility in Kianyaga Sub County Hospital.
CHMT	County Health Management Team
CRF	County Revenue Fund

**2. Key Entity Information and Management**

**(a) Background information**

Kianyaga Sub-County Hospital is a level 4 hospital established under gazette notice number Vol.CXXIV-No.53 and is domiciled in Kirinyaga County under the Health Department. is governed by a Hospital Management Team.

**(b) Principal Activities**

The principal mandate of the hospital is to provide quality, affordable, efficient and effective health care services.

Vision- be a centre of excellence in providing timely, quality and affordable health services.

Core Values-The core values are Professionalism, Respect, dignity, courtesy, integrity, empathy, transparency and accountability.

**(c) Key Management**

's management is under the following key organs:

- County department of health
- Hospital Management Committee
- Hospital Management Team
- Accounting Officer/ Hospital Manager

**(d) Fiduciary Management**

The key management personnel who held office during the financial year ended 30<sup>th</sup> June 2025 and who had direct fiduciary responsibility were:

<b>No.</b>	<b>Designation</b>	<b>Name</b>
1.	Hospital Manager	<b>Dr.Irene Gatumbi</b>
2.	Hospital Administrative Officer (HAO)	<b>Mary Mithamo</b>
3.	Head of HPTs	<b>Dr.Dancun Githuku</b>
4.	Nursing Services Manager	<b>Nancy Muthike</b>
5.	Medical social Worker	<b>Evalyne Kimani</b>
6.	Health Records and information Officer	<b>Erick Mutugi</b>
7.	Clinical Services In charge	<b>Lucy Kariuki</b>
8.	Public Health Officer	<b>Mary Kinyanjui</b>
9.	Radiology/ Imaging	<b>Patrick Miriti</b>

**(e) Fiduciary Oversight Arrangements**

operates under a multi-layered fiduciary oversight framework designed to safeguard resources, ensure compliance with relevant laws and regulations, and promote transparency in service delivery. The following oversight mechanisms are in place:

- **Clinical Research and Standards Committee**

Provides guidance on clinical quality, adherence to national standards, and the integration of evidence-based practices into hospital operations. The committee ensures that resources dedicated to patient care are used efficiently and meet ethical and professional requirements.

- **Audit Committee**

Oversees the internal control environment and reviews financial management processes to ensure prudent utilization of funds. The committee works closely with internal and external auditors to monitor compliance with applicable legislation and standards, and to strengthen accountability mechanisms.

- **Risk Committee**

Monitors institutional risks including financial, operational, clinical, and reputational risks. The committee advises the Board of Management on mitigation strategies and ensures that risk management practices are integrated into day-to-day operations.

- **County Assembly Oversight**

As a devolved health facility, is subject to oversight by the County Assembly, particularly through the relevant sectoral committees. These committees review budget allocations, expenditures, and policy implementation to ensure alignment with county priorities and statutory requirements.

- **Parliamentary Committees**

also falls under the purview of national parliamentary committees such as the Public Accounts Committee and the Health Committee, which may review its performance, audit reports, and compliance with national health and financial regulations.

**Other Oversight Committees**

From time to time, is subject to review by special intergovernmental or donor-linked oversight bodies, including those focusing on procurement, ethics, or sector-specific funding streams. These committees provide additional layers of scrutiny to ensure transparency, accountability, and efficient use of public resources.

**Key Entity Information and Management (continued)**

**(f) Entity Headquarters**

P.O. Box 240-10301  
Kianyaga, Kenya.  
Along Kianyaga-Kutus Road

**(g) Entity Contacts**

Telephone: (+254) 113638937  
E-mail: kianyagahospi@gmail.com

**(h) Entity Bankers**

Equity Bank  
Kagio Branch

KCB bank  
Kerugoya Branch

**(i) Independent Auditors**

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





**(j) Principal Legal Adviser**

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

**(k) County Attorney**


P.O. Box. 260  
Kutus, Kenya

**3. Hospital Management Committee**

Ref	Directors	Details
1.	 Jefitha Daniel Njagi Gacanja	Position -Chairperson Academic Qualification-Higher Diploma in Medical Laboratory Technology Experience-49 Years as a civil servant
2.	 Lemmy Douglas Munene	Position: Health Business Representative Academic qualifications: BSc Arts Age: 43 years Experience: 5 years in Banking
3.	 Nancy Wakabari Murithii	Position—PWD Representative Academic Qualification-CPA 1 Experience-Worked as Cashier
4.	 Olive Karimi Jomo	ACADEMIC QUALIFICATIONS: PTE CERTIFICATE, DEGREE ON GOING WORK EXPERIENCE: TEACHING FROM 2009
5.	 Esther Wanjiku Macai	Dip in Business Management Work experience Ng-Cdf - Management Committee 2017_2020 Communication and Liaison Dep-Kirinyaga County 2021- to date

*Kianyaga Sub County Level 4 Hospital (Kirinyaga County Government)*  
*Annual Report and Financial Statements for The Year Ended 30<sup>th</sup> June 2025*

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6.	 Entity Secretary	DR. IRENE GATUMBI BACHELOR'S DEGREE OF PHARMACY HOSPITAL MANAGER AGE: 35 4 years' experience as a HM
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**4. Key Management Team**

<b>Management</b>	<b>Details</b>
 <p><b>Hospital Manager</b></p>	<p><b>Name:</b> Dr. Irene Gatumbi  <b>Academic Qualification:</b> Bachelor's Degree in Pharmacy  <b>Age:</b> 35            4 years as a Hospital Manager</p>
 <p><b>Hospital Administrative Officer</b></p>	<p><b>Name:</b> Mary Mithamo  <b>Academic Qualification:</b> Degree in Business Administration and Management  <b>Age:</b> 54  <b>Professional Experience:</b> 14 years as a Hospital Administrator</p>
 <p><b>Head of supply chain</b></p>	<p><b>Name:</b> Dr. Dancun Murithii  <b>Position:</b> Senior Pharmacist  <b>Academic Qualification:</b> Bachelor's Degree in Pharmacy  <b>Professional Experience:</b> 10 years as a Senior Pharmacist</p>
 <p><b>Nursing Services Manager</b></p>	<p><b>Name:</b> Nancy Wangithi Muthike  <b>Age:</b> 56  <b>Academic Qualification:</b> Kenya Certificate of Secondary School Education  <b>Professional Experience:</b> 3 years as a Nurse Manager</p>
 <p><b>Health Records and information Officer</b></p>	<p><b>Name:</b> Erick Mutugi Wairimu  <b>Age:</b> 34  <b>Academic Qualification:</b> BSc in Health Records</p>

	<p>and Information Science</p> <p><b>Professional Experience:</b></p> <ul style="list-style-type: none"> <li>• 11 years as a Health Records and Information Officer</li> </ul>
 <p><b>Clinical Services Incharge</b></p>	<p><b>Name:</b> Lucy Kariuki</p> <p><b>Age:</b> 50</p> <p><b>Academic Qualification:</b> BSc; Higher Diploma in Paediatrics</p> <p><b>Professional Experience:</b> 26 years of clinical experience</p>
 <p><b>Public Health Officer</b></p>	<p><b>Name:</b> Mary Kinyanjui</p> <p><b>Date of Birth:</b> 01.01.1970</p> <p><b>Academic Qualification:</b> Diploma</p> <p><b>Professional Experience:</b> 26 years as a Public Health Officer</p>
 <p><b>Laboratory Services Incharge</b></p>	<p><b>Name:</b> Agnes Njagi</p> <p><b>Age:</b> 40</p> <p><b>Academic Qualification:</b> Diploma in Medical Laboratory Technology</p> <p><b>Professional Experience:</b> 11 years</p>

**5. Chairman’s Statement**

I am pleased to present the Annual Report and Financial Statements of Kianyaga Sub County Hospital for the year ended 30th June, 2025.

Committee has continued to discharge its oversight mandate which ensures that delivers quality, accessible, and sustainable health services to the community. In line with our functions, the following key areas were addressed during the period under review:

The Committee successfully reviewed and approved the four hospital’s quarterly budgets, by ensuring that they were aligned with county department of health priorities and efficient utilization of resources. The Budgets were in line with the Kirinyaga County FIF Act of 2023. The committee’s efforts in community engagement have led to an improved hospital utilisation during the period under review.

During the period under review, managed to sustain a functional and accessible health infrastructure by timely payment of utility bills. Additionally, there was adequate availability of resources required for efficient and timely delivery of health care services.

Through these efforts, Kianyaga Sub County Hospital registered notable progress, including expansion of outpatient and maternity services, strengthening of referral systems, and improvements in health information systems for better patient management.

On behalf of the Committee, I extend my appreciation to the County Government of Kirinyaga, the leadership of the County Department of Health, hospital staff, and community stakeholders for their invaluable support. Together, we remain committed to ensuring that continues to provide efficient, equitable, and quality healthcare to the people of Kianyaga.



.....

**Jefitha Daniel Njagi Gacanja**  
**Chairman, Health Management Committee**

## **6. Report of manager**

Presented herein is the Annual Report and Financial Statements of Kianyaga Sub County hospital for the year ended 30 June, 2025.

Kianyaga Sub-County Hospital is a level 4 hospital established under gazette notice number Vol.CXXIV-No.53 and is domiciled in Kirinyaga County, Kirinyaga East Sub County under the Health Department.

's core mandate is to provide quality ,affordable, efficient and effective health care services.

The current staff establishment is 113 staff members, distributed in various service delivery points. This number is expected to increase upon completion and operationalization of the medical complex which is currently under construction. The Key governing entity in is the Health Management Committee which comprises Heads of departments.

During the period under review, Key Achievements (FY 2024/25):

**Electricity:** Ksh 758,835 spent on timely payment of electricity bills to ensure uninterrupted power supply.

**Motor Vehicles:** Ksh 1,846,050 utilized for regular ambulance maintenance, improving emergency response capacity at Kianyaga Sub-County Hospital.

**Water Supply:** Ksh 380,350 allocated for consistent settlement of water bills, guaranteeing reliable water access for hospital operations.

**Casual Workers:** Ksh 1,055,760 utilized for monthly payment of wages to 16 casual workers, supporting essential hospital operations and staff retention.

**Outpatient Records:** 28,762 outpatient cards procured to improve patient data management.

**Inpatient Records:** 2,402 inpatient medical files procured, ensuring proper documentation and continuity of care.

**Stock Management:** Achieved zero months of stock-out for medicines, non-pharmaceuticals, and food supplies.

**Hospital Linen:** Bedding and linens procured at a cost of Ksh 3,793,250 to improve patient comfort and infection control.

**Patient Nutrition:** Patient food procured and fully paid at a cost of Ksh 5,224,600, ensuring continuous meal provision.

These expenditures directly contributed to uninterrupted hospital operations, improved patient care, and enhanced accountability in resource utilization. Moving forward, prudent financial management, timely disbursement of funds, and continued stakeholder support will remain key in sustaining and scaling the gains achieved.



.....  
**Name; Dr. Irene Wanjiku Gatumbi**  
**Secretary to the Board**

**7. Statement of Performance Against Predetermined Objectives**

*Kianyaga Subcounty Level 4 Hospital* has 5 strategic pillars/ themes/issues and objectives within the current Strategic Plan for the FY 2024- FY 25 These strategic pillars/ themes/ issues are as follows:

1. Health Infrastructure
2. Health Workforce
3. Health Products and Technologies
4. Health Information
5. Health Leadership and Governance

*Kianyaga Subcounty Level 4 Hospital* develops its annual work plans based on the above pillars/Themes/Issues. Assessment of the Board’s performance against its annual work plan is done on a quarterly basis. *Kianyaga Sub County Level 4 Hospital* achieved its performance targets set for the FY 2024/2025 period for its 8 strategic pillars, as indicated in the diagram below:

<b>Strategic Pillar/Theme/Issues</b>	<b>Objective</b>	<b>Key Performance Indicators</b>	<b>Activities</b>	<b>Achievements</b>
Health Infrastructure	To ensure functional and accessible health infrastructure	Timely payment of electricity	Monthly Payment of Electricity at	Ksh 758,835 was used for payment of electricity bills
		Availability of well-maintained Motor vehicles at the facility	Regular Maintenance of Motor vehicles at Kianyaga SC Hospital	Ksh 1,846,050 was used for maintenance of ambulance for Kianyaga SC Hospital
		Timely payment of water bills	Regular payment of water bills.	Kshs 380,350 was used to pay for water bills for the facility.

*Kianyaga Sub County Level 4 Hospital (Kirinyaga County Government)  
Annual Report and Financial Statements for The Year Ended 30<sup>th</sup> June 2025*

Health Workforce	To attraction & retention of Motivated health workforce	Number of casual workers paid	Monthly Payment of 16 casual workers wages	Kshs 1,055,760 was used to pay 16 casual workers for the facility
Health information System	<b>To strengthen health management information services</b>	<b>Number of Inpatient file procured</b>	<b>Purchase of medical in patient medical files</b>	<b>28762 outpatients card were procured</b>
		<b>Number of outpatients card procured</b>	<b>Purchase of outpatient cards</b>	<b>2402-inpatient medical files were procured</b>
Health Products and Technologies	<b>To ensure availability of Tracer essential medicine and medical supplies</b>	<b>Zero months of stock out in medical,non pharms supplies and food supplies</b>	<b>Purchase of bed linen for kianyaga Hospital</b>	<b>Bedding and linens purchased for Ksh 3,793,250</b>
			<b>Timely Procurement of patient foods</b>	<b>100%-Patients food worth of 5,224,600 was procured and paid.</b>
Leadership and Governance	<b>To ensure well coordinated and mananged health services.</b>	<b>Functional hospital board</b>	<b>Hold quarterly committee meeting</b>	<b>100%-Total of Ksh 83,500 was paid as committee allowances.</b>

## **8. Corporate Governance Statement**

The 8-membership Management Committee (HMC) of Kianyaga Sub County Hospital Facility was established under the Kirinyaga County Health Services Act, 2016.

management Committee comprise of not less than 7 and not more than 9 members as follows;

- a) A chairperson appointed by the Governor
- b) Hospital Manager who is the secretary to the Committee
- c) other members appointed by the CECM-Health;
  - A designate of the Chief officer
  - One person with experience in finance and administration from within the Sub County
  - One person representing youth
  - One person representing faith-based organizations; and
  - One person representing persons living with disability nominated by a joint forum of their organizations in the County or Subcounty
  - One person nominated by joint forum of health professional bodies in the County or Subcounty, who is not a public officer
  - One Person nominated by women organizations involved in provision of health services in the county or subcounty

The Committee shall—

- a) Approve budgets, programmes and plans of the health facilities;
- b) prepare the Fund's annual budget and plan to be adopted by the Board;
- c) formulate strategies on resource mobilization by health facilities management committees;
- d) resolve any conflicts that arise among health facilities whose nature is the allocation of resources, membership of the committees or joint programmes;
- e) inspect health facilities, prepare reports and forward them to the Management Committee for gazettelement;
- f) identify implementation challenges and seek corrective actions;
- g) make policy recommendations on cost sharing, public awareness of health and administration of the Fund through the Chairperson of the Management Committee.

**9. Management Discussion and Analysis**

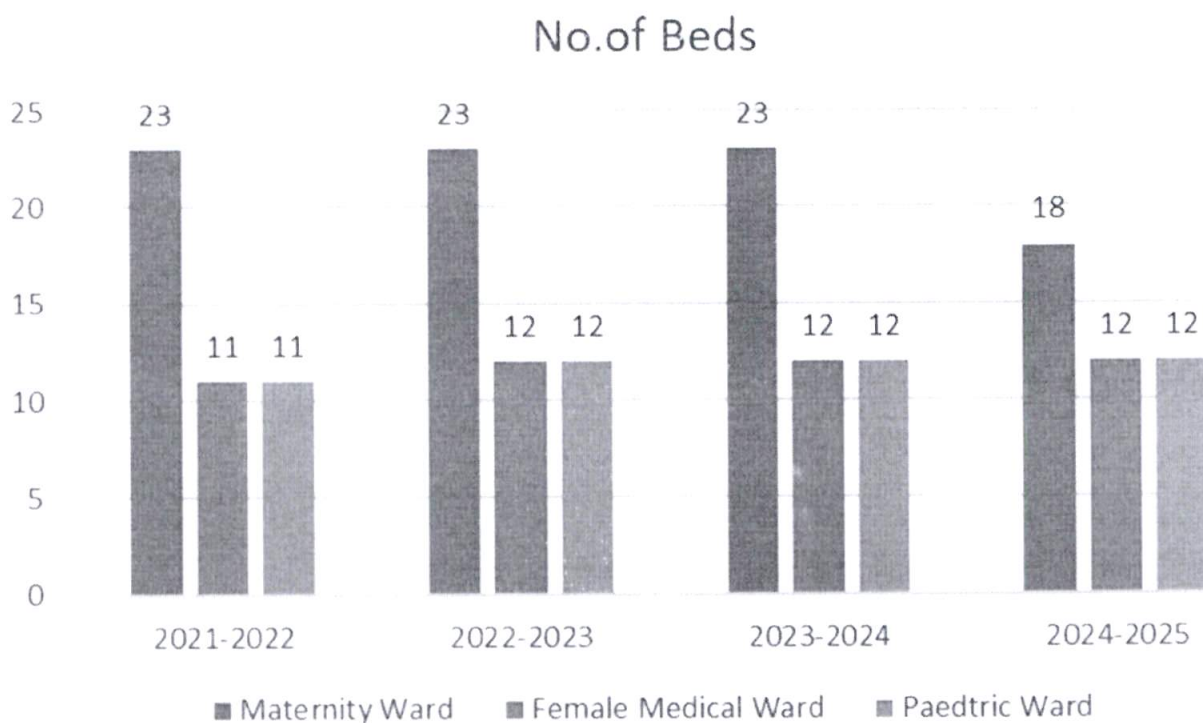
**1. Bed Capacity**

Kianyaga Sub-County Hospital was initially established as a Health Centre with a total bed capacity of 8 beds. Over the years, there has been significant population growth within its catchment area, resulting in increased demand for healthcare services. In response, the National Government relocated and upgraded the facility to a Level 4 Hospital.

By June 2025, had a total of 42 beds, distributed across the existing three wards, namely Maternity, female and paediatric wards.

The County government of Kirinyaga is currently implementing the construction of a 120-bed capacity medical complex. Upon completion, the total projected hospital bed capacity will be 162 beds, significantly improving its ability to accommodate Male patient admissions and reduce referrals.

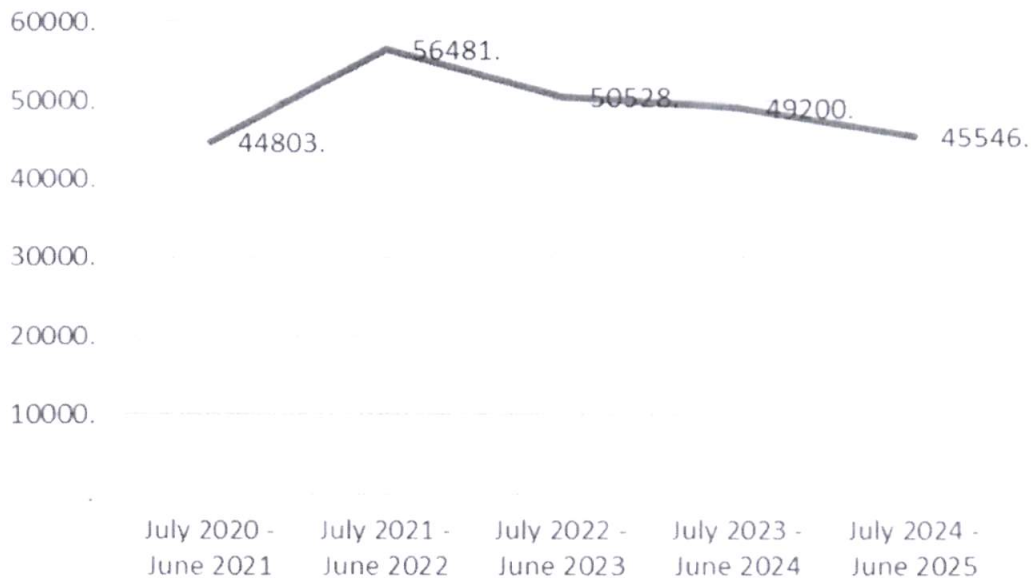
The graph below illustrates bed capacity at the facility over the last four financial years.



**Kianyaga Hospital Outpatient Attendance**

Outpatient attendance-the care a patient receives at a healthcare facility without being admitted to a hospital bed. This includes visits to a doctor's office, clinic, or emergency department where the patient is not admitted

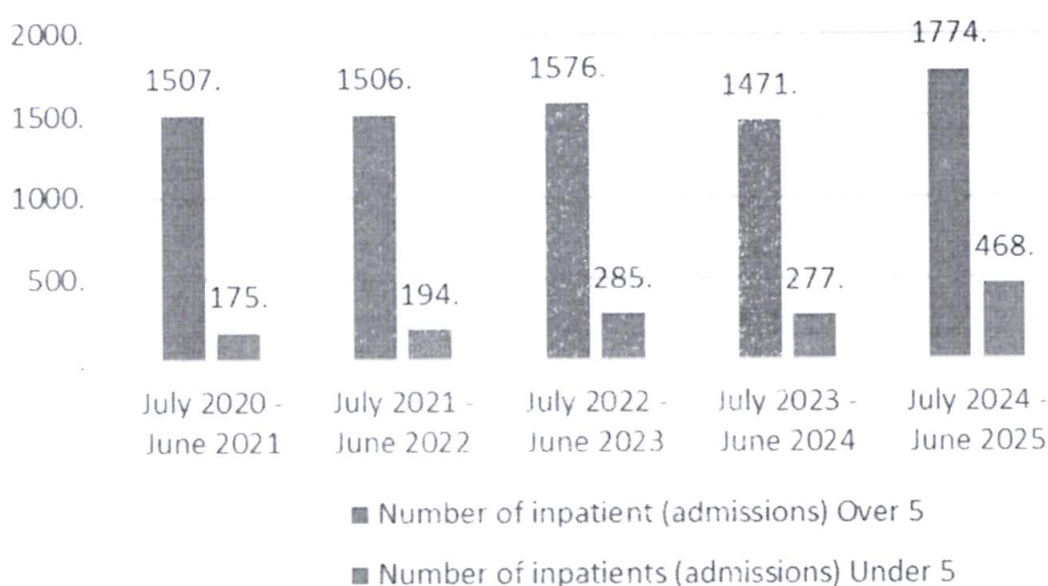
**Total Outpatient attendance Workload**



**Discussion**

- ❖ *Over the years the workload of the facility has been on decline.*
- ❖ *This might be attributing the fact that there are three new facilities have been operationalised within the catchment area of Kianyaga Hospital.*
- ❖ *The ongoing construction of the medical complex will further improve the outpatient Services.*

### Inpatients Admissions Report for Under 5 and Over 5



#### **Discussion**

- ❖ The facility has got only admitting ward that's i.e Maternity, Female Ward and Paediatrics Ward
- ❖ In this presentation over admission have been on increase.
- ❖ Under 5 admissions also have been on increase

#### **Accident and Emergency Report**

Currently, Kianyaga Sub-County Hospital does not have a designated standalone Accident and Emergency (A&E) Department. However, accident and emergency cases are attended to at the Outpatient department (OPD) on a need's basis after which, they are referred to Kerugoya County Referral hospital for further surgical management.

Notably, the upcoming medical complex under construction will include a fully equipped Accident and Emergency Department. Once completed and operationalized, this unit will significantly enhance 's capacity to manage emergency cases more effectively and in line with the standards expected of a Level 4 health facility.

#### **Specialised Clinic Attendance**

**Kianyaga Sub County Level 4 Hospital (Kirinyaga County Government)**  
**Annual Report and Financial Statements for The Year Ended 30<sup>th</sup> June 2025**

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Specialised services are expertise services that mostly are outpatient services. The facility offers the following specialised services

- Eye Clinic services
- TB Services
- Comprehensive Care Services
- Occupational Therapy
- Physiotherapy
- Medical Outpatient Clinics
- Obs/Gynae Clinic
- Nutrition Services
- Dental Services

The table below show the attendances of the above services

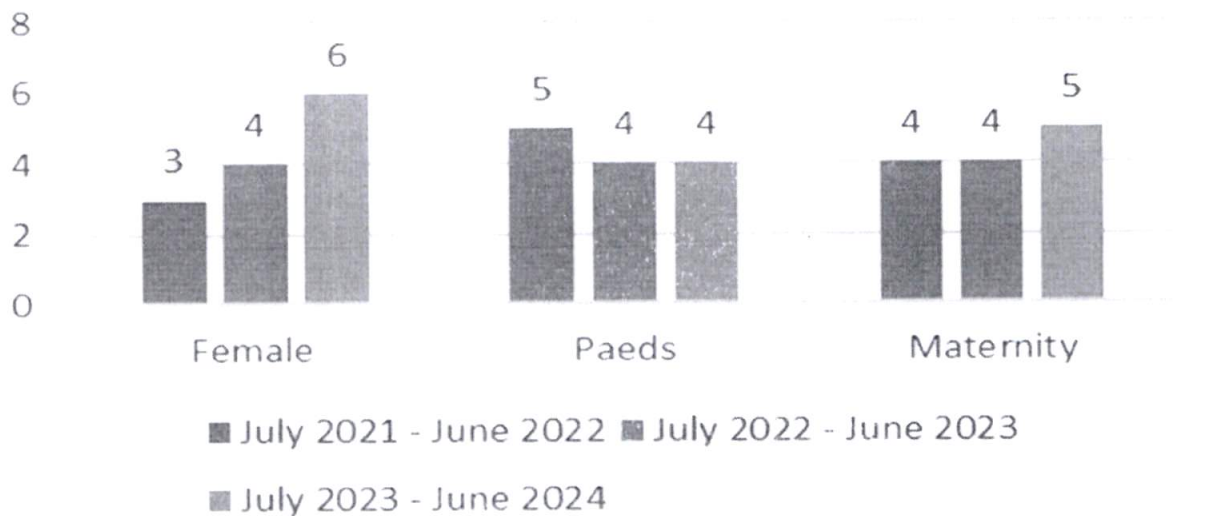
<b>Indicator</b>	<b>July 21-June22</b>	<b>July 22-June23</b>	<b>July 23-June24</b>	<b>July 24-June25</b>
Eye Clinic Attendance	730	644	1010	553
Comprehensive Care Clinic Attendance	487	496	516	543
Nutrition Clinic attendance	643	510	720	1163
Medical Attendance	1794	2071	2132	2657
Obs/Gynae Attendance	1571	1700	1888	1523
Occupational therapy attendance	509	1235	1276	640
Physiotherapy attendance	1308	1067	1258	1075
TB Clinic attendance	319	464	538	450

**Average length of Stay**

- 1) It refers to the average number of days a patient stays in a hospital. It's also indicating the quality-of-care providers and efficient use of hospital resources. A higher number of Length of stay may indicate poor service delivery.
- 2) Kianyaga Hospital has an average stay of 4 days for all inpatients cases of hospitalisation.

- 3) Paedtrics ward has the highest number of ALOs for all the financial years.
- 4) The table below shows the ALOS in days for the previous financial years.

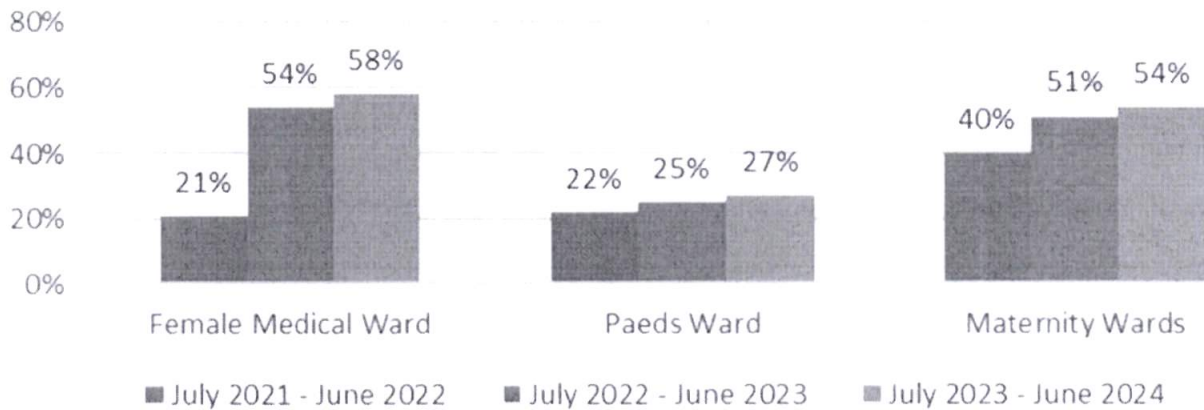
### Average Length of Stay in Days



### Bed Occupancy Rate

- 1) Bed occupancy rate is the percentage of hospital beds that are occupied by patients at any given time during the inpatient stay.
- 2) Bed Occupancy rate assess the effectiveness of hospital resources
- 3) From the graph below the average occupancy for female ward was 31%, Paediatrics had an occupancy of 52% and for Maternity had occupancy of 48%
- 4) The overall average occupancy for the facility was 80%

### Kianyaga Hospital Bed Occupancy Rate



#### Mortality Rate

##### 1) Maternal Deaths

Only three maternal deaths have occurred in the last four financial years. Two occurred in the financial year 2022-2023 and one occurred in Fy 23-24. All the three maternal deaths have been audited

##### Female Ward Deaths

Total of 63 deaths have occurred in the Female medical ward as shown below. Fy year 23-24 had the highest number of deaths totaling to 33 while Fy 24-25 had the least number of death 9

Ward Name	Maternal Deaths	In Patient Medical Death	Paedtrics Death	Totals
July 21-June22	0	10	0	10
July 22-June 23	2	16	4	22
July 23-June 24	1	28	4	33
July 24-June 25	0	9	0	9
Totals	3	63	8	74

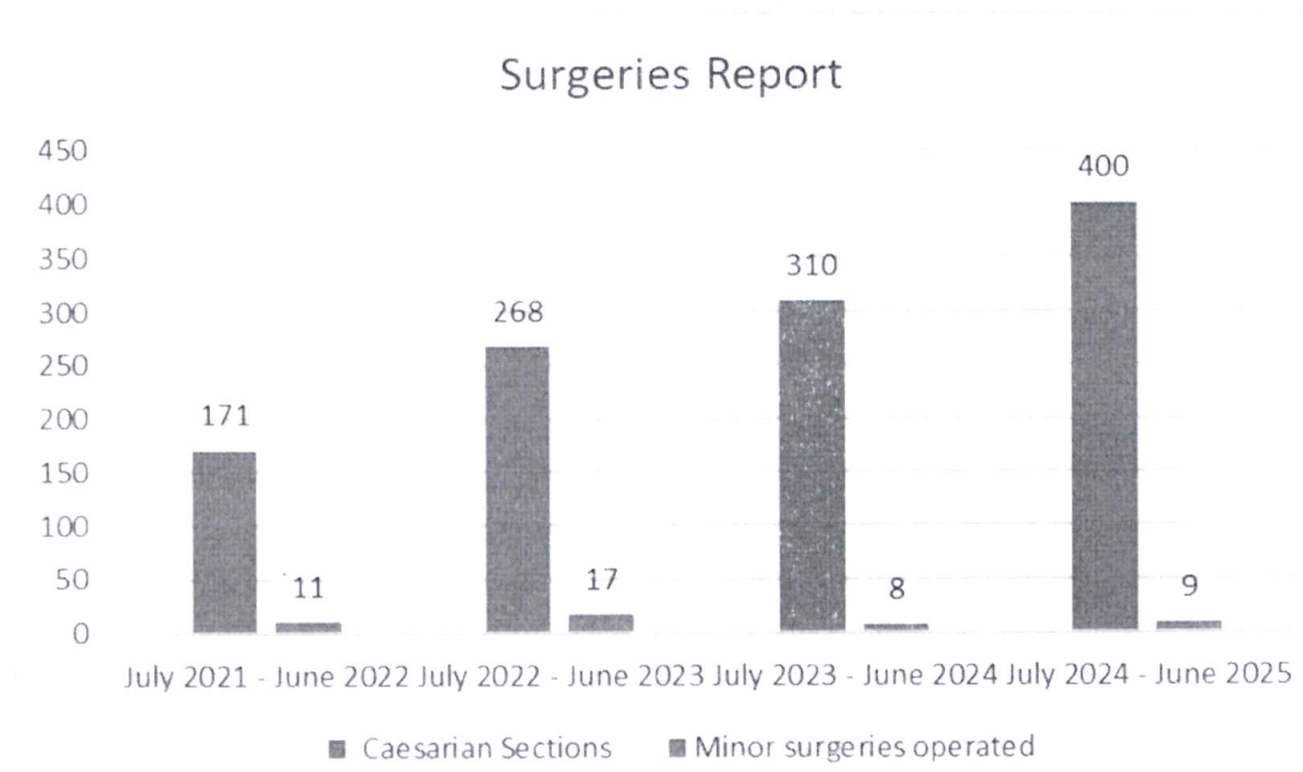
#### Surgical Theatre Utilisation

Though has functional theatre only Minor surgeries and Caesarean Sections are performed due to the following reasons;

- I. Lack of Surgical Wards
- II. Lack of surgical specialist
- III. Inadequate equipment to perform surgeries in the theatre

However, this will be reversed after the completion of the medical complex and posting of the surgical specialist in the facility.

The chart below shows the number of surgeries done at the facility



**Sponsor and Partnerships**

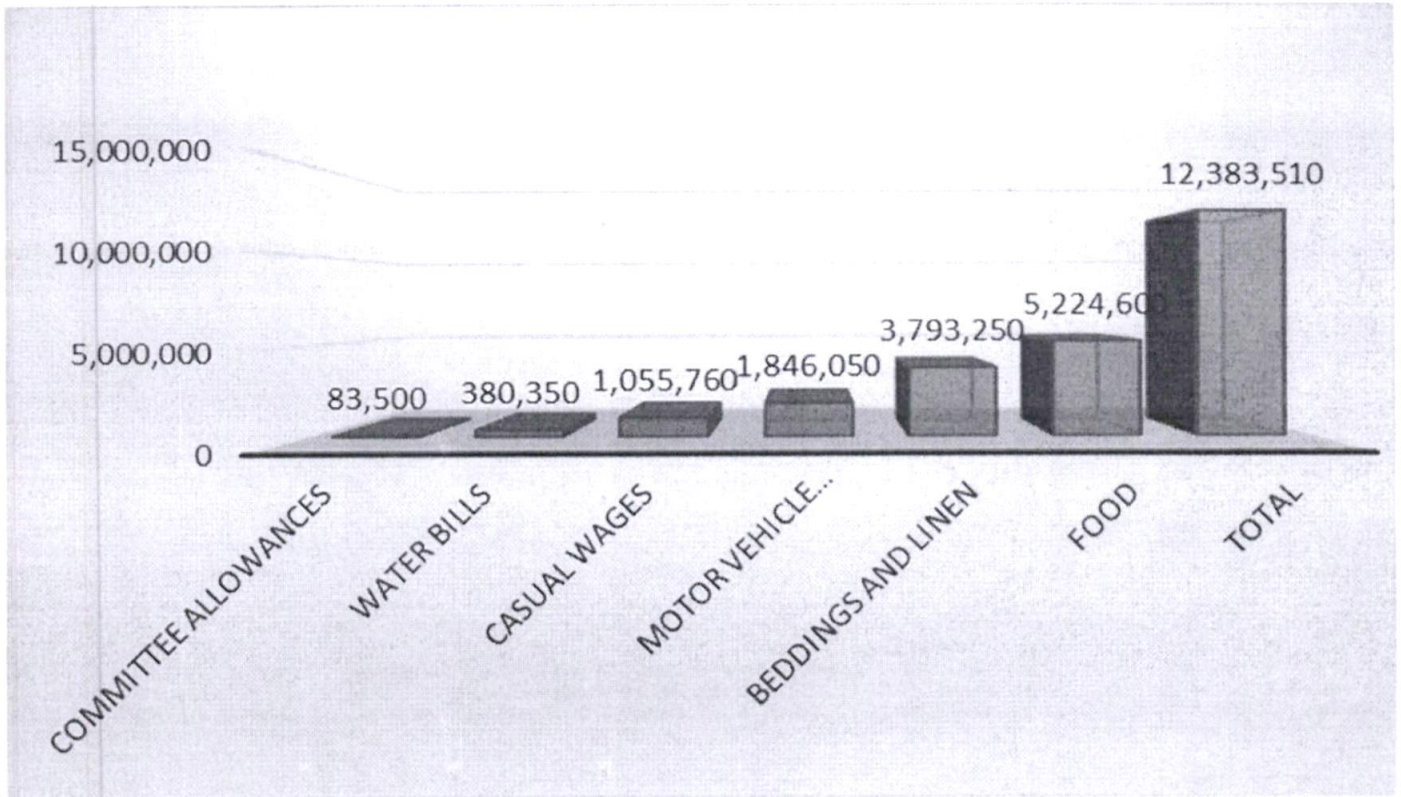
The Kianyaga Welfare Group donated litter bins to improve sanitation.

**Financial performance that includes: -**

1. Revenue sources,  
has the following revenues sources
  - ❖ Out of pocket payment
  - ❖ Medical schemes such Kinga ya Mkulima, MTIBA
  - ❖ Social Health Authority
- 2 Utilisation of funds etc

**Kianyaga Sub County Level 4 Hospital (Kirinyaga County Government)**  
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- ❖ The chart below shows the utilisation of funds in the FY 2024/2025. A total of KShs 12,383,510 used for provision of services.
- ❖ Food and Ration had the highest expenditure while committee allowances had the least allocation for the entire year.



## **10. Environmental And Sustainability Reporting**

### **i) Sustainability strategy and profile**

**Kianyaga Subcounty Level 4 Hospital has put the following measure in place to ensure sustainability;**

- ❖ Continues health education to market our services-Every morning before the start of all service provision there are scheduled continuing health education on various topics. This interaction between the health care provider create confidence to the clients thus creating friendly environment between the health care provider and the patient. This in return make the patient at ease in seeking the services in our hospital
- ❖ Engaging the CHPs to sell Kianyaga Hospital brand name as good hospital-There are deliberate efforts through the help of the Community Health Volunteers to market the services offered by the institution to the members of the public. Community Health Volunteers acts as the link between the community and the health care provider if they carry negative information about the facility its will be have negative impact in the community and vice versa
- ❖ Digitalisation of system to minimise revenue linkages- adopted E-Money mode of payment thus eliminating use of cash payment. Where there is no interaction between human beings handling cash payment there is a decrease in loss of money. This is because the clients pay directly to the bank and the cashier has got no control over it.
- ❖ Maximising claiming rate to ensure more reimbursement. -The more claims are made to the insurance companies the more the rate of reimbursement hence increasing the revenues flows.
- ❖ Encouraging our clients to register with SHA and other medical insurances.

### **ii) Environmental performance**

The environmental factors in Kianyaga Level 4 hospital include elements such as air quality, water quality, noise levels, lighting, temperature, humidity, and aesthetics, all of which significantly influence patient recovery, staff well-being, and the prevention of healthcare associated infections. Proper sanitation, effective waste management, adequate ventilation, and a well-designed, comfortable built environment are crucial for ensuring a safe and functional hospital. The following measures has been put in place to ensure safe environment and working conditions;

- 1) Availability of a burning chamber to enhance safe disposal of sharps, expired pharmaceuticals and contaminated waste. The incinerator reduced the risks of open burning and illegal dumping as well as supporting environmental sustainability and regulatory compliance.
- 2) Segregate Waste at the Source-Separate waste immediately at the point of generation using color-coded containers. Each type of medical waste has a specific container
- 3) Follow environmental health and disposal guidelines.
- 4) Train and sensitise staff on biomedical waste handling.
- 5) Use Personal Protective Equipment (PPE) to minimise co-infections
- 6) Provision of cleansing materials such as detergents, disinfectants and cleansing tools across all departments. This helped in great way to maintain high hygiene standards in wards, theatres, maternity and outpatient services and also to minimize the spread of infections and improve patient safety

### **iii) Employee welfare**

Kianyaga Subcounty Level 4 Hospital acknowledges that employee welfare is a key deliverable for a functional health care system and encompasses the programs, benefits, and policies employers provide to support the physical, mental, social, and financial well-being of their workers, going beyond basic wages. In the FY 2024/2025 the following was done to check the welfare of the staff.

- ❖ Provision of staff tea- staff are provided with 10 o'clock tea in their places of work.
- ❖ There is an existing staff welfare at Kianyaga Level 4 Hospital which is voluntary-During the end year meeting staffs get time to interact with each and this ensure there is cohesion among the employees
- ❖ Team Work-One of the strongest pillars that we have as a facility is team work within the departments and among the staff themselves.
- ❖ Provision of Personal protective equipment.
- ❖ Medical Insurance-Through the County all the staff who are Permanent were insured with NHIF/SHA and also a private insurance (Britam) which provided the necessary medical intervention when needed.

- ❖ Payment of casual wages-For those casual workers employed by there were always paid on time hence motivating them.

**iv) Market place practices-**

The organisation should outline its efforts to:

- ❖ Responsible competition practice.

Ideally the facilities in not a profit-making organisation, however it is life to the fact that there are other facilities offering health care services within the catchment areas. For the facility to continues offering these services it has to Maintaining competitive services which involves delivering high-quality, patient-centred care while staying ahead in innovation, efficiency, and reputation. In a competitive healthcare environment, hospitals must continuously evolve to meet patient expectations, regulatory demands, and technological advances.

**Deliver High-Quality Patient Care by-**

- Prioritize clinical excellence, safety, and outcomes
- Use evidence-based practices and protocols.
- Reduce medical errors and hospital-acquired infections (HAIs).
- Focus on personalized care to build patient trust and satisfaction

**Invest in Technology and Innovation**

- Adopt Electronic Health Records (EHRs) and digital tools for efficient patient management.
- Implement telemedicine services for remote access and follow-up.
- Use AI and data analytics to predict trends, manage risks, and improve treatment.
- Upgrade diagnostic and surgical equipment to offer advanced procedures

**Attract and Retain Skilled Staff**

- Hire qualified, compassionate professionals.
- Offer continuous training and development opportunities.
- Promote a positive work culture to reduce burnout and turnover.
- Recognize and reward excellent performance.

### **Focus on Patient Experience**

- Shorten waiting times and simplify appointment processes.
- Ensure clean, comfortable, and safe facilities.
- Provide clear communication, especially at admission and discharge.
- Collect and act on patient feedback and complaints.

### **Offer Specialized and Differentiated Services**

- Identify services that meet local community needs or are underserved in your area (e.g., cancer care, maternity, dialysis).
- Develop centres of excellence in fields like cardiology, orthopaedics, or paediatrics.
- Provide value-added services like wellness programs, nutrition counselling, or mobile health clinics.

### **Strengthen Marketing and Public Image**

- Use digital marketing (website, social media, blogs) to promote services and educate the public.
- Highlight success stories, innovations, and patient testimonials.
- Participate in community outreach and health awareness campaigns.
- Build a reputation for ethical, transparent, and affordable care.

### **Ensure Operational Efficiency**

- Streamline workflows to reduce waste and cost.
- Use hospital management systems to track inventory, billing, and appointments.
- Implement lean practices to improve service delivery and resource use.

### **Comply with Accreditation and Standards**

- Maintain national or international hospital accreditation (e.g., JCI, NABH).
- Regularly audit and update policies for quality and safety.

- Stay current with healthcare regulations and insurance systems.

**Partner and Collaborate**

- Build partnerships with universities, research centres, or NGOs.
- Collaborate with referral clinics or smaller hospitals for specialized care.
- Network with insurers and government programs to increase patient access.

**Monitor Competitors and Trends**

- Conduct regular market analysis to benchmark services and prices.
- Track patient preferences and emerging healthcare technologies.
- Adapt services to changing demographics and epidemiological patterns.

**Responsible Supply chain and supplier relations**

- ❖ Transparent procurement processes in line with the Public Procurement and Asset Disposal Act were followed.
- ❖ Suppliers were evaluated based on reliability, compliance with specifications, and ethical sourcing practices.
- ❖ Suppliers are paid on time.
- ❖ Quality products and value for money is observed

Responsible marketing and advertisement or Responsible engagement with citizens

Kianyaga Level 4 Hospital undertakes the measures to ensure and maintain safe and ethical practise;

1. Autonomy

- Respect the patient’s right to make informed decisions about their care.
- Obtain informed consent before treatment or procedures.
- Support patients’ rights to accept or refuse treatment.

2. Beneficence

- Always act in the best interest of the patient.
- Provide the highest standard of care and work to improve patient outcomes.

3. non-Maleficence

- Do no harm — avoid treatments or actions that could cause unnecessary injury or suffering.
- Prevent medical errors, over-treatment, or negligence.

4. Justice

- Treat patients fairly and equitably, regardless of race, religion, gender, age, or financial status.
- Ensure equal access to healthcare services and resources

5. Confidentiality

- Protect patient privacy and keep medical information secure.
- Share patient details only with authorized personnel.

6. Accountability

- Healthcare professionals must take responsibility for their actions and decisions.
- Report errors, learn from mistakes, and participate in quality improvement.

7. Professional Integrity

- Uphold honesty, respect, and professionalism in all interactions.
- Avoid conflicts of interest, fraud, and unethical behaviour.

**Product stewardship or Awareness Creation**

Kianyaga Level 4 Hospital has put the following measures to create awareness for the clients

- ❖ Feedback engagement-In there is provision of a GRM register which is placed at the outpatient department where clients record any issue that they may feel wants to be improved. It also encourages reporting of unsafe practices without fear of punishment.
- ❖ There is good leadership at the facility that is cognizant of the needs of the clients
- ❖ There is provision of service charter in the facility.
- ❖ All rooms and departments are well labelled.
- ❖ There are education posters on various medical information in the facility.
- ❖ Patients' rights are highly observed.
- ❖ Medical confidentiality of the patient is highly kept.

**v) Corporate Social Responsibility / Community Engagements**

At Kianyaga Level 4 Hospital we consider the broader interests of society by taking responsibility for the impact of our activities. We believe our responsibility extends beyond the statutory obligation to comply with legislation, to include voluntarily taking action to improve the quality of life among our employees and their families, local communities and society at large as well as to protect the environment. We are dedicated to creating a workplace that is safe, fair and enriching. Safety procedures and programs are constantly monitored and improved to help ensure that our employees work safely. fosters a workplace culture in which the rights, needs and unique contributions of each employee are respected, while supporting their professional development opportunities. believes that strong neighbourhoods, towns, and cities are vital to the well-being of the society and to the economy, and we acknowledge that we have both a special responsibility and role to play in helping the communities thrive.

*Kianyaga Sub County Level 4 Hospital (Kirinyaga County Government)  
Annual Report and Financial Statements for The Year Ended 30<sup>th</sup> June 2025*

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*Signed:*



*Jefitha D.N Gacanja*

*Chairperson, Hospital Management Committee*

*Date: 27<sup>th</sup> August 2025*



*Dr. Irene Wanjiku Gatumbi*

*Hospital Manager*

*Date: 27<sup>th</sup> August 2025*

## **11. Report of The Board of Management**

The Board of Management submits its report together with the financial statements for the year ended June 30, 2025, which present the state of 's affairs during the reporting period.

### **Principal Activities**

continued to undertake its core mandate of providing comprehensive health services to the community. This included inpatient and outpatient care, preventive and promotive services, maternal and child health, emergency response, and the implementation of national health priorities aligned to the Social Health Authority (SHA) framework.

### **Results**

The financial results for the year ended June 30, 2025, are presented in the accompanying financial statements from page 1 to 8. These statements reflect the performance of in mobilizing and utilizing resources to support service delivery, infrastructure development, and patient care.

### **Board of Management**

The members of the Board of Management who served during the year are set out on pages vi. During the reporting year, no member(s) retired or resigned, while no new member(s) were appointed The Board continued to exercise oversight on governance, strategic direction, and compliance with applicable laws and regulations.

### **Auditors**

In accordance with Article 229 of the Constitution of Kenya and the Public Audit Act, 2015, the Auditor-General is mandated to carry out statutory audits of public entities. During the year under review, the audit process had not been concluded at the time of preparing this report. , however, remains committed to working closely with the Office of the Auditor-General to ensure compliance once the audit is undertaken.

Alternatively, where applicable, the Auditor-General may appoint a certified firm of accountants to audit the entity in accordance with Section 23 of the Public Audit Act, 2015. will ensure that any such appointment is facilitated to enhance transparency and accountability.

**Conclusion**

The Board of Management affirms its continued commitment to providing stewardship over 's resources, ensuring that service delivery remains efficient, transparent, and responsive to the needs of the community.



.....  
**Name: Dr Irene Gatumbi**  
**Secretary to the Board**

**12. Statement of Board of Management’s Responsibilities**

Section 164 of the Public Finance Management Act, 2012 requires the Board of Management to prepare financial statements in respect of Kianyaga Sub County Hospital, which give a true and fair view of the state of affairs of Kianyaga Sub County Hospital at the end of the financial year/period and the operating results of Kianyaga Sub County Hospital for that year/period. The Board of Management is also required to ensure that Kianyaga Sub County Hospital keeps proper accounting records which disclose with reasonable accuracy the financial position of Kianyaga Sub County Hospital. The council members are also responsible for safeguarding the assets of the Kianyaga Sub County Hospital.

The Board of Management is responsible for the preparation and presentation of Kianyaga Sub County Hospital’s financial statements, which give a true and fair view of the state of affairs of Kianyaga Sub County Hospital for and as at the end of the financial year (period) ended on June 30, 2025. 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 Kianyaga Sub County Hospital, (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 Kianyaga Sub County Hospital; (v) selecting and applying appropriate accounting policies, and (vi) making accounting estimates that are reasonable in the circumstances.

The Board of Management accepts responsibility for Kianyaga Sub County Hospital’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 Board members are of the opinion that Kianyaga Sub County Hospital’s financial statements give a true and fair view of the state of entity’s transactions during the financial year ended June 30, 2025, and of Kianyaga Sub County Hospital’s financial position as at that date. The Board members further confirm the completeness of the accounting records maintained for Kianyaga Sub County Hospital, which have been relied upon in the preparation of Kianyaga Sub County Hospital’s financial statements as well as the adequacy of the systems of internal financial control.

Nothing has come to the attention of the Board of management to indicate that Kianyaga Sub County Hospital will not remain a going concern for at least the next twelve months from the date of this statement.

**Approval of the financial statements**

’s financial statements were approved by the Board on 27<sup>th</sup> August 2025 and signed on its behalf by:



.....  
Name: **Jefitha D.N. Gacanja**  
Chairperson  
Hospital Management Committee



.....  
Name: **Dr. Irene Gatumbi**  
Accounting Officer

# REPUBLIC OF KENYA

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NAIROBI

## **REPORT OF THE AUDITOR-GENERAL ON KIANYAGA SUB COUNTY LEVEL 4 HOSPITAL FOR THE YEAR ENDED 30 JUNE, 2025 – COUNTY GOVERNMENT OF KIRINYAGA**

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### **PREAMBLE**

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

- A. Report on 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 the 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; and,
- 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, risk management environment and internal controls, developed and implemented by those charged with governance for orderly, efficient and effective operations of the entity.

A Qualified Opinion is issued when the Auditor-General concludes that, except for material misstatements noted, the financial statements are fairly presented in accordance with the applicable financial reporting framework. The Report on Financial Statements should be read together with the Report on Lawfulness and Effectiveness in the Use of Public Resources, and the Report on Effectiveness of Internal Controls, Risk Management and Governance.

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**

#### **Qualified Opinion**

I have audited the accompanying financial statements of Kianyaga Sub County Level 4 Hospital set out on pages 1 to 60, which comprise of the statement of financial position

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*Report of the Auditor-General on Kianyaga Sub County Level 4 Hospital for the year ended 30 June, 2025 – County Government of Kirinyaga*

as at 30 June, 2025 and the statement of financial performance, statement of changes in net assets, statement of cash flows and statement 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, except for the effects of the matter described in the Basis for Qualified Opinion section of my report, the financial statements present fairly, in all material respects, the financial position of Kianyaga Sub County Level 4 Hospital as at 30 June, 2025 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 Facilities Improvement Financing Act, 2023, the County Governments Act, 2012 and the Public Finance Management Act, 2012.

### **Basis for Qualified Opinion**

#### **Failure to Disclose Assets in The Financial Statements**

The statement of financial position and as disclosed in Note 32 to the financial statements reflects Nil balance in respect of property, plant, and equipment. A physical inspection of the Hospital premises revealed the following anomalies;

##### **i. Failure To Value and Disclose Assets in The Financial Statements**

The Hospital is located on a parcel of land which it holds custody and use for an operating theatre with radiology equipment, motor vehicles, medical equipment, computer accessories, furniture and fittings, hospital beds all of which are in good condition and in use. However, the Hospital did not initiate the process of valuation to determine the assets values and disclose them in the financial statement.

##### **ii. Incomplete Assets Register**

The asset register provided for audit lacked key information such as asset description, identification numbers, acquisition date and cost, location, custodianship and condition.

##### **iii. Failure to Tag the Hospital Assets**

Physical inspection of the assets revealed that the assets had not been serialized or tagged for identification and consequently, these assets could not be reconciled with the asset register provided for audit review.

In the circumstances, the accuracy and completeness of the Nil property plant and equipment balance in Note 32 to the financial statements could not be confirmed.

The audit was conducted in accordance with International Standards of Supreme Audit Institutions (ISSAIs). I am independent of the Kianyaga Sub County Level 4 Hospital

Management in accordance with ISSAI 130 on the 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 qualified opinion.

## **Emphasis of Matter**

### **Budgetary Control and Performance**

The statement of comparison of budget and actual amounts reflects total actual expenditure on a comparable basis of Kshs.129,884,648 against total actual receipts on a comparable basis of Kshs.162,625,031 resulting to an under expenditure of Kshs.32,740,383 or approximately 20%.

From the above analysis, Kianyaga Sub County Level 4 Hospital under absorbed the approved budget by Kshs.32,740,383. This may have led to denied promised and expected services to the citizens of Kirinyaga County.

My opinion is not modified in respect of this matter.

## **Key Audit Matters**

Key audit matters are those matters that, in my professional judgement, are of most significance in the audit of the financial statements. Except for the effects of the matters described in the Basis for Qualified Opinion section, I have determined that there are no other key audit matters to communicate in my report.

## **Other Information**

The Management is responsible for the Other Information set out on page iii to xxxiii which comprise of Key Entity Information and Management, The Board of Management, Key Management Team, Chairman's Statement, Report of the Hospital Manager, Statement of Performance Against Predetermined Objectives, Corporate Governance Statement, Management Discussion and Analysis, Environmental and Sustainability Reporting, Report of the Board of Management and Statement of Board of Management's Responsibilities. The Other Information does not include the financial statements and my audit report thereon.

In connection with my audit on the Hospital's, financial statements, my responsibility is to read the Other Information and in doing so, consider whether the Other Information is materially inconsistent with the financial statements or my knowledge obtained in the audit or otherwise appears to be materially misstated. If based on the work I have performed, I conclude that there is a material misstatement of this Other Information, I am required to report that fact. I have nothing to report in this regard.

My opinion on the financial statements does not cover the Other Information and accordingly, I do not express an audit opinion or any form of assurance thereon.

# REPORT ON LAWFULNESS AND EFFECTIVENESS IN THE USE OF PUBLIC RESOURCES

## **Conclusion**

As required by Article 229(6) of the Constitution, based on the audit procedures performed, except for the effect of the matters described in the Basis for Conclusion on Lawfulness and Effectiveness in the Use of Public Resources section of my report, I confirm that nothing else 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**

### **1. Non-Compliance with the Levy Order, 2023**

The statement of financial performance and as disclosed in Note 15 to the financial statement reflects Kshs.27,246,393 in respect to Medical/Clinical costs. Included in the amount is Kshs.9,625,300 paid to suppliers of goods and services. However, the Hospital failed to retain and remit the capacity building levy to Public Procurement Regulatory Authority contrary to paragraph 5&6 of Public Procurement Regulatory Authority Circular No 01/2024 which provides that procuring entities shall remit the Levy amounts to the Authority through the eCitizen payment platform by the 20<sup>th</sup> day of the subsequent month.

In the circumstances, Management was in breach of the law.

### **2. Non-Compliance with Law on Ethnic Diversity**

The statement of financial performance and as disclosed in Note 16 to the financial statements reflect Kshs.94,343,952 in respect of staff cost. Review of payroll revealed that out of a total workforce of Eighty-Six (86) employees, eighty-one (81) constituting 94%, comprised of staff drawn from one ethnic community contrary to Section 7 (2) of the National Cohesion and Integration Act, 2008, which provides that no public establishment shall have more than one third of its staff from the same ethnic community.

Further review of the Hospital's Health Management Committee's composition revealed that all the six (6) Board members were from the same ethnic community.

In the circumstances, Management is in breach of the law.

### **3. Deficiencies in Implementation of Universal Health Coverage**

Review of records and physical inspection of the Hospital resources to confirm effectiveness in service delivery, equipment used and medical specialists at the time of audit in the month of November, 2025, revealed that the Hospital did not meet the requirements of Kenya Quality Model for Health Policy guidelines due to staff deficits by seventy (70) members of staff therefore operating at 72% of the authorized establishment as shown below: -

<b>Staff Requirements</b>	<b>Level 4 Standards</b>	<b>No. in Hospital</b>	<b>Variances</b>
Medical Officers	14	2	12
Dental Officers	2	0	2
Radiologist	1	0	1
Nutritional & Dietetics Officers	4	1	3
Registered Clinical Officers	10	7	3
Occupational Therapist	3	0	3
Physiotherapists	3	0	3
Kenya Registered Community Health Nurses	60	17	43
<b>Total</b>	<b>97</b>	<b>27</b>	<b>70</b>

In the circumstances, the Hospital may not be in a position to deliver on its mandate.

#### **4. Under-Establishment in Hospital Management Committee**

Part 3 of the financial statements on the Hospital Management Committee shows that the Hospital is governed by six (6) appointed Hospital Management Committee members contrary to Section 17(1) of the Facilities Improvement Finance Act which provides that the Health Facility Management Committee shall consist of not less than seven and not more than nine members appointed by the county executive committee with a mix of skills and competencies required for the achievement of the hospital's goals.

In the circumstances, Management was in breach of the law.

The audit was conducted in accordance with ISSAI 3000 and ISSAI 4000. The standards require 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 comply 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 effect of 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 governance were not effective.

## **Basis for Conclusion**

### **1. Failure to Develop a Waiver Policy**

Note 25 to the financial statements reflect Kshs.303,855 in respect of waivers and exemptions. However, it was established that Kianyaga Sub-County Level 4 Hospital had not put in place a formal waiver and exemption policy to regulate the process of granting waivers to patients, contrary to Section 104 (1)(a) of the Public Finance Management Act, 2012 which provides that a county treasury shall monitor, evaluate and oversee the management of public finances and economic affairs of the county government including developing and implementing financial and economic policies in the county;

In the circumstances, it was not possible to confirm the criteria that the Hospital used in granting of the waivers.

### **2. Weaknesses in Internal Audit and Committee Oversight**

Kianyaga Sub County Level 4 Hospital did not have internal audit arrangements in the year under review despite the fact that the Hospital operates in a high-risk environment characterized by substantial financial transactions, procurement activities, inventory management, and patient service operations, all of which require continuous oversight, control and evaluation. This is contrary to Section 155 (1)(a) of the Public Finance Management (PFM) Act, 2012 which stipulates that every county government entity shall ensure that it has appropriate arrangements for conducting internal audit according to the guidelines issued by the Accounting Standards Board.

Additionally, any issues that could have been identified through internal audit reviews could not be addressed or monitored, as the Hospital did not have an established Audit Committee to oversee the implementation of audit recommendations and ensure accountability.

In the circumstances, existence of effective oversight of internal controls could not be confirmed.

### **3. Failure to Develop a Risk Management Policy and a Strategic Plan**

The Hospital during the year under review did not have a risk management policy that guides in prevention, control and mitigate risk in the event of an eventuality. In addition, the Hospital did not have an approved Strategic Plan and an Operational Plan in place, which are essential policy documents for guiding daily operations and setting long-term objectives. This is contrary to Section 158. (1) of the Public Finance Management (county governments) Regulations, 2015 which stipulates that the accounting officer shall ensure that the county government entity develops risk management strategies, which include fraud prevention mechanism; and a system of risk management and internal control that builds robust business operations.

In the circumstances, in the event of risk occurrence the Hospital might not recover and the absence of these key planning documents that may hinder the Hospital's ability to

provide clear direction, measure performance, and communicate priorities and goals to stakeholders.

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 controls, risk Management and overall 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 the Board of Management**

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 governance.

In preparing the financial statements, Management is responsible for assessing the Hospital's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless Management is aware of the intention 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 activities, financial transactions and information reflected in the financial statements comply with the authorities which govern them and that public resources are applied in an effective way.

The Board of Management is responsible for overseeing the Hospital'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 governance and risk management, and ensuring the adequacy and effectiveness of the control environment.

### **Auditor-General's Responsibilities for the Audit**

My responsibility is to conduct an audit of the financial statements in accordance with Article 229(4) of the Constitution, Section 35 of the Public Audit Act, 2015 and the International Standards of Supreme Audit Institutions (ISSAIs). The standards require that, in conducting the audit, I obtain reasonable assurance about whether the financial statements as a whole are free from material misstatements, whether due to fraud or error and to issue an auditor's report that includes my opinion in accordance with Section 48

of the Public Audit Act, 2015. 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 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 conducting the audit, Article 229(6) of the Constitution also requires that I express a conclusion on whether or not in all material respects, the activities, financial transactions and information reflected in the financial statements are in compliance with the authorities that govern them and that public resources are applied in an effective way. In addition, I consider the entity's control environment in order to give an assurance on the effectiveness of internal controls, risk management and governance processes and systems in accordance with the provisions of Section 7(1)(a) of the Public Audit Act, 2015.

Further, I am required to submit the audit report in accordance with Article 229(7) of the Constitution.

Detailed description of my responsibilities for the audit is located at the Office of the Auditor-General's website at: <https://www.oagkenya.go.ke/auditor-generals-responsibilities-for-audit/>. This description forms part of my auditor's report.

  
**FCPA Nancy Gathungu, CBS**  
**AUDITOR-GENERAL**

**Nairobi**

**04 December, 2025**

*Kianyaga Sub County Level 4 Hospital (Kirinyaga County Government)  
Annual Report and Financial Statements for The Year Ended 30<sup>th</sup> June 2025*

**14. Statement of Financial Performance for The Year Ended 30 June 2025**

Description	Note	FY 2024/2025	FY 2023/2024
		Kshs	Kshs
<b>Revenue from non-exchange transactions</b>			
Transfers from the County Government	6	-	-
In- kind contributions from the County Government	7	119,169,051	-
Grants from donors and development partners	8	-	-
Transfers from other Government entities	9	-	-
Public contributions and donations	10	-	-
		<b>119,169,051</b>	-
<b>Revenue from exchange transactions</b>			
Rendering of services- Medical Service Income	11	43,455,980	-
Revenue from rent of facilities	12	-	-
Finance /Interest Income	13	-	-
Miscellaneous Income	14	-	-
<b>Revenue from exchange transactions</b>		<b>43,455,980</b>	-
<b>Total revenue</b>		<b>162,625,031</b>	-
<b>Expenses</b>			
Medical/Clinical costs	15	27,246,393	-
Employee costs	16	94,343,952	-
Board of Management Expenses	17	83,500	-
Depreciation and amortization expense	18	-	-
Repairs and maintenance	19	1,946,050	-
Grants and subsidies	20	-	-
General expenses	21	5,960,898	-
Finance costs	22	-	-
<b>Total expenses</b>		<b>129,580,793</b>	-
<b>Other gains/(losses)</b>			
Gain/Loss on disposal of non-Current assets	23	-	-

**Kianyaga Sub County Level 4 Hospital (Kirinyaga County Government)**  
**Annual Report and Financial Statements for The Year Ended 30<sup>th</sup> June 2025**

Description	Note	FY 2024/2025	FY 2023/2024
		Kshs	Kshs
Unrealized gain on fair value of investments	24	-	-
Medical services contracts Gains/Losses	25	(303,855)	-
Impairment loss	26	-	-
Gain on foreign exchange transactions		-	-
<b>Total other gains/(losses)</b>		<b>(303,855)</b>	-
<b>Net Surplus / (Deficit) for the year</b>		<b>32,740,383</b>	-

*(The notes set out on pages 10 to 61 form an integral part of the Annual Financial Statements.)*

's financial statements were approved by the Board on 27<sup>th</sup> August 2025



.....  
**Jefitha D.N. Gacanja**  
**Chairman**  
**Hospital Management**  
**Committee**



.....  
**Peter Mungai**  
**Head Of Finance**  
**ICPAK No:18247**



.....  
**Dr. Irene Wanjiku Gatumbi**  
**Hospital Manager**

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**15. Statement of Financial Position as at 30<sup>th</sup> June 2025**

Description	Note	FY 2024/2025	FY 2023/2024
		Kshs	Kshs
<b>Assets</b>			
<b>Current assets</b>			
Cash and cash equivalents	27	6,853,727	-
Prepayments	28	-	-
Receivables from exchange transactions	29	18,234,340	-
Receivables from non-exchange transactions	30	-	-
Inventories	31	7,652,316	-
<b>Total Current Assets</b>		<b>32,740,383</b>	-
<b>Non-current assets</b>			
Property, plant, and equipment	32	-	-
Intangible assets	33	-	-
Investment property	34	-	-
Biological Assets	35	-	-
<b>Total Non-current Assets</b>		-	-
<b>Total assets (A)</b>		<b>32,740,383</b>	-
<b>Liabilities</b>			
<b>Current liabilities</b>			
Trade and other payables	36	-	-
Refundable deposits from Patients/Prepayments	37	-	-
Provisions	38	-	-
Finance lease obligation	39	-	-
Current portion of deferred income	40	-	-
Current portion of borrowings	41	-	-
<b>Total Current Liabilities</b>		-	-
<b>Non-current liabilities</b>			
Provisions	38	-	-
Non-Current Finance lease obligation	39	-	-
Non-Current portion of deferred income	40	-	-
Non - Current portion of borrowings	41	-	-

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Description	Note	FY 2024/2025	FY 2023/2024
		Kshs	Kshs
Service concession Arrangements	42	-	-
<b>Total non-current liabilities</b>		-	-
<b>Total Liabilities (B)</b>		-	-
<b>Net assets (A-B)</b>		<b>32,740,383</b>	-
<b>Represented by:</b>			
Revaluation reserve		-	-
Accumulated surplus/Deficit		32,740,383	-
Capital Fund		-	-
<b>Net Assets</b>		<b>32,740,383</b>	-

*(The notes on pages 10 to 61 form an integral part of the Annual Financial Statements.)*

's financial statements were approved by the Board on \_\_\_27<sup>th</sup> August 2025\_\_\_ and signed on its behalf by:



.....  
**Jefitha D.N. Gacanja**  
 Chairman  
 Hospital Management  
 Committee



.....  
**Peter Mungai**  
 Head Of Finance  
 ICPAK No:18247



.....  
**Dr. Irene Wanjiku Gatumbi**  
 Hospital Manager

*Kianyaga Sub County Level 4 Hospital (Kirinyaga County Government)*  
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**16. Statement of Changes in Net Assets for The Year Ended 30 June 2025**

<b>Description</b>	<b>Revaluation reserve</b>	<b>Accumulated surplus/Deficit</b>	<b>Capital Fund</b>	<b>Total</b>
<b>As at July 1, 2023</b>	-	-	-	-
Revaluation gain	-	-	-	-
Surplus/(deficit) for the year	-	-	-	-
Capital/Development grants	-	-	-	-
<b>As at June 30, 2024</b>	-	-	-	-
<b>At July 1, 2024</b>	-	-	-	-
<b>Prior year adjustments</b>	-	-	-	-
Revaluation gain	-	-	-	-
Surplus/(deficit) for the year	-	32,740,383	-	32,740,383
Capital/Development grants	-	-	-	-
<b>At June 30, 2025</b>	-	<b>32,740,383</b>	-	<b>32,740,383</b>

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**17. Statement of Cash Flows for The Year Ended 30 June 2025**

Description	Note	FY 2024/2025	FY 2023/2024
		Kshs	Kshs
<b>Cash flows from operating activities</b>			
<b>Receipts</b>			
Transfers from the County Government		-	-
Grants from donors and development partners		-	-
Transfers from other Government entities		-	-
Public contributions and donations		-	-
Rendering of services- Medical Service Income		24,917,785	-
Revenue from rent of facilities		-	-
Finance / interest income		-	-
Miscellaneous receipts( <i>specify</i> )		-	-
<b>Total Receipts</b>		<b>24,917,785</b>	-
<b>Payments</b>			
Medical/Clinical costs		9,017,850	-
Employee costs		1,055,760	-
Board of Management Expenses		83,500	-
Repairs and maintenance		1,946,050	-
Grants and subsidies		-	-
General expenses		5,960,898	-
Finance costs		-	-
Refunds paid out		-	-
<b>Total Payments</b>		<b>18,064,058</b>	-
<b>Net cash flows from operating activities</b>	43	<b>6,853,727</b>	-
<b>Cash flows from investing activities</b>			
Purchase of property, plant, equipment		-	-
Purchase of intangible assets		-	-
Proceeds from the sale of PPE		-	-
Acquisition of investments		-	-
<b>Net cash flows used in investing activities</b>		-	-
<b>Cash flows from financing activities</b>			
Proceeds from borrowings		-	-
Repayment of borrowings		-	-
Capital grants received		-	-

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Description	Note	FY 2024/2025	FY 2023/2024
		Kshs	Kshs
Net cash flows used in financing activities		-	-
Net increase/(decrease) in cash and cash equivalents		6,853,727	-
Cash and cash equivalents as at 1 July	27	-	-
Cash and cash equivalents as at 30 June	27	6,853,727	-

**18. Statement of Comparison of Budget and Actual Amounts for Year Ended 30 June 2025**

Description	Original budget	Adjustments	Final budget	Actual on comparable basis	Performance difference	% of utilisation
	<b>A</b>	<b>b</b>	<b>c=(a+b)</b>	<b>d</b>	<b>e=(c-d)</b>	<b>f=d/c%</b>
	<b>Kshs</b>	<b>Kshs</b>	<b>Kshs</b>	<b>Kshs</b>	<b>Kshs</b>	
Budget carryovers from the previous year	-	-	-	-	-	
<b>Receipts</b>						
Transfers from other Government entities	-	-	-	-	-	
In Kind Contributions from the County Govt	120,000,000	-	120,000,000	119,169,051	830,949	99%
Rendering of services- Medical Service Income	43,810,000	-	43,810,000	43,455,980	354,020	99%
<b>Total receipts</b>	<b>163,810,000</b>	<b>-</b>	<b>163,810,000</b>	<b>162,625,031</b>	<b>1,184,969</b>	
<b>Payments</b>						
Medical/Clinical costs	35,000,000	-	35,000,000	27,246,393	7,753,607	78%
Employee costs	94,500,000	-	94,500,000	94,343,952	156,048	100%
Remuneration of directors	83,500	-	83,500	83,500	-	100%
Repairs and maintenance	1,950,000	-	1,950,000	1,946,050	3,950	99%
General expenses	31,966,500	-	31,966,500	5,960,898	26,005,602	19%
Medical Services contracts gains/losses	310,000	-	310,000	303,855	6,145	-
Refunds	-	-	-	-	-	-
<b>Total Operational Expenditure paid</b>	<b>163,810,000</b>	<b>-</b>	<b>163,810,000</b>	<b>129,884,648</b>	<b>33,925,352</b>	
<b>Capital Expenditure paid</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Surplus</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>32,740,383</b>	<b>-</b>	<b>-</b>

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***Budget notes***

*1. The General and medical expenses were utilized at 19% and 78% respectively due to late vetting of committees and FIF board members led to late approvals of expenditure.*

**Budget Reconciliation**

	Description of Particulars	Amount in Kshs
	Actual Surplus Amounts as per the statement of Budget	32,740,383
1	Accrued Income expected from health insurance schemes	(18,234,340)
2	Less Closing Stock	(7,652,316)
3		-
4		-
	Closing Cash and Cash Equivalent as per the statement of Cash flows	<b>6,853,727</b>

## **19. Notes to the Financial Statements**

### **1. General Information**

Kianyaga Sub-County Hospital is a level 4 hospital established under gazette notice number Vol.CXXIV-No.53 and is domiciled in Kirinyaga County under the Health Department.

The principal mandate of the hospital is to provide quality, affordable, efficient and effective health care services.

Vision- be a centre of excellence in providing timely, quality and affordable health services.

Core Values-The core values are Professionalism, Respect, dignity, courtesy, integrity, empathy, transparency and accountability.

### **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 Kianyaga Sub County Hospital's accounting policies. The financial statements have been prepared and presented in Kenya Shillings, which is the functional and reporting currency of Kianyaga Sub County Hospital. The financial statements have been prepared in accordance with the PFM Act, and Facilities Improvement Financing Act, 2023), 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 2025*

There were no new and amended standards issued in the financial year.

*ii) New and amended standards and interpretations in issue but not yet effective in the year ended 30 June 2025.*

<b>Standard</b>	<b>Effective date and impact:</b>
IPSAS 43	<p><i>Applicable 1<sup>st</sup> January 2025</i></p> <p>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 financial statements to assess the effect that leases have on the financial position, financial performance and cashflows of an Entity.</p> <p>The new standard requires entities to recognise, measure and present information on right of use assets and lease liabilities.</p>
IPSAS 44: Non- Current Assets Held for Sale and Discontinued Operations	<p><i>Applicable 1<sup>st</sup> January 2025</i></p> <p>The Standard requires,</p> <p>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:</p> <p>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.</p>
IPSAS 45- Property	<p><i>Applicable 1<sup>st</sup> January 2025</i></p> <p>The standard supersedes IPSAS 17 on Property, Plant and Equipment. IPSAS 45 has additional guidance/ new guidance for heritage assets,</p>

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<b>Standard</b>	<b>Effective date and impact:</b>
Plant and Equipment	infrastructure assets and measurement. Heritage assets were previously excluded from the scope of IPSAS 17 in IPSAS 45, heritage assets that satisfy the definition of PPE shall be recognised as assets if they meet the criteria in the standard. IPSAS 45 has an additional application guidance for infrastructure assets, implementation guidance and illustrative examples. The standard has clarified existing principles e.g valuation of land over or under the infrastructure assets, under- maintenance of assets and distinguishing significant parts of infrastructure assets.
IPSAS 46 Measurement	<p><b><i>Applicable 1<sup>st</sup> January 2025</i></b></p> <p>The objective of this standard was to improve measurement guidance across IPSAS by:</p> <ol style="list-style-type: none"> <li>i. Providing further detailed guidance on the implementation of commonly used measurement bases and the circumstances under which they should be used.</li> <li>ii. Clarifying transaction costs guidance to enhance consistency across IPSAS;</li> <li>iii. Amending where appropriate guidance across IPSAS related to measurement at recognition, subsequent measurement and measurement related disclosures.</li> </ol> <p>The standard also introduces a public sector specific measurement bases called the current operational value.</p>
IPSAS 47- Revenue	<p><b><i>Applicable 1<sup>st</sup> January 2026</i></b></p> <p>This standard supersedes IPSAS 9- Revenue from exchange transactions, IPSAS 11 Construction contracts and IPSAS 23 Revenue from non-exchange transactions. This standard brings all the guidance of accounting for revenue under one standard. The objective of the standard is to establish the principles that an entity shall apply to report useful information to users of financial statements about the nature, amount, timing and uncertainty of revenue and cash flow arising from revenue transactions.</p>

<b>Standard</b>	<b>Effective date and impact:</b>
IPSAS 48- Transfer Expenses	<i>Applicable 1<sup>st</sup> January 2026</i> The objective of the standard is to establish the principles that a transfer provider shall apply to report useful information to users of financial statements about the nature, amount, timing and uncertainty of expenses and cash flow arising from transfer expense transactions. This is a new standard for public sector entities geared to provide guidance to entities that provide transfers on accounting for such transfers.
IPSAS 49- Retirement Benefit Plans	<i>Applicable 1<sup>st</sup> January 2026</i> The objective is to prescribe the accounting and reporting requirements for the public sector retirement benefit plans which provide retirement to public sector employees and other eligible participants. The standard sets the financial statements that should be presented by a retirement benefit plan.
IPSAS 50: Exploration For & Evaluation of Mineral Resources	<i>Applicable 1<sup>st</sup> January 2027</i> The objective of this Standard is to specify the financial reporting for the exploration for and evaluation of mineral resources. The Standard requires: <ul style="list-style-type: none"> <li>i. Limited improvements to existing accounting practices for exploration and evaluation expenditures.</li> <li>ii. Entities that recognize exploration and evaluation assets to assess such assets for impairment in accordance with this Standard and measure any impairment in accordance with IPSAS 26.</li> <li>iii. Disclosures that identify and explain the amounts in Kianyaga Sub County Hospital's financial statements arising from the exploration for and evaluation of mineral resources and help users of those financial statements understand the amount, timing and certainty of future cash flows from any exploration and evaluation assets recognized.</li> </ul>

*iii) Early adoption of standards*

Kianyaga Sub County Hospital did not early – adopt any new or amended standards in the financial year

**4. Summary of Significant Accounting Policies**

**a. Revenue recognition**

**i) Revenue from non-exchange transactions**

**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 Kianyaga Sub County Hospital 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 asset that has been acquired using such funds.

**ii) Revenue from exchange transactions**

**Rendering of services**

Kianyaga Sub County Hospital 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.

**Sale of goods**

Revenue from the sale of goods is recognized when the significant risks and rewards of ownership have been transferred to the buyer, usually on delivery of the goods and when the amount of revenue can be measured reliably, and it is probable that the economic benefits or service potential associated with the transaction will flow to Kianyaga Sub County Hospital.

**Interest income**

Interest income is accrued using the effective yield method. The effective yield discounts estimated future cash receipts through the expected life of the financial asset to that asset's net carrying amount. The method applies this yield to the principal outstanding to determine interest income for each period.

**Rental income**

Rental income arising from operating leases on investment properties is accounted for on a straight-line basis over the lease terms and included in revenue.

**b. Budget information**

The original budget for FY 2024/2025 was approved by County Assembly on July 2024. 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 Kianyaga Sub County Hospital upon receiving the respective approvals in order to conclude the final budget. Kianyaga Sub County Hospital'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. The amounts in the financial statements were recast from the accrual basis to the cash basis and reclassified by presentation to be on the same basis as the approved budget.

A comparison of budget and actual amounts, prepared on a comparable basis to the approved budget, is then presented in the statement of comparison of budget and actual amounts. In addition to the Basis difference, adjustments to amounts in the financial statements are also made for differences in the formats and classification schemes adopted for the presentation of the financial statements and the approved budget.

A statement to reconcile the actual amounts on a comparable basis included in the statement of comparison of budget and actual amounts, and the actuals as per the statement of cash flows.

**c. Taxes**

**Sales tax/ Value Added Tax**

Expenses and assets are recognized net of the amount of sales tax, except:

- When the sales tax incurred on a purchase of assets or services is not recoverable from the taxation authority, in which case, the sales tax is recognized as part of the cost of acquisition of the asset or as part of the expense item, as applicable.

- When receivables and payables are stated with the amount of sales tax included. The net amount of sales tax recoverable from, or payable to, the taxation authority is included as part of receivables or payables in the statement of financial position.

*Notes to the Financial Statements (Continued)*

**d. Investment property**

Investment properties are measured initially at cost, including transaction costs. The carrying amount includes the replacement cost of components of an existing investment property at the time that cost is incurred if the recognition criteria are met and excludes the costs of day-to-day maintenance of an investment property.

Investment property acquired through a non-exchange transaction is measured at its fair value at the date of acquisition. Investment properties are derecognized either when they have been disposed of or when the investment property is permanently withdrawn from use and no future economic benefit or service potential is expected from its disposal. The difference between the net disposal proceeds and the carrying amount of the asset is recognized in the surplus or deficit in the period of de-recognition. Transfers are made to or from investment property only when there is a change in use.

**e. 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, Kianyaga Sub County Hospital 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.

***Notes to the Financial Statements (Continued)***

**f. Leases**

Finance leases are leases that transfer substantially the entire risks and benefits incidental to ownership of the leased item to Kianyaga Sub County Hospital. 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. Kianyaga Sub County Hospital 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 Kianyaga Sub County Hospital 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.

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

**g. 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.

*Notes to the Financial Statements (Continued)*

**h. Biological Assets**

Kianyaga Sub County Hospital recognizes biological assets when it controls the assets due to past events, it is probable that future economic benefits associated with the asset will flow to Kianyaga Sub County Hospital, and when the fair value or cost of the asset can be measured reliably. Biological assets are initially and subsequently measured at fair value less costs to sell, except where fair value cannot be reliably determined. In such cases, the asset is measured at its cost less accumulated depreciation and any accumulated impairment losses. Changes in fair value less costs to sell are recognized in surplus/deficit in the period in which they occur.

**i. Research and development costs**

Kianyaga Sub County Hospital expenses research costs as incurred. Development costs on an individual project are recognized as intangible assets when Kianyaga Sub County Hospital can demonstrate:

- The technical feasibility of completing the asset so that the asset will be available for use or sale
- Its intention to complete and its ability to use or sell the asset
- The asset will generate future economic benefits or service potential
- The availability of resources to complete the asset
- The ability to measure reliably the expenditure during development.

Following initial recognition of an asset, the asset is carried at cost less any accumulated amortization and accumulated impairment losses. Amortization of the asset begins when development is complete and the asset is available for use. It is amortized over the period of expected future benefit. During the period of development, the asset is tested for impairment annually with any impairment losses recognized immediately in surplus or deficit.

**j. Financial instruments**

IPSAS 41 addresses the classification, measurement and de-recognition of financial assets and financial liabilities, introduces new rules for hedge accounting and a new impairment model for financial assets.

A financial instrument is any contract that gives rise to a financial asset of one entity and a financial liability or equity instrument of another entity. At initial recognition, Kianyaga Sub County Hospital measures a financial asset or financial liability at its fair value plus or minus, in the case of a financial asset or financial liability not at fair value through surplus or deficit, transaction costs that are directly attributable to the acquisition or issue of the financial asset or financial liability.

**Financial assets**

**Classification of financial assets**

Kianyaga Sub County Hospital classifies its financial assets as subsequently measured at amortised cost, fair value through net assets/ equity or fair value through surplus and deficit on the basis of both Kianyaga Sub County Hospital's management model for financial assets and the contractual cash flow characteristics of the financial asset. A financial asset is measured at amortized cost when the financial asset is held within a management model whose objective is to hold financial assets in order to collect contractual cash flows and the contractual terms of the financial asset give rise on specified dates to cash flows that are solely payments of principal and interest on the principal outstanding. A financial asset is measured at fair value through net assets/ equity if it is held within the management model whose objective is achieved by both collecting contractual cashflows and selling financial assets and the contractual terms of the financial asset give rise on specified dates to cash flows that are solely payments of principal and interest on the principal amount outstanding. A financial asset shall be measured at fair value through surplus or deficit unless it is measured at amortized cost or fair value through net assets/ equity unless an entity has made irrevocable election at initial recognition for particular investments in equity instruments.

**Subsequent measurement**

Based on the business model and the cash flow characteristics, Kianyaga Sub County Hospital classifies its financial assets into amortized cost or fair value categories for financial instruments.

Movements in fair value are presented in either surplus or deficit or through net assets/ equity subject to certain criteria being met.

**Amortized cost**

Financial assets that are held for collection of contractual cash flows where those cash flows represent solely payments of principal and interest, and that are not designated at fair value through surplus or deficit, are measured at amortized cost. A gain or loss on an instrument that is subsequently measured at amortized cost and is not part of a hedging relationship is recognized in profit or loss when the asset is de-recognized or impaired. Interest income from these financial assets is included in finance income using the effective interest rate method.

**Fair value through net assets/ equity**

Financial assets that are held for collection of contractual cash flows and for selling the financial assets, where the assets' cash flows represent solely payments of principal and interest, are measured at fair value through net assets/ equity. Movements in the carrying amount are taken through net assets, except for the recognition of impairment gains or losses, interest revenue and foreign exchange gains and losses which are recognized in surplus/deficit. Interest income from these financial assets is included in finance income using the effective interest rate method.

**Fair value through surplus or deficit**

Financial assets that do not meet the criteria for amortized cost or fair value through net assets/ equity are measured at fair value through surplus or deficit. A business model where Kianyaga Sub County Hospital manages financial assets with the objective of realizing cash flows through solely the sale of the assets would result in a fair value through surplus or deficit model.

**Trade and other receivables**

Trade and other receivables are recognized at fair values less allowances for any uncollectible amounts. Trade and other receivables are assessed for impairment on a continuing basis. An estimate is made of doubtful receivables based on a review of all outstanding amounts at the year end.

**Impairment**

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Kianyaga Sub County Hospital assesses, on a forward-looking basis, the expected credit loss ('ECL') associated with its financial assets carried at amortized cost and fair value through net assets/equity. Kianyaga Sub County Hospital recognizes a loss allowance for such losses at each reporting date. Critical estimates and significant judgments made by management there were no expected credit loss (ECL) at .

## **Financial liabilities**

### **Classification**

Kianyaga Sub County Hospital classifies its liabilities as subsequently measured at amortized cost except for financial liabilities measured through profit or loss.

#### **k. 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:

- Raw materials: purchase cost using the weighted average cost method.
- 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 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 cost and the 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 Kianyaga Sub County Hospital.

#### **l. Provisions**

Provisions are recognized when Kianyaga Sub County Hospital 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 Kianyaga Sub County Hospital 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.

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The expense relating to any provision is presented in the statement of financial performance net of any reimbursement.

*Notes to the Financial Statements (Continued)*

**m. Social Benefits**

Social benefits are cash transfers provided to i) specific individuals and / or households that meet the eligibility criteria, ii) mitigate the effects of social risks and iii) Address the need of society as a whole. Kianyaga Sub County Hospital recognises a social benefit as an expense for the social benefit scheme at the same time that it recognises a liability. The liability for the social benefit scheme is measured at the best estimate of the cost (the social benefit payments) that Kianyaga Sub County Hospital will incur in fulfilling the present obligations represented by the liability.

**n. Contingent liabilities**

Kianyaga Sub County Hospital 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.

**o. Contingent assets**

Kianyaga Sub County Hospital 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 Kianyaga Sub County Hospital 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.

**p. Nature and purpose of reserves**

Kianyaga Sub County Hospital creates and maintains reserves in terms of specific requirements.

**q. Changes in accounting policies and estimates**

Kianyaga Sub County Hospital recognizes the effects of changes in accounting policy retrospectively. The effects of changes in accounting policy are applied prospectively if retrospective application is impractical.

*Notes to the Financial Statements (Continued)*

**r. Employee benefits**

**Retirement benefit plans**

Kianyaga Sub County Hospital provides retirement benefits for its employees and directors. Defined contribution plans are post-employment benefit plans under which an entity pays fixed contributions into a separate entity (a fund) and will have no legal or constructive obligation to pay further contributions if the fund does not hold sufficient assets to pay all employee benefits relating to employee service in the current and prior periods. The contributions to fund obligations for the payment of retirement benefits are charged against income in the year in which they become payable. Defined benefit plans are post-employment benefit plans other than defined-contribution plans. The defined benefit funds are actuarially valued tri-annually on the projected unit credit method basis. Deficits identified are recovered through lump-sum payments or increased future contributions on a proportional basis to all participating employers. The contributions and lump sum payments reduce the post-employment benefit obligation.

**s. Foreign currency transactions**

Transactions in foreign currencies are initially accounted for at the ruling rate of exchange on the date of the transaction. At each reporting date, foreign currency monetary items are translated using the closing rate. Non-monetary items measured in historical cost are translated using the exchange rate at the date of the transaction, and those measured at fair value are translated using the exchange rates at the date when the fair value was determined. Exchange differences arising from the settlement of monetary items or translation of monetary/non-monetary items at rates different from those at which they were initially reported are recognized in surplus or deficit in the period.

**t. Borrowing costs**

Borrowing costs are capitalized against qualifying assets as part of property, plant and equipment. Such borrowing costs are capitalized over the period during which the asset is being acquired or constructed and borrowings have been incurred. Capitalization ceases when construction of the asset is complete. Further borrowing costs are charged to the statement of financial performance.

**u. Related parties**

Kianyaga Sub County Hospital 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 Kianyaga Sub County Hospital, or vice versa. Members of key management are regarded as related parties and comprise the directors, the CEO/principal and senior managers.

**v. Service concession arrangements**

Kianyaga Sub County Hospital analyses all aspects of service concession arrangements that it enters into in determining the appropriate accounting treatment and disclosure requirements. In particular, where a private party contributes an asset to the arrangement, Kianyaga Sub County Hospital recognizes that asset when, and only when, it controls or regulates the services. The operator must provide together with the asset, to whom it must provide them, and at what price. In the case of assets other than 'whole-of-life' assets, it controls, through ownership, beneficial entitlement or otherwise – any significant residual interest in the asset at the end of the arrangement. Any assets so recognized are measured at their fair value. To the extent that an asset has been recognized, Kianyaga Sub County Hospital also recognizes a corresponding liability, adjusted by a cash consideration paid or received.

**w. 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.

**x. Comparative figures**

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

**y. 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, 2025.

**5. Significant Judgments and Sources of Estimation Uncertainty**

The preparation of Kianyaga Sub County Hospital'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.

**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. Kianyaga Sub County Hospital 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 Kianyaga Sub County Hospital. Such changes are reflected in the assumptions when they occur. (IPSAS 1.140)

**Useful lives and residual values**

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

- The condition of the asset based on the assessment of experts employed by Kianyaga Sub County Hospital.
- The nature of the asset, its susceptibility and adaptability to changes in technology and processes.
- The nature of the processes in which the asset is deployed.
- Availability of funding to replace the asset.
- Changes in the market in relation to the asset.

**Provisions**

Provisions were raised and management determined an estimate based on the information available. No additional provisions have been. 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.

**Notes to Financial Statements Continued**

**6. Transfers from the County Government**

Description	FY 2024/2025	FY 2023/2024
	KShs	KShs
<b>Unconditional grants</b>		
Operational grant	-	-
Level 4/5 grants	-	-
Unconditional development grants	-	-
Other grants ( <i>specify</i> )	-	-
	-	-
<b>Conditional grants</b>		
User fee forgone	-	-
Transforming health services for Universal care project (THUCP)	-	-
DANIDA	-	-
Wards Development grant	-	-
Paediatric block grant	-	-
Administration block grant	-	-
Laboratory grant	-	-
<b>Total government grants and subsidies</b>	-	-

**6 b Transfers from The County Government**

Name of Kianyaga Sub County Hospital sending the grant	Amount recognized to Statement of financial performance* KShs	Amount deferred under deferred income KShs	Amount recognised in capital fund.	Total grant income during the year	Comparative Period
			KShs	KShs	KShs
Kirinyaga County Government	-	-	-	-	-
<b>Total</b>	-	-	-	-	-

Notes to Financial Statements Continued

7. In Kind Contributions from The County Government

Description	FY 2024/2025	FY 2023/2024
	KShs	KShs
Salaries and wages	93,288,192	-
Medical supplies-Drawings Rights (KEMSA)	-	-
Pharmaceuticals and Non-Pharmaceutical Supplies	25,880,859	-
Utility bills	-	-
<b>Total grants in kind</b>	<b>119,169,051</b>	<b>-</b>

8. Grants From Donors and Development Partners

Description	FY 2024/2025	FY 2023/2024
	KShs	KShs
Cancer Centre grant- DANIDA	-	-
World Bank grants	-	-
Paediatric ward grant- JICA	-	-
Research grants	-	-
Other grants ( <i>specify</i> )	-	-
<b>Total grants from development partners</b>	<b>-</b>	<b>-</b>

8 (a) Grants from donors and development partners (Classification)

Name of Kianyaga Sub County Hospital sending the grant	Amount recognized to Statement of financial performance	Amount deferred under deferred income	Amount recognised in capital fund.	Total grant income during the year	Comparative Period
	KShs	KShs	KShs	KShs	KShs
Donor e.g., DANIDA	-	-	-	-	-
JICA	-	-	-	-	-
World Bank	-	-	-	-	-
<b>Total</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>

**Notes to Financial Statements Continued**

**9. Transfers From Other Government Entities**

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>KShs</b>	<b>KShs</b>
Transfer from National Government (Ministry of Health)	-	-
Transfer from National Hospital	-	-
Transfer from Institute	-	-
<b>Total Transfers</b>	-	-

**10. Public Contributions and Donations**

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>KShs</b>	<b>KShs</b>
Public donations	-	-
Donations from local leadership	-	-
Donations from religious institutions	-	-
Donations from other international organisations and individuals	-	-
Other donations( <i>specify</i> )	-	-
Donations in kind-amortised	-	-
<b>Total donations and sponsorships</b>	-	-

**10 (a)Reconciliations of amortised grants**

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>Kshs</b>	<b>Kshs</b>
<b>Balance unspent at beginning of year</b>	-	-
Current year receipts	-	-
Amortised and transferred to revenue	-	-
<b>Conditions to be met – remain liabilities</b>	-	-

Notes to Financial Statements Continued

11. Rendering of Services-Medical Service Income

Description	FY 2024/2025	FY 2023/2024
	Kshs	Kshs
X Ray	472,800	-
Laboratory	2,556,820	-
Ent	400	-
Pharmacy	2,472,144	-
Medical Rec	1,873,460	-
Out-Pts	1,775,575	-
Ambulance	291,100	-
Wards	1,938,640	-
Physio/Occ Therapy	206,100	-
Mch/Fp	262,300	-
Eye Clinic	1,100	-
Surgery	129,848	-
Dental	73,450	-
Medical Exam	178,000	-
Theatre Minor	362,398	-
Other medical services income- insurance claims	30,861,845	-
<b>Total revenue from the rendering of services</b>	<b>43,455,980</b>	-

**Notes to the Financial Statements (Continued)**

**12. Revenue From Rent of Facilities**

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>Kshs</b>	<b>Kshs</b>
Residential property	-	-
Commercial property	-	-
<b>Total Revenue from rent of facilities</b>	-	-

**13. Finance /Interest Income**

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>Kshs</b>	<b>Kshs</b>
Interest income from Cash investments and fixed deposits	-	-
Interest income from short- term/ current deposits	-	-
Interest income from Treasury Bills	-	-
Interest income from Treasury Bonds	-	-
Interest from outstanding debtors	-	-
<b>Total finance income</b>	-	-

**14. Miscellaneous Income**

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>KShs</b>	<b>KShs</b>
Insurance recoveries	-	-
Income from sale of tender	-	-
Services concession income	-	-
Sale of goods (water, publications, containers etc)	-	-
Write backs (Deposits, payments in advance etc)	-	-
Bad debts recovered	-	-
<i>Others (Specify)</i>	-	-
<b>Total Miscellaneous income</b>	-	-

**Notes to the Financial Statements (Continued)**

**15. Medical/ Clinical Costs**

Description	FY 2024/2025	FY 2023/2024
	Kshs	Kshs
Dental costs/ materials	-	-
Laboratory chemicals and reagents	834,772	-
Public health activities	-	-
Food and Ration	5,224,600	-
Uniform, clothing, and linen	3,793,250	-
Dressing and Non-Pharmaceuticals	7,799,359	-
Pharmaceutical supplies	8,043,399	-
Health information stationery	-	-
Reproductive health materials	-	-
Sanitary and cleansing Materials	551,012	-
Purchase of Medical gases	-	-
X-Ray/Radiology supplies	1,000,000	-
Other medical related clinical costs ( <i>specify</i> )	-	-
<b>Total medical/ clinical costs</b>	<b>27,246,392</b>	<b>-</b>

**16. Employee Costs**

Description	FY 2024/2025	FY 2023/2024
	Kshs	Kshs
Salaries and allowances	93,288,192	-
Wages	1,055,760	-
Contributions to pension schemes	-	-
Service gratuity	-	-
Performance and other bonuses	-	-
Staff medical expenses and Insurance cover	-	-
Group personal accident insurance and WIBA	-	-
Social contribution	-	-
Other employee costs ( <i>specify</i> )	-	-
<b>Employee costs</b>	<b>94,343,952</b>	<b>-</b>

**Notes to the Financial Statements (Continued)**

**17. Board of Management Expenses**

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>Kshs</b>	<b>Kshs</b>
Chairman's Honoraria	-	-
Sitting allowance	83,500	-
Mileage	-	-
Insurance expenses	-	-
Induction and training	-	-
Travel and accommodation allowance	-	-
Airtime allowances	-	-
<b>Total</b>	<b>83,500</b>	<b>-</b>

**18. Depreciation and Amortization Expense**

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>Kshs</b>	<b>Kshs</b>
Property, plant and equipment	-	-
Intangible assets	-	-
Investment property carried at cost	-	-
<b>Total depreciation and amortization</b>	<b>-</b>	<b>-</b>

**19. Repairs And Maintenance**

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>Kshs</b>	<b>Kshs</b>
Property- Buildings	-	-
Medical equipment	-	-
Office equipment	-	-
Furniture and fittings	-	-
Computers and accessories	-	-
Motor vehicle expenses	1,946,050	-
Maintenance of civil works	-	-
<b>Total repairs and maintenance</b>	<b>1,946,050</b>	<b>-</b>

**Notes to the Financial Statements (Continued)**

**20. Grants And Subsidies**

Description	FY 2024/2025	FY 2023/2024
	Kshs	Kshs
Community development and social work	-	-
Education initiatives and programs	-	-
Free/ subsidised medical camp	-	-
Disability programs	-	-
Free cancer screening	-	-
Social benefit expenses	-	-
Other grants and subsidies( <i>specify</i> )	-	-
<b>Total grants and subsidies</b>	-	-

**21. General Expenses**

Description	FY 2024/2025	FY 2023/2024
	Kshs	Kshs
Advertising and publicity expenses	-	-
Catering expenses	-	-
Waste management expenses	-	-
Insecticides and rodenticides	-	-
Audit fees	-	-
Bank charges	35,276	-
Conferences and delegations	212,000	-
Consultancy fees	-	-
Contracted services	-	-
Electricity expenses	446,835	-
Fuel and Lubricants	-	-
Insurance	-	-
Research and development expenses	-	-
Travel and accommodation allowance	-	-
Legal expenses	-	-
Licenses and permits	-	-
Courier and postal services	-	-
Printing and stationery	-	-
Hire charges	-	-

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Description	FY 2024/2025	FY 2023/2024
	Kshs	Kshs
Rent expenses	-	-
Water and sewerage costs	380,350	-
Skills development levies	-	-
Telephone and mobile phone services	-	-
Internet expenses	-	-
Staff training and development	-	-
Subscriptions to professional bodies	-	-
Subscriptions to newspapers periodical, magazines, and gazette notices	-	-
Library books/Materials	-	-
Parking charges	-	-
Transfers to CRF	1,895,103	
Transfers to CHMT	2,991,334	
<b>Total General Expenses</b>	<b>5,960,898</b>	-

**22. Finance Costs**

Description	FY 2024/205	FY 2023/2024
	KShs	KShs
Borrowings (amortized cost) *	-	-
Finance leases (amortized cost)	-	-
Interest on Bank overdrafts/Guarantees	-	-
Interest on loans from commercial banks	-	-
<b>Total finance costs</b>	-	-

**23. Gain/Loss on Disposal of Non-Current Assets**

Description	FY 2024/2025	FY 2023/2024
	KShs	KShs
Property, plant, and equipment	-	-
Intangible assets	-	-
Other assets not capitalised ( <i>specify</i> )	-	-
<b>Total gain on sale of assets</b>	-	-

**24. Unrealized Gain On Fair Value Investments**

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>KShs</b>	<b>KShs</b>
Investments at fair value	-	-
<b>Total gain</b>	-	-

**Notes to the Financial Statements (Continued)**

**25. Medical Services Contracts Gains /Losses**

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>KShs</b>	<b>KShs</b>
Comprehensive care contracts with NHIF/SHA	-	-
Non- Comprehensive contracts care with NHIF/SHA	-	-
Linda Mama Program	-	-
Waivers and Exemptions	(303,855)	-
<b>Total Gain/Loss</b>	<b>(303,855)</b>	<b>-</b>

**26. Impairment Loss**

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>KShs</b>	<b>KShs</b>
Property, plant, and equipment	-	-
Intangible assets	-	-
Investments	-	-
<b>Total impairment loss</b>	<b>-</b>	<b>-</b>

**27. Cash And Cash Equivalents**

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>KShs</b>	<b>KShs</b>
Current accounts	6,853,727	-
On - call deposits	-	-
Fixed deposits accounts	-	-
Cash in hand	-	-
Others( <i>specify</i> )- Mobile money	-	-
<b>Total cash and cash equivalents</b>	<b>6,853,727</b>	<b>-</b>

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Notes to the Financial Statements (Continued)

27 (a). Detailed Analysis of Cash and Cash Equivalents

Description		Insert Current FY	Insert Comparative FY
Financial institution	Account number	KShs	KShs
<b>a) Current account</b>			
Kenya Commercial bank	1224816846	1,189,718	-
Equity Bank	0420285555282	1,244,779	-
Equity Bank	0420285555281	4,419,230	-
<b>Sub- total</b>		<b>6,853,727</b>	-
<b>b) On - call deposits</b>			-
Kenya Commercial bank		-	-
Equity Bank – etc		-	-
<b>Sub- total</b>		-	-
<b>c) Fixed deposits account</b>			-
Bank Name		-	-
<b>Sub- total</b>		-	-
<b>d) Others(specify)</b>		-	-
cash in hand		-	-
Mobile money- Mpesa, Airtel money		-	-
<b>Sub- total</b>		-	-
			-
<b>Grand total</b>		<b>6,853,727</b>	-

28. Prepayments

Description	FY 2024/2025	FY 2023/2024
	Kshs	Kshs
Insurance	-	-
Rent	-	-
Water	-	-
Internet	-	-
Others specify	-	-
Total	-	-

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**29. Receivables From Exchange Transactions**

Description	FY 2024/2025	FY 2023/2024
	KShs	KShs
Medical services receivables	18,234,340	-
Rent receivables	-	-
Other exchange debtors	-	-
Less: impairment allowance	-	-
<b>Total receivables</b>	<b>18,234,340</b>	<b>-</b>

**Analysis of Receivables from Exchange Transactions**

Description	FY 2024/2025		FY 2023/2024	
	Kshs		Kshs	
	FY 2024/2025	% Of the total	FY 2023/2024	% Of the total
Less than 1 year	17,938,390	98.38%	-	%
Between 1- 2 years	295,950	1.62%	-	%
Between 2-3 years	-	%	-	%
Over 3 years	-	%	-	%
<b>Total (a+b)</b>	<b>18,234,340</b>	<b>100%</b>	<b>-</b>	<b>%</b>

**30. Receivables From Non-Exchange Transactions**

Description	FY 2024/2025	FY 2023/2024
	KShs	KShs
Transfers from the County Government	-	-
Undisbursed donor funds	-	-
Other debtors ( <i>non-exchange transactions</i> )	-	-
Less: impairment allowance	-	-
<b>Total</b>	-	-

**Analysis of Receivables from Non-Exchange Transactions**

Description	FY 2024/2025		FY 2023/2024	
	Kshs		Kshs	
	FY 2024/2025	% of the total	FY 2023/2024	% of the total
Less than 1 year	-	%	-	%
Between 1- 2 years	-	%	-	%
Between 2-3 years	-	%	-	%
Over 3 years	-	%	-	%
<b>Total (a+b)</b>	-	%	-	%

**31. Inventories**

Description	FY 2024/2025	FY 2023/2024
	KShs	KShs
Pharmaceutical supplies	5,107,179	-
Non-Pharmaceutical Supplies	523,234	-
Laboratory Supplies	2,021,903	-
Maintenance supplies	-	-
Food supplies	-	-
Linen and clothing supplies	-	-
Cleaning materials supplies	-	-
General supplies	-	-
Less: provision for impairment of stocks	-	-
<b>Total</b>	<b>7,652,316</b>	-

**Detailed disclosure on inventories**

	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
Opening balance	6,888,823	-
Additional Inventory in the year	32,514,414	-
Inventory expensed in the year	(31,750,930)	-
Write-downs in the year	-	-
Others specify	-	-
<b>Closing balance</b>	<b>7,652,316</b>	<b>-</b>

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*Notes to the Financial Statements (Continued)*

**32. Property, Plant and Equipment**

Description	Land	Buildings and Civil works	Motor vehicles	Furniture, fittings, and office equipment	ICT Equipment	Plant and medical equipment	Other Assets (specify)	Capital Work in progress	Total
	Ksh	Ksh	Ksh	Ksh	Ksh	Ksh		Ksh	Ksh
<b>Cost</b>									
At 1 July 2023	-	-	-	-	-	-	-	-	-
Additions	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	-	-	-
Transfers/adjustments	-	-	-	-	-	-	-	-	-
Revaluation Adjustments	-	-	-	-	-	-	-	-	-
<b>At 30<sup>th</sup> Jun 2024</b>	-	-	-	-	-	-	-	-	-
At 1 July 2024	-	-	-	-	-	-	-	-	-
Additions	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	-	-	-
Transfer/adjustments	-	-	-	-	-	-	-	-	-
Revaluation Adjustments	-	-	-	-	-	-	-	-	-
<b>At 30<sup>th</sup> Jun 2025</b>	-	-	-	-	-	-	-	-	-
<b>Depreciation and impairment</b>									
At 1 July 2023		-	-	-	-	-	-	-	-
Depreciation for the year		-	-	-	-	-	-	-	-
Disposals		-	-	-	-	-	-	-	-

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Description	Land	Buildings and Civil works	Motor vehicles	Furniture, fittings, and office equipment	ICT Equipment	Plant and medical equipment	Other Assets (specify)	Capital Work in progress	Total
	Ksh	Ksh	Ksh	Ksh	Ksh	Ksh		Ksh	Ksh
Impairment		-	-	-	-	-	-	-	-
<b>At 30 June 2024</b>		-	-	-	-	-	-	-	-
At July 2024		-	-	-	-	-	-	-	-
Depreciation		-	-	-	-	-	-	-	-
Disposals		-	-	-	-	-	-	-	-
Impairment		-	-	-	-	-	-	-	-
Transfer/adjustment		-	-	-	-	-	-	-	-
<b>At 30<sup>th</sup> June 2025</b>		-	-	-	-	-	-	-	-
<b>Net book values</b>									
At 30 <sup>th</sup> Jun 2024	-	-	-	-	-	-	-	-	-
At 30 <sup>th</sup> Jun 2025	-	-	-	-	-	-	-	-	-

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Notes to the Financial Statements (Continued)

33. Intangible Assets-Software

Description	FY 2024/2025	FY 2023/2024
	KShs	KShs
<b>Cost</b>		
<b>At beginning of the year</b>	-	-
Additions	-	-
Additions-Internal development	-	-
Disposal	-	-
<b>At end of the year</b>	-	-
<b>Amortization and impairment</b>		
<b>At beginning of the year</b>	-	-
Amortization for the period	-	-
Impairment loss	-	-
<b>At end of the year</b>	-	-
<b>NBV</b>	-	-

34. Investment Property

Description	FY 2024/2025	FY 2023/2024
	KShs	KShs
<b>At beginning of the year</b>	-	-
Additions	-	-
Disposals during the year	-	-
Fair value gain	-	-
Depreciation ( <i>where investment property is at cost</i> )	-	-
Impairment	-	-
<b>At end of the year</b>	-	-

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**Notes to the Financial Statements (Continued)**

**35. Biological Assets**

Description	FY 2024/2025	FY 2023/2024
	Kshs	Kshs
Trees in a plantation forest	-	-
Animals: Dairy Cattle, Pigs, Sheep	-	-
Others specify	-	-
<b>Total</b>	-	-

**36. Trade and other Payables**

Description	FY 2024/2025		FY 2023/2024	
	KShs		KShs	
Trade payables	-		-	
Employee dues	-		-	
Third-party payments (e.g. unremitted payroll deductions)	-		-	
Audit fee	-		-	
Doctors' fee	-		-	
<b>Total trade and other payables</b>	-		-	
<b>Ageing analysis:</b>	<b>FY 2024/2025</b>	<b>% of the Total</b>	<b>FY 2023/2024</b>	<b>% of the total</b>
Under one year	-	%	-	%
1-2 years	-	%	-	%
2-3 years	-	%	-	%
Over 3 years	-	%	-	%
<b>Total</b>	-	%	-	%

**37. Refundable Deposits from Customers/Patients**

Description	FY 2024/2025	FY 2023/2024
	KShs	KShs
Medical fees paid in advance	-	-
Credit facility deposit	-	-
Rent deposits	-	-
Others (specify)	-	-
<b>Total deposits</b>	-	-

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<b>Ageing analysis:</b>	<b>FY 2024/2025</b>	<b>% of the Total</b>	<b>FY 2023/2024</b>	<b>% of the Total</b>
Under one year	-	%	-	%
1-2 years	-	%	-	%
2-3 years	-	%	-	%
Over 3 years	-	%	-	%
<b>Total</b>	-	%	-	%

**38. Provisions**

<b>Description</b>	<b>Leave provision</b>	<b>Bonus provision</b>	<b>Other provision</b>	<b>Total</b>
	<b>KShs</b>	<b>KShs</b>	<b>KShs</b>	<b>KShs</b>
<b>Balance at the beginning of the year</b>	-	-	-	-
Additional Provisions	-	-	-	-
Provision utilised	-	-	-	-
Change due to discount & time value for money	-	-	-	-
<b>Total provisions</b>	-	-	-	-
	-	-	-	-
Current Provisions	-	-	-	-
Non-Current Provisions	-	-	-	-
<b>Total Provisions</b>	-	-	-	-

**39. Finance Lease Obligation**

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>Kshs</b>	<b>Kshs</b>
Current Lease obligation	-	-
Long term lease obligation	-	-
<b>Total</b>	-	-

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**40. Deferred Income**

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>KShs</b>	<b>KShs</b>
Current Portion	-	-
Non-Current Portion	-	-
<b>Total</b>	-	-

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Notes to the Financial Statements (Continued)

40 (a) The deferred income movement is as follows:

Description	National government	International funders/donors	Public contributions and donations	Total
Balance b/f	-	-	-	-
Additions during the year	-	-	-	-
Transfers to Capital fund	-	-	-	-
Transfers to statement of financial performance	-	-	-	-
Other transfers ( <i>Specify</i> )	-	-	-	-
Balance C/F	-	-	-	-

41. Borrowings

Description	FY 2024/2025	FY 2023/2024
	KShs	KShs
Balance at beginning of the period	-	-
External borrowings during the year	-	-
Domestic borrowings during the year	-	-
Repayments of external borrowings during the year	-	-
Repayments of domestic borrowings during the year	-	-
Balance at end of the period	-	-

41. (a) Breakdown of Long- and Short-Term Borrowings

Description	FY 2024/2025	FY 2023/2024
	KShs	KShs
Current Obligation	-	-
Non-Current Obligation	-	-
<b>Total</b>	-	-

Notes to the Financial Statements (Continued)

42. Service Concession Arrangements

Description	FY 2024/2025	FY 2023/2024
	KShs	KShs
Fair value of service concession assets recognized under PPE	-	-
Accumulated depreciation to date	-	-
Net carrying amount	-	-
Service concession liability at beginning of the year	-	-
Service concession revenue recognized	-	-
Service concession liability at end of the year	-	-

43. Cash Generated from Operations

Description	FY 2024/2025	FY 2023/2024
	KShs	KShs
Surplus for the year before tax	32,740,383	-
<b>Adjusted for:</b>		
Depreciation	-	-
Non-cash grants received	-	-
Impairment	-	-
Gains and losses on disposal of assets	-	-
Contribution to provisions	-	-
Contribution to impairment allowance	-	-
<b>Working Capital adjustments</b>		
Increase in inventory	(7,652,316)	-
Increase in receivables	(18,234,340)	-
Increase in deferred income	-	-
Increase in payables	-	-
Increase in payments received in advance	-	-
Prior year adjustments	-	-
<b>Net cash flow from operating activities</b>	<b>6,853,727</b>	-

**Notes to the Financial Statements (Continued)**

**44. Financial Risk Management**

Kianyaga Sub County Hospital's activities expose it to a variety of financial risks including credit and liquidity risks and effects of changes in foreign currency. 's overall risk management programme focuses on the unpredictability of changes in the business environment and seeks to minimise the potential adverse effect of such risks on its performance by setting acceptable levels of risk. does not hedge any risks and has in place policies to ensure that credit is only extended to customers with an established credit history.

Kianyaga Sub County Hospital's financial risk management objectives and policies are detailed below:

**(i) Credit risk**

Kianyaga Sub County Hospital has exposure to credit risk, which is the risk that a counterparty will be unable to pay amounts in full when due. Credit risk arises from cash and cash equivalents, and deposits with banks, as well as trade and other receivables and available-for-sale financial investments. Management assesses the credit quality of each customer, taking into account its financial position, past experience and other factors. Individual risk limits are set based on internal or external assessment in accordance with limits set by the directors. The amounts presented in the statement of financial position are net of allowances for doubtful receivables, estimated by 's management based on prior experience and their assessment of the current economic environment. The carrying amount of financial assets recorded in the financial statements representing Kianyaga Sub County Hospital's maximum exposure to credit risk without taking account of the value of any collateral obtained is made up as follows:

<b>Description</b>	<b>Total amount</b>	<b>Fully performing</b>	<b>Past due</b>	<b>Impaired</b>
	<b>Kshs</b>	<b>Kshs</b>	<b>Kshs</b>	<b>Kshs</b>
<b>At 30 June 2024</b>				
Receivables from exchange transactions	-	-	-	-
Receivables from –non-exchange transactions	-	-	-	-
Bank balances	-	-	-	-
<b>Total</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>At 30 June 2025</b>				
Receivables from exchange transactions	18,234,340	18,234,340	-	-
Receivables from –non-exchange transactions	-	-	-	-

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Bank balances	6,853,727	6,853,727	-	-
<b>Total</b>	<b>25,088,067</b>	<b>25,088,067</b>	<b>-</b>	<b>-</b>

**Notes to the Financial Statements (Continued)**

The customers under the fully performing category are paying their debts as they continue trading. The credit risk associated with these receivables is minimal and the allowance for uncollectible amounts that has recognised in the financial statements is considered adequate to cover any potentially irrecoverable amounts. The board of management sets 's credit policies and objectives and lays down parameters within which the various aspects of credit risk management are operated.

**(ii) Liquidity risk management**

Ultimate responsibility for liquidity risk management rests with 's board of management who have built an appropriate liquidity risk management framework for the management of Kianyaga Sub County Hospital's short, medium and long-term funding and liquidity management requirements. Kianyaga Sub County Hospital manages liquidity risk through continuous monitoring of forecasts and actual cash flows.

The table below represents cash flows payable by under non-derivative financial liabilities by their remaining contractual maturities at the reporting date. The amounts disclosed in the table are the contractual undiscounted cash flows. Balances due within 12 months equal their carrying balances, as the impact of discounting is not significant.

Description	Less than 1 month	Between 1-3 months	Over 5 months	Total
	Kshs	Kshs	Kshs	Kshs
<b>At 30 June 2024</b>				
Trade payables	-	-	-	-
Current portion of borrowings	-	-	-	-
Provisions	-	-	-	-
Deferred income	-	-	-	-
Employee benefit obligation	-	-	-	-
<b>Total</b>	-	-	-	-
<b>At 30 June 2025</b>				
Trade payables	-	-	-	-
Current portion of borrowings	-	-	-	-
Provisions	-	-	-	-
Deferred income	-	-	-	-
Employee benefit obligation	-	-	-	-
<b>Total</b>	-	-	-	-

**Notes to the Financial Statements (Continued)**

**(iii) Market risk**

has put in place an internal audit function to assist it in assessing the risk faced by Kianyaga Sub County Hospital on an ongoing basis, evaluate and test the design and effectiveness of its internal accounting and operational controls. Market risk is the risk arising from changes in market prices, such as interest rate, equity prices and foreign exchange rates which will affect Kianyaga Sub County Hospital's income or the value of its holding of financial instruments. The objective of market risk management is to manage and control market risk exposures within acceptable parameters, while optimising the return. Overall responsibility for managing market risk rests with the Audit and Risk Management Committee.

's Finance Department is responsible for the development of detailed risk management policies (subject to review and approval by Audit and Risk Management Committee) and for the day-to-day implementation of those policies. There has been no change to Kianyaga Sub County Hospital's exposure to market risks or the way it manages and measures the risk.

**a) Foreign currency risk**

Kianyaga Sub County Hospital has transactional currency exposures. Such exposure arises through purchases of goods and services that are done in currencies other than the local currency. Invoices denominated in foreign currencies are paid after 30 days from the date of the invoice and conversion at the time of payment is done using the prevailing exchange rate. The carrying amount of Kianyaga Sub County Hospital's foreign currency denominated monetary assets and monetary liabilities at the end of the reporting period are as follows:

Description	KShs	Other currencies	Total
	Kshs		Kshs
<b>At 30 June 2025</b>			
Financial assets (investments, cash, debtors)	-	-	-
Liabilities	-	-	-
Trade and other payables	-	-	-
Borrowings	-	-	-
Net foreign currency asset/(liability)	-	-	-

Kianyaga Sub County Hospital manages foreign exchange risk from future commercial transactions and recognised assets and liabilities by projecting expected sales proceeds and matching the same with expected payments.

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**Notes to the Financial Statements (Continued)**

Description	KShs	Other currencies	Total
	Kshs		Kshs
<b>At 30 June 2025</b>			
Financial assets (investments, cash, debtors)	-	-	-
Liabilities			
Trade and other payables	-	-	-
Borrowings	-	-	-
Net foreign currency asset/(liability)	-	-	-

**Foreign currency sensitivity analysis**

The following table demonstrates the effect on 's statement of financial performance on applying the sensitivity for a reasonable possible change in the exchange rate of the three main transaction currencies, with all other variables held constant. The reverse would also occur if the Kenya Shilling appreciated with all other variables held constant.

Description	Change in currency rate	Effect on Profit before tax	Effect on equity
	Kshs	Kshs	Kshs
<b>2024</b>			
Euro	10%	-	-
USD	10%	-	-
<b>2025</b>			
Euro	10%	-	-
USD	10%	-	-

**b) Interest rate risk**

Interest rate risk is the risk that Kianyaga Sub County Hospital's financial condition may be adversely affected as a result of changes in interest rate levels. 's interest rate risk arises from bank deposits. This exposes to cash flow interest rate risk. The interest rate risk exposure arises mainly from interest rate movements on 's deposits.

**Management of interest rate risk**

To manage the interest rate risk, management has endeavoured to bank with institutions that offer favourable interest rates.

**Notes to the Financial Statements (Continued)**

**Sensitivity analysis**

Kianyaga Sub County Hospital analyses its interest rate exposure on a dynamic basis by conducting a sensitivity analysis. This involves determining the impact on profit or loss of defined rate shifts. The sensitivity analysis for interest rate risk assumes that all other variables, in particular foreign exchange rates, remain constant. The analysis has been performed on the same basis as the prior year.

Using the end of the year figures, the sensitivity analysis indicates the impact on the statement of financial performance if current floating interest rates increase/decrease by one percentage point as a decrease/increase of KShs (2025: KShs). A rate increase/decrease of 5% would result in a decrease/increase in surplus of KShs (2025 – KShs).

**iv) Capital Risk Management**

The objective of Kianyaga Sub County Hospital’s capital risk management is to safeguard its ability to continue as a going concern. Kianyaga Sub County Hospital capital structure comprises of the following funds:

<b>Description</b>	<b>FY 2024/2025</b>	<b>FY 2023/2024</b>
	<b>Kshs</b>	<b>Kshs</b>
Revaluation reserve	-	-
Accumulated Surplus	32,740,383	-
Capital reserve	-	-
<b>Total funds</b>	<b>32,740,383</b>	<b>-</b>
Total borrowings	-	-
Less: cash and bank balances	6,853,727	-
Net debt/ ( <i>excess cash and cash equivalents</i> )	25,886,656	-
<b>Gearing</b>	<b>79%</b>	<b>-</b>

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**Notes to the Financial Statements (Continued)**

**45. Related Party Balances**

**Nature of related party relationships**

Entities and other parties related to Kianyaga Sub County Hospital include those parties who have the ability to exercise control or exercise significant influence over its operating and financial decisions. Related parties include management personnel, their associates, and close family members.

Kirinyaga County Government is the principal shareholder of Kianyaga Sub County Hospital, holding 100% of Kianyaga Sub County Hospital's equity interest. The National Government of Kenya has provided full guarantees to all long-term lenders of Kianyaga Sub County Hospital, both domestic and external. The related parties include:

- i) The National Government;
- ii) The County Government;
- iii) Board of Directors;
- iv) Key Management

Description	FY 2024/2025	FY 2023/2024
	Kshs	Kshs
<b>Transactions with related parties</b>		
<b>a) Services offered to related parties</b>		
Services to	-	-
Sales of services to	-	-
<b>Total</b>	-	-
<b>b) Grants from the Government</b>		
Grants from County Government	-	-
Grants from the National Government Entities	-	-
Donations in kind	119,169,051	-
<b>Total</b>	<b>119,169,051</b>	-
<b>c) Expenses incurred on behalf of related party</b>		

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Description	FY 2024/2025	FY 2023/2024
	Kshs	Kshs
Payments of salaries and wages for Kianyaga Sub County Hospital employees	-	-
Payments for goods and services for Kianyaga Sub County Hospital	-	-
<b>Total</b>	-	-
<b>d) Key management compensation</b>		
Directors' emoluments	83,500	-
Compensation to the medical Sup	-	-
Compensation to key management	-	-
<b>Total</b>	<b>83,500</b>	-

**46. Segment Information**

**47. Contingent Liabilities**

Contingent liabilities	FY 2024/2025	FY 2023/2024
	Kshs	Kshs
Court case against	-	-
Bank guarantees in favour of subsidiary	-	-
<b>Total</b>	-	-

**48. Capital Commitments**

Capital Commitments	FY 2024/2025	FY 2023/2024
	Kshs	Kshs
Authorised For	-	-
Authorised And Contracted For	-	-
<b>Total</b>	-	-

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**49. Events after the Reporting Period**

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

**50. Ultimate and Holding Entity**

Kianyaga Sub County Hospital is a County Corporation/ or a Semi- Autonomous Government Agency under the Department of Health. Its ultimate parent is the County Government of Kirinyaga.

**51. Currency**

The financial statements are presented in Kenya Shillings (Kshs) and all values are rounded off to the nearest shilling.

**20. Appendices**

**Appendix 1: Progress on Follow Up of Auditor Recommendations**

The following is the summary of issues raised by the external auditor, and management comments that were provided to the auditor. We have nominated focal persons to resolve the various issues as shown below with the associated time frame within which we expect the issues to be resolved.

<b>Reference No. on the external audit Report</b>	<b>Issue / Observations from Auditor</b>	<b>Management comments</b>	<b>Status: (Resolved / Not Resolved)</b>	<b>Timeframe: (Put a date when you expect the issue to be resolved)</b>

**Guidance Notes:**

- (i) Use the same reference numbers as contained in the external audit report.
- (ii) Obtain the “Issue/Observation” and “management comments”, required above, from the final external audit report that is signed by Management.
- (iii) Before approving the report, discuss the timeframe with the appointed Focal Point persons within your entity responsible for the implementation of each issue.
- (iv) Indicate the status of “Resolved” or “Not Resolved” by the date of submitting this report to National Treasury.



.....  
**Dr Irene Gatumbi**  
**Hospital Manager**

**Appendix II: Projects Implemented by Kianyaga Sub County Hospital**

**Projects**

Projects implemented by Funded by development partners

Project title	Project Number	Donor	Period/ duration	Donor commitment	Separate donor reporting required as per the donor agreement (Yes/No)	Consolidated in these financial statements (Yes/No)
1						
2						

**Status of Projects completion**

SN	Project	Total project Cost	Total expended to date	Completion % to date	Budget	Actual	Sources of funds
1							
2							
3							

**Appendix III: Inter-Entity Confirmation Letter**

Name of Transferring entity.....

Name of Beneficiary entity.....

<b>Confirmation of amounts received by [Insert name of beneficiary Entity] as at 30<sup>th</sup> June (Current FY)</b>					
Reference Number	Date Disbursed	Recurrent (A)	Development (B)	Total (C)=(A+B)	Remarks
<b>Total</b>					

I confirm that the amounts shown above are correct as of the date indicated.

**Head of Accounts Department - Disbursing Entity:**  
 Name ..... Sign ..... Date .....

**Head of Accounts Department - Beneficiary Entity:**  
 Name ..... Sign ..... Date.....

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**Appendix IV Reporting of Climate Relevant Expenditures**

Project Name	Project Description	Project Objectives	Project Activities	Quarter				Source Of Funds	Implementing Partners
				Q1	Q2	Q3	Q4		

**Appendix V: Disaster Expenditure Reporting Template**

Programme	Sub-programme	Disaster Type	Category of disaster related Activity that require expenditure reporting (response/recovery/mitigation/preparedness)	Expenditure item	Amount (Kshs.)	Comments

