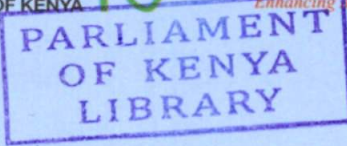


REPUBLIC OF KENYA



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REPORT

OF

THE AUDITOR-GENERAL

ON

SUBA NORTH SUB - COUNTY HOSPITAL

FOR THE YEAR ENDED
30 JUNE, 2025

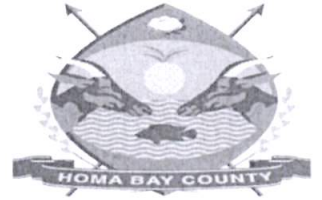
COUNTY GOVERNMENT OF HOMA BAY

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**DEPARTMENT OF HEALTH
SERVICES
SUBA NORTH SUB COUNTY
HOSPITAL
OFFICE OF MEDICAL SUPERINTENDENT**



HOMA BAY COUNTY

Email;

**SUBA NORTH SUB COUNTY HOSPITAL
(Homa Bay County Government)**

ANNUAL REPORT AND FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30TH JUNE 2025

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



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***Suba North Sub County Hospital (Homa Bay County Government)
Annual Report and Financial Statements for The Year Ended 30th June 2025***

1. Acronyms & Glossary of Terms

Provide a list of all acronyms and glossary of terms used in the preparation of this report e.g.

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 the entity.
NO, I/C	Nursing Officer In charge
HMT	Health Management Team
UHC	Universal Healthcare
SNSCH	Suba North Sub County Hospital

2. Key Entity Information and Management

(a) Background information

Suba North Sub County Hospital is a level (4) hospital established under gazette notice number 786 and is domiciled in Homa Bay County under the Department of Health Services. A Board of Management governs the hospital.

(b) Principal Activities

The principal activity/mission/ mandate of the *hospital* is to

- (i) Provide affordable and accessible universal health coverage
- (ii) To modernize infrastructure, machinery and equipment
- (iii) To attain financial sustainability
- (iv) To strengthen human resource capability
- (v) To develop facility health management information system

Vision

To offer high quality and integrated medical care services that are affordable and accessible.

Mission

To be a well-established institution offering high quality efficient integrated medical care services and training of competent health care workers

Mandate

To provide conducive environment that enhance active participation in the provision of high-quality medical care services.

(c) Key Management

The hospital's management is under the following key organs:

- County department of health
- Board of Management
- Accounting Officer/ Medical Superintendent
- Hospital Management Team

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Annual Report and Financial Statements for The Year Ended 30th June 2025*

(d) Fiduciary Management

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

No.	Designation	Name
1.	Medical Superintendent	Dr Mary Amuko
2.	Health Administrative Officer	Mr Gift Okoth Ojwenge
3.	Nursing In Charge (NO I/C)	Mr George Ayot
4.	Head of finance/Accounts	Mr Harrison Oyongo

(e) Fiduciary Oversight Arrangements

Increasingly, hospitals and health systems, along with the individuals serving in their committees and governing boards, are seeing the need for prudent oversight of their organizations. Due to a rising number of lawsuits, trustees need to ensure that their organizations are taking proactive steps to protect their organizations and themselves. Suba North Sub County Hospital, being a government entity has formed various committees to ensure robust fiduciary oversight.

I. Medicines and Therapeutic Committee

The Medicines and Therapeutics Committee (MTC) is a multidisciplinary committee responsible for overseeing policies and procedures related to all aspects of medicines and other HPT use. Medicines and therapeutics committees (MTCs) is formed to improve diagnosis and treatment processes through proper dispensing of medicines. Its importance appears in different aspects such as drug selection process, cost-effectiveness, and control of drug losses. MTCs have shown an important role in promoting, controlling and educating activities of rational drug use.

Members are:

Dr. Mary Amuko (Medical Superintendent) – Chairperson

Mr Daniel Owano (Pharm Technician) – Secretary

MS. Rhoda Bwana (Registered Clinical officer)

Mr. George Ayot (Nursing Officer)

Ms Christine Amondi (Medical Lab Manager)

Mr. Gift Okoth (Hospital Administrative Officer)

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II. Billing and Waiver Committee

The billing and waiver committee is responsible for ensuring that the citizens receive healthcare services, tracking patient bill status to ensure that bills that patients unable to pay are waived or exempted in line with the government policy.

The members are;

Mr. Gift Okoth (Administrator) – Chairperson

Mr George Ayot (Nursing Officer)

Mr. Immaculate Achieng (Social Work) – Secretary

Mr. Harrison Oyongo (Accountant)

Mr. Phelix Henry Angula (Clinical Officer)

III. Infection and Prevention Committee

This committee looks into the prevention of infection in the facility

IV. Catering Committee

This committee advises and monitors patient diet

V. Hospital Management Team

This committee consists of all Hospital departmental heads who run the facility through general management and effective decision-making. The team ensures that all procedures are adhered to and that clients receive quality services through HMT follow up meetings

VI. Hospital finance Committee

Goes through departmental budget proposals and ensure the allocations are done putting into consideration priorities.

VII. Hospital Management Committee

Oversight and resource mobilization roles to the facility.

*Suba North Sub County Hospital (Homa Bay County Government)
Annual Report and Financial Statements for The Year Ended 30th June 2025*

(f) Entity Headquarters

P.O. Box 469-40300
Homa Bay, KENYA
Entity Contacts
Telephone: (254) 2038617565/55
E-mail: governorsofficehomabaycounty.go.ke
Website: www.Homa Bay.go.ke

(g) Entity Contacts

P.O. Box 50,40305
Mbita ,Kenya
Telephone: (+254) 715593766
E-mail: mbitaschospital@gmail.com

(h) Entity Bankers

Kenya Commercial Bank
Mbita Branch
Homa Bay County.

(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

The County Attorney
P.O. Box 469-40300
Homa Bay, KENYA




Suba North Sub County Hospital (Homa Bay County Government)
Annual Report and Financial Statements for The Year Ended 30th June 2025

3. The Board of Management

Ref	Directors	Details
1.	Mr Tom Oyugi	Financial Expert with a vast experience in the field of Accounts A professional Accountant. He Chairs the Board of management Board meetings. He is an independent Board Chairman with no link to the management team and operations.
2.	Dr Mary Amuko	Medical Officer
3.	Mr Elisha Okoth	Certificate in Social works
4.	Benjamin Mboya	Community Oral Health Officer
5.	Eunice Achieng	Certificate in Theology
6.	Hilder Kisero	Certificate in Development Studies
7.	Joseph Onyango	Degree in Public Administration

*Suba North Sub County Hospital (Homa Bay County Government)
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4. Key Management Team

No	Management	Details
1.	Medical Superintendent 	BSC Medicine and Surgery
2.	Health Administrative Officer 	B.A Public Administration
3.	Nursing Officer In charge	
4.	Accountant 	Certified Public Accountant

5. Chairman's Statement

It is my pleasure to present to you the Annual Report and Financial Statements of Suba North Sub County Hospital for the financial year ended 30 June 2025. The Board of Management is proud of the achievements realized by the hospital in this period towards "Offering high quality and integrated medical care services that are affordable and accessible". Considering the scale and complexity of operations of this hospital in Homa Bay County, I am particularly impressed by the staff commitment to delivering the best possible service to patients.

Regulatory Environment

Management and operations of the hospital is guided by the existing legal, policy, and institutional frameworks that govern health sector to ensure efficient and effective delivery of services in the Hospital. The Kenyan Constitution 2010 under the Bill of Rights provides the right to the highest attainable standard of health including reproductive health care and emergency medical treatment.

In addition, the Health Act 2016 establishes a unified health system that coordinates the inter-relationship between the national government and county government health systems, provides for regulation of health care services and health care service providers, health products and health technologies for connected purposes. It also provides for Health financing; Research; E-Health; Human organs and tissue transplant; Traditional and alternative medicine; Mental; Environmental and Public health; Standards of health; Reproductive health; and Emergency treatment. With this in mind, and the strategic placement of Suba North Sub County Hospital in the health sector, the Board is committed to ensure continued quality service delivery to the citizens.

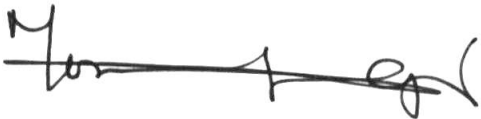
Sector Alignment

Universal healthcare (UHC) is one of the big four agenda at the National level and points to the universal Sustainable Development Goal 2030 of Good Health and Well-being. The agenda aims at providing affordable healthcare for all households through NHIF scheme. The Kenyan Vision 2030 aims at creating a globally competitive and prosperous country by providing a high quality of life for all its citizens. Under the social pillar, the overall goal of the Health Sector is to provide equitable, affordable and quality healthcare to all citizens.

*Suba North Sub County Hospital (Homa Bay County Government)
Annual Report and Financial Statements for The Year Ended 30th June 2025*

Acknowledgement

On behalf of the Board, I would like to thank all our stakeholders especially the County Government of Homa Bay, Ministry of Health, Social Health Authority, Development partners and the community at large for the support they continue to accord the hospital without which our achievements would not have been realized. As we move into a new year, I would like to express my gratitude to Suba North Sub County Hospital staff, Hospital Management Team leaders and the Board, who have worked sacrificially and who exemplify our hospital's mission and vision each day. Finally, I strongly believe that our strategy and the staff in place will consistently drive the future development of Suba North Sub County hospital, as has been over the years



Mr Tom Oyugi

Chairman – SNSCH Board of Management

Facelift. This is a milestone even though challenges still are at large in realizing the optimum utilization in the Facility

- d) **Strengthened partnerships:** The Hospital has fostered strong partnerships with partners, and local organization to improve health outcomes and reduce health disparities especially in the area of malaria, HIV and TB control and treatment.

Challenges and Mitigation Measures:


- a) Low uptake of health services due to poor health seeking behaviour in community
- b) Low uptake of SHA/SHIF Insurance in the catchment
- c) Investment towards curative and rehabilitative services at the expense of preventive and promotive services.
- d) Low uptake of ICT (telemedicine) in the Facility coupled with inadequate documentation tools
- e) Lack of infrastructure and personnel like nurses, medical doctors and lab technologists which affect services deliveries.
- f) Major Partners terminating their services in the County thus making it a challenge to according to the laid down guidelines i.e. USAID

Mitigation Measures:

To address these challenges, the following measures are put in place

- a) Community outreaches and sensitization on the availability of telemedicine services for children in the facility, this is to be done by CHVs and the facility to facilitate
- b) Encouraged use of home-based care services.
- c) Strengthening of community-based care services especially in schools, churches, or community centres; adoption of integrated care models for patients who have chronic conditions or require ongoing rehabilitation; ensuring ongoing patient education and empowerment.
- d) Employing technical staff on contract/locum basis to address acute shortage of nurses and lab technologies.

I take this opportunity to acknowledge the support of The Homabay County Government, Development partners, the Staffs without which much Suba North Hospital would not have realized the aforementioned milestones. Many thanks to the chairman and Members of the Board for their strategic guidance and support. I wish to also register my appreciation to all stakeholders.


Dr Mary Amuko

Medical Superintendent

6. Report of The Medical Superintendent

The performance review for financial year 2024/2025 provides us another opportunity to reflect on the gains made and opportunities for improvement towards continuous provision of quality, timely and cost effective and patient-centred specialised healthcare services. Suba North Sub County Hospital maintained steady growth throughout the year attributed to increased activity levels with a majority of the areas recording improved performance.

The Hospital has a robust financial management system christened *The Afya Rekod* that is based on the existing government financial management rules and regulations, Public Finance Management (PFM) act 2012, International Public Sector Accounting Standards (IPSAS) and International Financial Reporting Standard (IFRS).

I. I. PERFORMANCE OVER VIEW

The Hospital provides a comprehensive performance and contributions towards achieving the departmental programs objectives and at the end of the financial year it contributes highly to the achievement the Homabay county department of Health Vision.

Entity Main Objective.

The hospital is entrusted with the responsibility of ensuring the provision of quality healthcare services to its residents.

Sub Objectives

- Eliminating communicable conditions,
- Halting and reversing the rising burden of non-communicable conditions,
- Reducing the burden of violence and injuries.
- Providing essential health services,
- Minimizing exposure to health risk factors.
- Strengthening collaboration with private and other sectors.

These Objectives are well highlighted in Kenya's epidemiological profile

Summary of Achievements:

This report gives most significant achievements in Suba North Hospital during the fiscal year with milestones such as:

- a) **Availability of Health Commodities for healthcare services:** This has been achieved by ensuring constant Procurement of drugs, Non-pharmaceuticals, Lab Reagents, Sanitary items balanced patient Ration to the patients seeking healthcare services in the hospital.
- b) **Promoted healthy behaviours** The department has launched several initiatives to promote healthy behaviours in the community, including a campaign to discouraging gender based Violence, VCT Services, effects of alcohol addiction, regular exercise and healthy eating, and providing friendly environment for youth friendly and MAPS service uptake areas within the hospital to encourage them to come to the facility for uptake of the services, to achieve this goal, the hospital has constantly engaged CHVs for mobilization and community dialog and encouraging community to enroll on NHIF.
- c) **Improved maternal and child health:** This is achieved by encouraging mothers through CHVs to take advantage of SHA/SHIF Packages, increase attendance of MCH services and increase of immunization rate. Also, renovating maternity ward thus giving the much-needed

*Suba North Sub County Hospital (Homa Bay County Government)
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7. Statement of Performance Against Predetermined Objectives

Section 164 Subsection 2 (f) of the Public Finance Management Act, 2012 requires the accounting officer to include in the financial statement, a statement of the County Government entity’s performance against predetermined objectives.

Suba North Sub County Hospital has Five Objectives within the current CIDP of the Homa Bay County Government they are as follows;

OBJECTIVES

1. To strengthen the human resource capacity
2. To offer quality healthcare services under one roof in a most effective and efficient for the satisfaction of the customer.
3. Modernize infrastructure machinery and equipment.
4. To attain financial sustainability
5. To develop the facility health management information system.

Suba North Sub County Hospital develops its annual work plans based on the above 5 objectives. Assessment of the Board’s performance against its annual work plan done on a quarterly basis. The County Hospital achieved its performance targets set for the FY 2024/2025 period for its strategic pillars, as indicated in the table below:

Pillar- To Provide Integrated Accessible and Quality Healthcare Services Through Effective and Efficient Infrastructure, Training Research and Partnership.	1. To offer quality Health Services under one roof in a most effective and efficient to the satisfaction of the customer.	-To reduce referrals to other facilities. -To offer diversity in services offered by SNSCH. -To fast-track efficiency and staff satisfaction	-Establish quality healthcare standards. (accreditation) -Strengthen client follow up mechanism and systems (Referral clinics established).	-Improved quality of healthcare. -Expanded client base. -Improved facility reputation. -Strengthened partnership with
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*Suba North Sub County Hospital (Homa Bay County Government)
Annual Report and Financial Statements for The Year Ended 30th June 2025*

		with modern facility.	-Strengthen partnership with communities, public and private sectors. -Initiate provider driven insurance.	communities, public and private sector.
	2. Modernise infrastructure, machinery and equipment	-To develop an infrastructure master plan. - Fully equip the facility.	-To develop a master plan. -Obtain equipment and maintain through the MESS program.	-All our clients are able to receive services irrespective of mode of healthcare financing.
	3. To attain financial sustainability	-Cost-benefit analysis. -Enhance internal control systems. Diversification of revenue	-Conduct market survey for costing of commodities -Incorporating various modes of revenue generation cash and SHA -Upgrade health management	-Improved service delivery. -Improved staff retention.

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	<p>4. To strengthen the human resource capacity.</p>	<p>generation streams.</p> <p>-Full potential and optimal utilization of staff.</p> <p>-To enhance Hospital performance by training and motivation of staff.</p> <p>-Upscale leadership and management for increased performances.</p> <p>-Focus on partnership with other Health</p>	<p>system to improve internal control and hence revenue collection.</p> <p>Keep staff informed of any development in the hospital through circulars and holding regular meetings.</p> <p>Holding weekly continuous medical education.</p>	<p>-Efficient data collection, management and dissemination.</p> <p>-Improved diagnosis and treatment.</p> <p>-Improved access to relevant health infrastructure and data.</p>
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*Suba North Sub County Hospital (Homa Bay County Government)
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	<p>5. To develop facility Health Management Information System.</p>	<p>Service Providers for technical support.</p> <p>-Up scaling quick and efficient service delivery.</p> <p>-ICT systems in place.</p> <p>-Build staff ICT capacity.</p> <p>-Improve access to ICT materials.</p>	<p>-Upgrade ICT systems.</p> <p>-Build staff ICT capacity by training.</p> <p>-Improve access to IEC materials.</p>	
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Suba North Sub County Hospital (Homa Bay County Government)
Annual Report and Financial Statements for The Year Ended 30th June 2025

8. Corporate Governance Statement

The facility holds quarterly board meetings with sub-committee meetings as need may arise. The sub committees include;

	Governance Parameter	Governance Practice
1.0	Ethics and Integrity	<p>1. The facility commits:</p> <ul style="list-style-type: none"> (a) Provide ethical leadership in the management of the organization. (b) Establish the core values of the organization and ensure that the values are aligned to the Constitution of Kenya and underpin sustainable practices. (c) Ensure that all members of the organization adhere to the core values. (d) Ensure that the corporate strategy includes measurable targets for improving ethical behavior. (e) Ensure that the ethical practices of the organization are effectively monitored.
1.1	Code of Conduct and Ethics	<p>1. The facility commits:</p> <ul style="list-style-type: none"> (a) Ensure that a code of conduct and ethics is developed. (b) Ensure that all members of the organization subscribe to the code of conduct and ethics. (c) Review the code of conduct and ethics as necessary. (d) Promote ethical conduct and sanction misconduct. (e) Ensure that a corporate gifts policy is in place. (f) Receive from the Committee responsible for Governance and Compliance, a report on the level of adherence to the code of conduct and ethics by members of the organization.
	Governance Parameter	Governance Practice

Suba North Sub County Hospital (Homa Bay County Government)
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1.2	Conflict of Interest	<ol style="list-style-type: none"> 1. The facility management commits to ensure that a policy on the management of conflict of interests is in place. 2. The facility management commits to: <ol style="list-style-type: none"> (a) Declare any real or perceived conflict of interest with the organization upon appointment to the Board. (b) Declare to the Board any real or perceived conflict of interest that may subsequently arise. (c) Not take part in any discussions or decision-making regarding any subject or transaction in which they have a conflict of interest. (d) Not influence in any manner whatsoever decision making on any matter in which they have interest.
1.3	Corporate Reputation and Image	<ol style="list-style-type: none"> 1. The facility management commits to: <ol style="list-style-type: none"> (a) Ensure that the organization develops a strategy on corporate reputation and image. (b) Promote a positive image of the organization.
1.4	Corporate Social Responsibility and Investment	<ol style="list-style-type: none"> 1. The facility management commits to: <ol style="list-style-type: none"> (a) That a policy on good corporate citizenship is in place. (b) That the policy on good corporate citizenship is implemented. (c) That a sustainable and appropriate budget is allocated for corporate social responsibility and investment. (d) That the organization respects and promotes sustainable environment.
1.5	Whistle-Blowing	<ol style="list-style-type: none"> 1. The facility board should ensure that: <ol style="list-style-type: none"> (a) There is a whistle blowing policy in the organization. (b) The whistle-blowing policy protects and prohibits victimization of those who disclose or provide information in good faith. (c) An independent party is responsible for receiving and investigating reports received.
1.6	Roles and Functions of the Board	<ol style="list-style-type: none"> a. Mobilise Resources for the facility b. Oversee the administration of funds allocated to health facility c. Approve Annual work plans, Budgets and Procurement Plans on estimated expenditures. d. Approve budgets before AIE (Authority to Incur Expenditure is issued. e. Cause to keep a permanent record of all its deliberations. f. Cause to be kept basic books of accounts and records of accounts of the income, expenditure, assets and liabilities of health facilities as prescribed by officer administering the fund, g. Prepare and submit to County Chief Officer of Health certified periodic financial and performance reports

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9. Management Discussion and Analysis

The management used tables to make the information user friendly. The information does show a comparison with the previous years; Hospital management is preparing financial statements under the accrual system. Suba North Sub County Hospital main source of Revenue is Claims paid by the Social Health Insurance Fund (SHIF) and own source revenue christened as the Facility Improvement Fund (FIF)

Clinical Performance

Suba North Sub County Hospital provides a wide range of highly specialized healthcare services to Kenyans, patients from Homabay County and across the neighboring counties. Specialized services include, special outpatient clinics, inpatient care, day care procedures for surgery, ophthalmology, dental, Xray/Radiography services amongst other services. The hospital also provides clinical support services that include laboratory and pharmacy.

Overall patient attendance

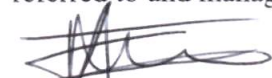
The average patient attendance for the year 2024/2025 was 14,469 out patients. With a bed capacity of 78. There was a sharp decrease in the in-patients compared to the year 2023/ 24. This was attributed to the effect of Radical Patient Care Management in the facility.

Average Length of Stay

The average length of stay (ALOS) is an indicator of efficiency in the provision of inpatient health care in the hospital. Generally, the average length of stay in the hospital has been falling

Mortality Rate

During the period under review, the death rate averaged 5%. This is attributed to the critically ill patients referred to and managed in the hospital.


Dr. Mary Amuko

Medical Superintendent

10. Environmental And Sustainability Reporting

Suba North Sub County Hospital exists to transform lives of human beings and their environment. This is what guides us to deliver our strategy, putting the client/Citizen first, delivering health services, and improving operational excellence. Below is an outline of the organisation's policies and activities that promote sustainability.

Sustainability strategy and profile

The top management especially the accounting officer refers to sustainable efforts, broad trends in political and macroeconomic affecting sustainability priorities, reference to international best practices and key achievements and failure.

i) Environmental performance

The organization has environmental policy in the county environment department guiding the organisation. The hospital also manages its waste within the facility through public health in collaboration with department of environment. During the year the facility has done maintenance for the existing incinerator.

ii) Employee welfare

The hospital implements policies guiding the hiring process and whether they take into account the gender ratio, stakeholder engagements and how often they are improved. It also ensures that employees are supported in improving skills and managing knowledge at work. The organisation has in place a policy on safety and compliance with Occupational Safety and Health Act of 2007, (OSHA.)

iii) Market place practices-

a) Responsible competition practice.

The organisation ensures responsible competition practices with fair competition, and respect for competitors by competitively awarding contract.

b) Responsible Supply chain and supplier relations

The management maintains good business practices, and treats its own suppliers responsibly by honouring contracts and respecting payment practices.

c) Responsible marketing and advertisement

The hospital maintains ethical marketing practices.

Suba North Sub County Hospital (Homa Bay County Government)
Annual Report and Financial Statements for The Year Ended 30th June 2025

iv) Corporate Social Responsibility / Community Engagements

The hospital management has from time to time provided waivers and exemptions to patients who are not able to pay hospital bills based on investigations and report done by social services department as stated in the waiver policy. The hospital has ongoing patient follow ups within the community plus community sensitization on environmental issues through its arm of public health.

Suba North Sub County Hospital (Homa Bay County Government)
Annual Report and Financial Statements for The Year Ended 30th June 2025

11. Report of The Board of Management

The Board members submit their report together with the Financial Statements for the year ended June 30, 2025, which show the state of the hospital's affairs.

Principal activities

The principal activities of the entity are;

- (i) Provide affordable and accessible universal health coverage
- (ii) To modernize infrastructure, machinery and equipment
- (iii) To attain financial sustainability
- (iv) To strengthen human resource capability
- (v) To develop facility health management information system.

Results

The results of the entity for the year ended June 30 ,2025 are set out on page 1-37

Board of Management

The members of the Board who served during the year are shown on page vii. During the year 2024/25 no board member retired/ resigned and a new set of Board members were appointed.

Auditors

The Auditor General is responsible for the statutory audit of the Suba North Sub County Hospital in accordance with Article 229 of the Constitution of Kenya and the Public Audit Act 2015 nominated by the Auditor General to carry out the audit of the Suba North Sub County Hospital for the year ended June 30, 2025 in accordance to section 23 of the Public Audit Act, 2015 which empowers the Auditor General to appoint an auditor to audit on his behalf.

By Order of the Board



Dr. Mary Amuko
Secretary of 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 Suba North Sub County Hospital, which give a true and fair view of the state of affairs of the hospital at the end of the financial year and the operating results of the hospital for that year. The Board of Management is also required to ensure that Suba North Sub County Hospital keeps proper accounting records, which disclose with reasonable accuracy the financial position of the hospital. The board members are also responsible for safeguarding the assets of the Suba North Sub County Hospital.

The Board of Management is responsible for the preparation and presentation of the hospital financial statements, which give a true and fair view of the state of affairs of the hospital as at the end of the financial year. This responsibility includes:

- (i) Maintaining adequate financial management arrangements and ensuring that these continue to be effective throughout the reporting period
- (ii) Maintaining proper accounting records, which disclose with reasonable accuracy at any time the financial position of the entity,
- (iii) Designing, implementing and maintaining internal controls relevant to the preparation and fair presentation of the financial statements, and ensuring that they are free from material misstatements, whether due to error or fraud,
- (iv) Safeguarding the assets of the hospital
- (iv) Selecting and applying appropriate accounting policies, and
- (vi) making accounting estimates that are reasonable in the circumstances.

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

Suba North Sub County Hospital (Homa Bay County Government)
Annual Report and Financial Statements for The Year Ended 30th June 2025

Nothing has come to the attention of the Board of management to indicate that the 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

The Hospital's financial statements were approved by the Board on 26/11/25 and signed on its behalf by:



Mr. Tom Oyugi
Chairperson
Board of Management



Dr. Mary Amuko
Accounting Officer

REPUBLIC OF KENYA

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P.O. Box 30084-00100
NAIROBI

REPORT OF THE AUDITOR-GENERAL ON SUBA NORTH SUB - COUNTY HOSPITAL FOR THE YEAR ENDED 30 JUNE, 2025 - COUNTY GOVERNMENT OF HOMA BAY

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.

An Adverse Opinion is issued when the Auditor-General determines that the financial statements are materially misstated and are not fairly presented in accordance with the applicable financial reporting framework. The Report on the 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

Adverse Opinion

I have audited the accompanying financial statements of Suba North Sub - County Hospital - County Government of Homa Bay set out on pages 1 to 35, which comprise of the statement of financial position 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, because of the significance of the matters discussed in the Basis for Adverse Opinion section of my report, the financial statements do not present fairly, in all material respects, the financial position of Suba North Sub - County Hospital - County Government of Homa Bay 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 do not comply with the Public Finance Management Act, 2012.

Basis for Adverse Opinion

1.0. Non-compliance with the Prescribed Reporting Framework

A review of the financial statement revealed the following non-compliance with the financial reporting template provided by the Public Sector Accounting Standards Board in line with the provisions of Section 164(3) of the Public Finance Management Act, 2012:

- i. While signing the financial statements, the Hospital's accountant did not indicate his ICPAK number, an indication that the financial statements were prepared by an unqualified accountant.
- ii. Some of the mounts in the financial statements are presented with two (2) decimal points, contrary to Note 2 to the financial statements on statement of compliance and basis of preparation, in the reporting template, which states in part that "the values are rounded off to the nearest shilling".
- iii. The statement of financial position reflects trade and other payables balance of Kshs.26,655,398 whose ageing analysis was not provided in the supporting Note 20 to the financial statements.

In the circumstances, the financial statements do not comply with the accounting standards as prescribed by the Public Sector Accounting Standards Board. Also, Management was in breach of the law.

2.0. Inaccuracies in the Financial Statement

Review of the financial statements revealed the following inaccuracies:

- i. The financial statements reflect five (5) comparative balances or amounts which differ with the respective closing balances reported in the audited financial statements for the year ended 30 June, 2024, resulting in unreconciled variances as summarized below:

Particulars	Comparative Balance (2024/2025) (Kshs.)	Closing Balance (2023/2024) (Kshs.)	Variance (Kshs.)
Statement of Changes in Net Assets:			
Total net assets	30,161,025	17,030,045	(10,093,049)
Notes to the Financial Statements			
Receivables from exchange transactions	17,170,000	0	17,170,000
Receivables from non-exchange transactions	0	17,445,415	(17,445,415)

- ii. The statement of financial position reflects accumulated surplus balance Kshs.27,999,667 which differs with the re-computed balance of Kshs.38,186,035, resulting in a variance of Kshs.10,186,368 which represents opening balance that was omitted without explanation.
- iii. The statement of financial position reflects trade and other payables balance of Kshs.9,893,248, while re-computation gives a balance of Kshs.16,300,132 (calculated as shown below), resulting in an unreconciled variance of negative Kshs.6,406,884:

Particulars	Amount (Kshs.)
Trade and other payables balance as at 30 June, 2024	6,085,000
<i>Add:</i> Total expenses, less depreciation and amortization expense incurred in 2024/2025 - Statement of financial performance	65,921,848
<i>Less:</i> Total payments made in 2024/2025 - Statement of cash flows	(55,706,716)
Re-Computed trade and other payables as at 30 June, 2025	16,300,132

- iv. The statement of financial position reflects property, plant and equipment balance of Kshs.24,571,400, while the supporting Note 19 to the financial statements indicates net book value balance of Kshs.25,605,059 as at 30 June, 2025, resulting in an unreconciled variance of Kshs.1,033,659.
- v. The statement of changes in net assets reflects nil accumulated surplus/deficit and capital fund balances as at 1 July, 2024, which differ with the corresponding closing balances as at 30 June, 2024 of Kshs.10,186,368 and Kshs.19,974,657, resulting in unreconciled variances of negative Kshs.10,186,368 and negative Kshs.19,974,657 respectively.
- vi. Further, the statement of changes in net assets reflects accumulated surplus as at 30 June, 2025 balance of Kshs.20,103,346 which differs with the re-computed balance of Kshs.30,289,714, resulting in a variance of negative Kshs.10,186,368 which relates to balance as at 30 June, 2024 that was excluded without explanation.

- vii. In addition, the statement of changes in net assets reflects capital fund balance as at 30 June, 2025 of Kshs.7,565,360 which differs with the re-computed balance of Kshs.27,540,017, resulting in a variance of negative Kshs.19,974,657 which relates to balance as at 30 June, 2024 that was excluded without explanation.
- viii. The statement of cash flows reflects rendering of service-medical service income amount of Kshs.2,927,558, while the statement of comparison of budget and actual amounts shows a corresponding amount of Kshs.57,380,930, resulting in a variance of Kshs.54,453,372 relating to miscellaneous income (SHA). No explanation was provided for the different classification of the receipts from Social Health Authority (SHA).
- ix. The statement of comparison of budget and actual amounts reflects budget carryovers from the previous year balance of Kshs.758,382 which is erroneously reflected as original budget instead of adjustments, contrary to the prescribed reporting template which requires budget carryovers from the previous year to be indicated under Adjustments, Final Budget and Actual on Comparable Basis columns.
- x. Further, the statement of comparison of budget and actual amounts reflects rendering of services—medical service income performance difference of Kshs.51,448,105 which differs with the re-computed balance of Kshs.36,219,070, resulting in an unreconciled variance of Kshs.15,229,035.
- xi. In addition, the statement of comparison of budget and actual amounts reflects incorrect percentage utilization against rendering of services-medical service income (90% instead of 61%).
- xii. Note 21 on cash generated from operations, which is supposed to reconcile surplus for the year with net cash flow from operating activities, reflects net cash flow from operating activities amount of Kshs.1,889,463 which differs with a corresponding amount of Kshs.12,085,839, resulting in a variance of Kshs.12,141,376 representing purchase of property, plant and equipment which is not part of operating activities.
- xiii. Further, the Note 21 reflects decrease in receivables amount of negative Kshs.8,853,242 which differs with the recomputed balance of Kshs.19,040,380, resulting in an unexplained variance of negative Kshs.27,893,622.
- xiv. Additionally, the Note 21 reflects increase in trade and other payables amount of Kshs.20,570,398, while re-computation gives an increase of Kshs.3,808,248, resulting in an un-reconciled variance of Kshs.16,762,150.

In the circumstances, the accuracy and fair presentation of the financial statement could not be confirmed.

3.0. Unsupported Repairs and Maintenance

The statement of financial performance reflects repairs and maintenance amount of Kshs.1,750,650 which, as disclosed in Note 13 to the financial statements, includes

medical equipment expenses of Kshs.382,880 out of which, Kshs.207,150 was not supported by requisitions, local purchase orders, delivery notes, pre-inspection and post-inspection reports from public works, goods received notes and ETR receipts cash sale.

In the circumstances, the accuracy and completeness of the amount of Kshs.207,150 spent on medical equipment could not be confirmed.

4.0. Unsupported General Expenses

The statement of financial performance reflects general expenses amount of Kshs.8,038,587 as disclosed in Note 15 to the financial statements. The following audit issues were noted.

4.1. Unsupported Staff Training and Development

Included in the amount is staff training and development amount of Kshs.557,500 which further includes Kshs.461,236 whose supporting approvals for the training, approved rates, prove of travel, back to office report and ETR receipt for sale receipt were not provided for audit.

4.2. Unsupported Travel and Accommodation Allowance

Also included in the amount is travel and accommodation allowance amount of Kshs.262,100 which further includes Kshs.156,466 whose supporting documents, such as approved rates, prove of travel, back to office report and ETR receipt for cash sale, were not provided for audit.

In the circumstances, the accuracy and completeness of the expenses amounting to Kshs.617,702 could not be confirmed.

5.0. Unsupported Receivables from Exchange Transactions

The statement of financial position reflects receivables from exchange transactions balance of Kshs.8,791,000 as disclosed in Note 17 to the financial statements. However, the supporting schedules did not indicate the service rendered. Further, evidence of efforts made by management to recover the balances was not provided. In addition, management did not make any provision for bad and doubtful debts in the financial statements.

In the circumstances, the accuracy, completeness and regularity of Kshs.8,791,000 for receivables from exchange transactions could not be confirmed.

6.0. Unsupported Trade and Other Payables Balance

The statement of financial position reflects trade and other payables balance of Kshs.26,655,398 as disclosed in Note 20 to the financial statements. However, the supporting ledgers, detailed ageing analysis, invoices or fee notes, demand notices, suppliers' statements, and delivery notes were not provided for audit. Further,

Management did not demonstrate measures put in place to ensure bills were paid in time to avoid further accumulation.

In the circumstances, the accuracy, completeness of the trade and other payables balance of Kshs.26,655,398 8 could not be confirmed.

7.0. Incomplete Property, Plant and Equipment Balance

Note 19 to the financial statements on property, plant and equipment reflects additions totalling Kshs.12,196,376 whose supporting schedules per asset category and other relevant documentation were not provided for audit. Further, Note 19 reflects accumulated depreciation balance of Kshs.24,571,400 whose supporting depreciation policy was not provided for audit. Additionally, review of records revealed that Suba North Sub County Hospital had land, buildings, Incinerator, furniture and fittings, medical equipment, ICT equipment, two (2) Toyota Landcruiser vehicles and nine (9) motorbikes which were not recorded in the assets register or captured in the financial statements.

Further, Management did not maintain a detailed fixed asset register detailing the types and names of the assets, log book number, location, opening balances, additions, dates of acquisitions, disposals, depreciation charged, accumulated depreciation to date and net book value of the assets. In addition, the Hospital did not have title deed for the land despite the planned and ongoing structure development, Management did not provide asset valuation reports to support the reported figures, log books for the vehicles were not availed, management did not provide records for assets' count and verification carried at regular intervals to confirm existence and condition of the recorded assets.

Further review of the Hospital's records and physical verification revealed the following unsatisfactory matters.

- i. The Hospital lacked ownership documents of donated assets. This made it difficult to have such assets valued, insured and disposed of if un-economically viable.
- ii. It was also noted that most of the assets were not tagged and asset movement's registers was not kept.
- iii. There was no evidence of any disposal of assets, yet there were quite a number of bonded items kept in the respective stores.
- iv. No assets manager or in charge was appointed or asset management committee put in place to effectively manage the Hospital's assets.

In the circumstances, the accuracy and completeness of the reported property, plant and equipment balance and the propriety of the additions of Kshs.12,196,376 could not be confirmed.

The audit was conducted in accordance with International Standards of Supreme Audit Institutions (ISSAIs). I am independent of Suba North Sub County Hospital-County Government of Homa Bay 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 adverse opinion.

Emphasis of Matter

Budgetary Control and Performance

The statement of comparison of budget and actual amounts reflects receipts budget and actual on comparable amounts of Kshs.108,829,035 and Kshs.57,380,930 respectively, resulting in underfunding of Kshs.51,448,105, or 47% of the budget. Similarly, the statement reflects total capital expenditure budget of Kshs.30,000,000 and actual on comparable basis amount of Kshs.12,196,376, resulting in under expenditure of Kshs.17,803,626 or 59% of the budget. Further, the itemized capital budget of Kshs.30,000,000 and vote book(s) were not provided for audit review. In addition, the statement reflects grants and subsidies actual expenditure of Kshs.9,047,357 which was not budgeted for.

The under-funding and under expenditure affected the planned activities and may have impacted negatively on the operations of the Hospital. Also, the regularity of the expenditure on grants and subsidies could not be confirmed.

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 effect of the matters described in the Basis for Adverse Opinion section, I have determined that there are no other key audit matters to communicate in my report.

Other Matter

Unresolved Prior Year Matters

In the prior year's audit report, several issues were raised under the Report on Financial Statements and Lawfulness and Effectiveness in Use of Public Resources respectively. Review of the status during audit of the Hospital in 2024/2025 revealed that the following matters remained unresolved:

S/No.	Financial Year	Audit Issue
1.	2023/2024	Errors in the Financial Statements
2.	2023/2024	Unsupported Medical/Clinical Expenses
3.	2023/2024	Unsupported Cash and Cash equivalent Balance
4.	2023/2024	Inaccurate Balance of Receivable from Non-Exchange Transactions
5.	2023/2024	Incomplete Property, Plant and Equipment Balance
6.	2023/2024	Lack of Autonomy in the Operation of the Hospital
7.	2023/2024	Non-Compliance with Kenya Quality Model for Health Policy Guidelines
8.	2023/2024	Lack of Approved Budget

Other Information

The Management is responsible for the Other Information set out on page iii to xxiv which comprises Key Entity Information and Management, Board of Management, Key Management Team, Chairman's Statement, Report of the Medical Superintendent, Statement of Performance Against Predetermine Objectives, Corporate Governance Statement, Management Discussion and Analysis, Environment and Sustainability Report, 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 of 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 conclusion 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, because of the significance of the matters discussed in the Basis for Adverse Opinion and the Basis for Conclusion on Lawfulness and Effectiveness in the Use of Public Resources sections of my report, I confirm that public resources have not been applied lawfully and in an effective way.

Basis for Conclusion

1.0. Failure to Retain Facilities Improvement Funds (FIF) at the Hospital

Review of revenue records obtained from the Suba North Sub County Hospital revealed total collection of Kshs.66,172,138 towards the health facilities improvement. Out of this amount, a total of Kshs.9,047,357 was transferred to Special Purpose Account at the health department. However, Special Purpose Account reimbursed a total of Kshs.7,237,885.60 to the health facilities resulting in a deficit of Kshs.1,809,471.40 This was contrary to Section 5(1) of the Facilities Improvement Financing Act, 2023 which requires that all monies raised or received by or on behalf of all public health facilities be retained in the Hospital Facilities Improvement Financing account. In addition, failure to reimburse the total amount transferred by the facilities negatively impacted on service delivery by the health facilities.

In the circumstances, Management of the County Special Purpose Account (SPA) was in breach of the law.

2.0. Non-Compliance with Kenya Quality Model for Health Policy Guidelines

Despite the Hospital being ranked as a Level 4 facility, audit review revealed gaps in terms of staffing requirements, services offered, bed capacity, equipment and machines. Therefore, the Hospital did not meet the minimum requirements of a level 4 hospital as required by Kenya Quality Model for Health Policy Guidelines.

The deficiencies contravene the First Schedule of Health Act, 2017 and implies that accessing highest attainable standards of health, which includes the right to health care services including reproductive health care as required by Article 43(1) of the Constitution of Kenya 2010 may not be achieved. Further, this contravenes the Kenya Quality Model for Health Policy Guidelines may have hindered the achievement of the Government program on Universal Health Coverage (UHC).

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

3.0. Failure to Grant Access to Information Management System

It was established that the revenue collection and documentation was being carried out using the Afya Rekod Information Management System. However Management did not grant access to the System to the audit team, contrary to Section 9(1)(e)(i) of the Public Audit Act, 2015, which states that without prejudice to the powers given under the Constitution and this Act and for the purposes of carrying out his or her duties effectively, the Auditor-General, or an officer authorized for the purpose of this Act, shall have powers of unrestricted access to all books, records, returns, reports, electronic or otherwise and other documents of entities listed under Article 229 (4) of the Constitution, provided that such access is reasonably necessary, in the opinion of the Auditor-General, in carrying out his or her functions. As a result, it was not possible to generate revenue reports required for the audit or appraise the ICT internal controls.

In the circumstances, there was a limitation of scope and the propriety, integrity, accuracy and effectiveness of the information management system could not be confirmed.

4.0. Climate Change, Financing and Action

It was observed that all the Hospital's departments had not integrated the climate change action plan into its sectorial strategies, action plans and other implementation projects. Further, there was no sufficient staff and resources for each department along with appointing a senior officer to coordinate the mainstreaming of the climate change action plan and other climate change statutory functions into sectorial strategies. This was contrary to Article 69(f) of the Constitution of Kenya 2010, which states that the entity shall establish systems of environmental impact assessment, environmental audit and monitoring of environment.

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, because of the significance of the matters discussed in the Basis for Adverse Opinion and the Basis for Conclusion on Effectiveness of Internal Controls, Risk Management and Governance sections of my report, I confirm that internal controls, risk management and governance were not effective.

Basis for Conclusion

1.0. Weaknesses in Management of Cash and Cash Equivalents

Review of internal controls over cash and cash equivalents revealed the following weaknesses:

- i. There was no evidence that copies of bank reconciliation statements were sent to the relevant authorities on a timely basis in line with the law.
- ii. No system generated cash books and ledgers provided for audit review.
- iii. The Hospital applied standing imprest systems in some cases. However, there was no evidence of approved cash floats being applied.
- iv. The Hospital's cash book was manual and was not regularly updated; hence, it was prone to errors, inaccuracies and possible manipulations of figures and single entries.

In the circumstances, the effectiveness of internal controls on cash and cash management could not be confirmed.

5.0. Lack of Internal Audit Committee

Review of the Governance structure and oversight of the Hospital revealed that it did not have an Audit Committee in the financial year 2024/2025. Also, the adequacy of internal audit staff and staff competencies could not be verified.

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

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 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 for 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 IFPP 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

*Suba North Sub County Hospital (Homa Bay County Government)
Annual Report and Financial Statements for The Year Ended 30th June 2025*

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

Description	Note	2024/2025	2023/2024
		Kshs	Kshs
Revenue from non-exchange transactions			
In- kind contributions- KEMSA	6	29,993,281.00	0
		29,993,281.00	0
Revenue from exchange transactions			
Rendering of services- Medical Service Income FIF	7	2,927,558.00	3,049,510
Rendering of services- Medical Service Income SHA NHIF AND AON	8	63,244,580.00	65,357,483
Revenue from exchange transactions		66,172,138.00	68,852,408
Total revenue		96,165,419.00	68,852,408
Expenses			
Medical/Clinical costs	9	53,085,212.00	28,350,414
Employee costs	10	2,295,500.00	3,008,900
Board of Management Expenses	11	810,900.00	907,300
Depreciation and amortization expense	12	1,033,659.00	1,033,659
Repairs and maintenance	13	1,750,650.00	3,427,420
20% Retained at SPA	14	9,047,357.00	4,542,157
General expenses	15	8,038,587.00	17,396,190
Total expenses		76,061,865.00	58,666,040
Net Surplus / (Deficit) for the year		20,103,554.00	10,186,368

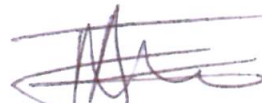
The Hospital's financial statements were approved by the Board on 26/11/25 and signed on its behalf by:



Mr Tom Oyugi
Chairman
Board of Management



Mr Harrison Oyongo
Facility Accountant



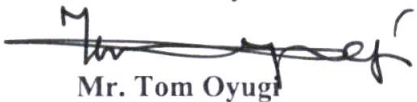
Dr Mary Amuko
Medical Superintendent

Suba North Sub County Hospital (Homa Bay County Government)
Annual Report and Financial Statements for The Year Ended 30th June 2025

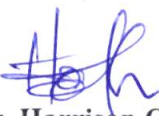
15. Statement of Financial Position as at 30th June 2025

Description	Note	2024/2025	2023/2024
		Kshs	Kshs
Assets			
Current assets			
Cash and cash equivalents	16	2,647,845.00	758,382
Receivables from exchange transactions	17	8,791,000.00	
Receivables from non-exchange transactions			27,831,380
Inventories	18	1,551,917.00	580,500.00
Total Current Assets		12,990,762.00	29,170,262
Non-current assets			
Property, plant, and equipment	19	24,571,400.00	15,075,763
Total Non-current Assets		24,571,400.00	15,075,763
Total assets (A)		37,562,162.00	44,246,025
Liabilities			
Current liabilities			
Trade and other payables	20	9,893,248.00	6,085,000
Total Current Liabilities(B)		9,893,248.00	6,085,000
Net assets (A-B)		<u>27,668,914.00</u>	<u>38,161,025</u>
Represented by:			
Accumulated surplus/Deficit		20,103,554.00	10,186,368
Capital Fund		7,565,360.00	27,974.657
Net Assets		<u>27,668,914.00</u>	<u>38,161,025</u>

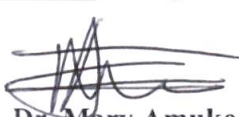
The Hospital's financial statements were approved by the Board on 26/11/25 and signed on its behalf by:


 Mr. Tom Oyugi

Chairman


 Mr. Harrison Oyongo

Facility Accountant


 Dr. Mary Amuko

Medical Superintendent

Suba North Sub County Hospital (Homa Bay County Government)
Annual Report and Financial Statements for The Year Ended 30th June 2025

16. Statement of Changes in Net Assets for The Year Ended 30 June 2025

Description	Revaluation reserve	Accumulated surplus/Deficit	Capital Fund	Total
As at July 1, 2024				
Revaluation gain			-	
Surplus/(deficit) for the year		10,186,368	-	10,186,368
Capital/Development grants			19,974,657	19,974,657
As at June 30, 2024		10,186,368	-	30,161,025
At July 1, 2025		0	0	0
Revaluation gain	0	-	-	0
Surplus/(deficit) for the year	-	20,103,346.00	-	20,103,346.00
Capital/Development grants	-	-	7,565,360.00	7,565,360.00
At June 30, 2025	0	20,103,346.00	7,565,360.00	27,668,914.00

The Hospital's financial statements were approved by the Board on 26/11/25 and signed on its behalf by:



Mr. Tom Oyugi
Chairman
Board of Management



Mr Harrison Oyongo
Facility Accountant



Dr. Mary Amuko
Medical Superintendent

Suba North Sub County Hospital (Homa Bay County Government)
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17. Statement of Cash Flows for The Year Ended 30 June 2025

Description	Note	2023/2024	2024/2025
		Kshs	Kshs
Cash flows from operating activities			
Receipts			
Rendering of services- Medical Service Income		2,927,558.00	3,606,810
Miscellaneous (SHA)		54,453,372.00	48,357,483
Total Receipts		57,380,930.00	51,364,294
Payments			
Medical/Clinical costs		21,922,111.00	24,550,414
Employee costs		2,295,500.00	3,008,900
Board of Management Expenses		810,900.00	907,300
Repairs and maintenance		1,750,650.00	3,277,420
General expenses		7,468,573.00	15,261,190
20%Transfer to Spa		9,047,357.00	
Total Payments		43,295,091.00	47,005,224
Net cash flows from operating activities	21	14,085,839.00	4,339,070
Cash flows from investing activities			
Purchase of property, plant, equipment		(12,196,376)	(4,542,157)
Net cash flows used in investing activities		(12,141,376)	(4,542,157)
Net increase/(decrease) in cash and cash equivalents		1,889,463.00	(193,086)
Cash and cash equivalents as at 1 July		758,382.00	951,468
Cash and cash equivalents as at 30 June		2,647,845.00	758,382

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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
	a	b	c=(a+b)	d	e=(c-d)	f=d/c%
	Kshs	Kshs	Kshs	Kshs	Kshs	
Budget carryovers from the previous year	758,382		758,382	758,382		100%
Receipts						
Transfers from the County Government	10,229,035		10,229,035	0		0%
Grants from donors and development partners	5,000,000.00		5,000,000.00	0		0%
Rendering of services- Medical Service Income	93,600,000.0		93,600,000.0	57,380,930	51,448,105	90%
Total receipts	108,829,035.		108,829,035	57,380,930	51,448,104.95	89%
Payments						
Medical/Clinical costs	43,993,085		43,993,085	21,922,111	22,070,974	50%
Employee costs	9,798,000		9,798,000	2,295,500	7,502,500	23%
Remuneration of directors	534,000		534,000	810,900.00	(276,900)	151%
Repairs and maintenance	6,753,850		6,753,850	1,750,650	5,003,200	27%
20% Retain in the SPA				9,047,357	(9,047,357)	%
General expenses	47,750,100		47,750,100	7,468,573	40,281,527	16%
Total Operational Expenditure paid	108,829,035		108,829,035	43,295,091	65,533,944	40%
Capital Expenditure paid	30,000,000.		30,000,000.	12,196,376	17,803,626	41%
Surplus			0	1,889,463		

Suba North Sub County Hospital (Homa Bay County Government)
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Budget Reconciliation

	Description of Particulars	Amount in Kshs
	Actual Surplus Amounts as per the statement of Budget	1,889,463
1	Add bal B/F	758,382
	Closing Cash and Cash Equivalent as per the statement of Cash flows	2,647,845

Notes;

1 Income from rendering of services is over 90% as a result of effective planning and resource utilization

2 Medical expenses, employee costs, Repairs & Maintenance and general expenses percentages was as a result of overstated expenditure

3 Grants & Subsidies are transfers to special purpose accounts

19. Notes to the Financial Statements

1. General Information

Suba North Sub County Hospital entity is established by and derives its authority and accountability from County Government Act. The entity is wholly owned by the County Government of Homa Bay and is domiciled in Kenya. The entity's principal activity is to provide affordable and accessible universal health coverage.

2. Statement of Compliance and Basis of Preparation

The financial statements have been prepared on a historical cost basis except for the measurement at re-valued amounts of certain items of property, plant, and equipment, marketable securities and financial instruments at fair value, impaired assets at their estimated recoverable amounts and actuarially determined liabilities at their present value. The preparation of financial statements in conformity with International Public Sector Accounting Standards (IPSAS) allows the use of estimates and assumptions. It also requires management to exercise judgement in the process of applying the *entity's* accounting policies. The areas involving a higher degree of judgment or complexity, or where assumptions and estimates are significant to the financial statements, are disclosed in the notes. The financial statements have been prepared and presented in Kenya Shillings, which is the functional and reporting currency of the entity. The financial statements have been prepared in accordance with the PFM Act, and International Public Sector Accounting Standards (IPSAS). The accounting policies adopted have been consistently applied to all the years presented.

NOTES TO THE FINANCIAL STATEMENTS (continued)

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.

Standard	Effective date and impact:
IPSAS 43	<p><i>Applicable 1st 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 1st 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 Plant and Equipment	<p><i>Applicable 1st 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, 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.</p>

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Standard	Effective date and impact:
	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><i>Applicable 1st January 2025</i></p> <p>The objective of this standard was to improve measurement guidance across IPSAS by:</p> <ul style="list-style-type: none"> i. Providing further detailed guidance on the implementation of commonly used measurement bases and the circumstances under which they should be used. ii. Clarifying transaction costs guidance to enhance consistency across IPSAS; iii. Amending where appropriate guidance across IPSAS related to measurement at recognition, subsequent measurement and measurement related disclosures. <p>The standard also introduces a public sector specific measurement bases called the current operational value.</p>
IPSAS 47- Revenue	<p><i>Applicable 1st January 2026</i></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>
IPSAS 48- Transfer Expenses	<p><i>Applicable 1st January 2026</i></p> <p>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.</p>

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Standard	Effective date and impact:
IPSAS 49- Retirement Benefit Plans	<i>Applicable 1st 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 1st 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"> i. Limited improvements to existing accounting practices for exploration and evaluation expenditures. 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. iii. Disclosures that identify and explain the amounts in the entity'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.

iii) Early adoption of standards

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

4. Summary of Significant Accounting Policies

a. Revenue recognition

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 the *Entity* 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,

Notes to the Financial Statements (Continued)

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

The entity 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 the entity.

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.

Notes to the Financial Statements (Continued)

b. Budget information

The original budget for FY 2024/25 was approved by Board. Subsequent revisions or additional appropriations were made to the approved budget in accordance with specific approvals from the appropriate authorities. The additional appropriations are added to the original budget by the entity upon receiving the respective approvals in order to conclude the final budget. Accordingly, the *SNSCH* recorded additional appropriations budget following the Board's approval. The entity'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. Subsequent to initial recognition, investment properties are measured using the cost model and are depreciated over a period of years. 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, the entity recognizes such parts as individual assets with specific useful lives and depreciates them accordingly. Likewise, when a major inspection is performed, its cost is recognized in the carrying amount of the plant and equipment as a replacement if the recognition criteria are satisfied. All other repair and maintenance costs are recognized in surplus or deficit as incurred. Where an asset is acquired in a non-exchange transaction for nil or nominal consideration the asset is initially measured at its fair value.

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 the Entity. Assets held under a finance lease are capitalized at the commencement of the lease at the fair value of the leased property or, if lower, at the present value of the future minimum lease payments. The Entity also recognizes the associated lease liability at the inception of the lease. The liability recognized is measured as the present value of the future minimum lease payments at initial recognition.

Subsequent to initial recognition, lease payments are apportioned between finance charges and reduction of the lease liability so as to achieve a constant rate of interest on the remaining balance of the liability. Finance charges are recognized as finance costs in surplus or deficit.

An asset held under a finance lease is depreciated over the useful life of the asset. However, if there is no reasonable certainty that the Entity 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 the Entity. 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

The entity 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 the entity, 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

The Entity expenses research costs as incurred. Development costs on an individual project are recognized as intangible assets when the Entity 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. *The entity does not have any hedge relationships and therefore the new hedge accounting rules have no impact on the hospital's financial statements. (amend as appropriate).*

Notes to the Financial Statements (Continued)

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, the entity 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

The entity 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 the entity'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, the entity 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

Notes to the Financial Statements (Continued)

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 the entity 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

The entity 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. The entity recognizes a loss allowance for such losses at each reporting date. Critical estimates and significant judgments made by management in determining the expected credit loss (ECL) are set out in *Note xx*.

Notes to the Financial Statements (Continued)

Financial liabilities

Classification

The entity 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 the Entity.

l. Provisions

Provisions are recognized when the Entity has a present obligation (legal or constructive) as a result of a past event, it is probable that an outflow of resources embodying economic benefits or service potential will be required to settle the obligation and a reliable estimate can be made of the amount of the obligation.

Where the Entity expects some or all of a provision to be reimbursed, for example, under an insurance contract, the reimbursement is recognized as a separate asset only when the reimbursement is virtually certain.

Notes to the Financial Statements (Continued)

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

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. The entity 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 the entity will incur in fulfilling the present obligations represented by the liability.

n. Contingent liabilities

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

o. Contingent assets

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

p. Nature and purpose of reserves

The entity creates and maintains reserves in terms of specific requirements. *(Entity to state the reserves maintained and appropriate policies adopted.)*

q. Changes in accounting policies and estimates

The Entity 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

The Entity 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. *(the entity to retain information relating to defined benefits or contributions, where both schemes are managed full policy applies)*

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.

Notes to the Financial Statements (Continued)

u. Related parties

The Entity regards a related party as a person or an entity with the ability to exert control individually or jointly, or to exercise significant influence over the *Entity*, 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

The Entity 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, SNSCH 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, the *Entity* 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.

Notes to the Financial Statements (Continued)

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

Estimates and assumptions.

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

Useful lives and residual 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 the Entity.
- 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. Additional disclosure of these estimates of provisions is included in the Notes. Provisions are measured at the management's best estimate of the expenditure required to settle the obligation at the reporting date and are discounted to present value where the effect is material.

(Include provisions applicable for your organisation e.g provision for bad debts, provisions of obsolete stocks and how management estimates these provisions).

*Suba North Sub County Hospital (Homa Bay County Government)
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Notes to Financial Statements Continued

6. In Kind Contributions from The County Government

Description	2024/2025 FY	2023/2024
	KShs	KShs
Medical supplies-Drawings Rights (KEMSA)	29,767,322	0
Pharmaceuticals and Non-Pharmaceutical Supplies (MEDS)	225,959	0
Total grants in kind	29,993281	0

7. Rendering of Services-Medical Service Income FIF

Description	2024/2025	2023/2024 FY
	Kshs	Kshs
Pharmaceuticals	539,769	595,998.00
Non-Pharmaceuticals	36,050	280,919.00
Laboratory	497,799	705,962.00
Maternity	8,500	0
Theatre	3,150	24,500.00
Outpatient	367,750	399,215.00
In patient	711,557	425,430.00
Radiography/X-Ray Services	404,125	112,047.00
Medical/Health Records	3,026.00	48,452.00
Other medical services income (Attachment fees, Eye, Ambulatory Services etc)	355,832.00	414,288.00
Total revenue from the rendering of services	2,927,558.	3,606,810

8. Rendering of Services-Medical Service Income SHA,NHIF & AON

Description	2024/2025	2023/2024 FY
	KShs	KShs
SHA/SHIF/NHIF	53,768,872.	48,357,483.00
AON MINET	684,500.00	445,415
Total Receivable	8,791,000.00	17,000,000.00
Total revenue from the rendering of services	63,244,580.00	65,802,898

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9 Medical/ Clinical Costs

Description	2024/2025	2023/2024 FY
	Kshs	Kshs
Laboratory chemicals and reagents	1,065,640.00	2,019,958.00
Public health activities (Fumigation	110,500 .00	0
Food and Ration	4,198,469 .00	6,276,560.00
Uniform, clothing, and linen	617,100.00	0
Dressing and non-pharmaceuticals	4,417,278.00	10,026,881.0 0
Pharmaceutical supplies	3,578,914.00	4,003,815.35
Health information stationery	5,701,150.00	
Sanitary and cleansing Materials	2,554,230.00	4,216,000.00
Purchase of Medical Equipment	0	1,807,200.00
X-Ray/Radiology supplies	768,000.00	
Inkind contribution-KEMSA	29,993,281.00	
Health Promotions	80,650 .00	
Total medical/ clinical costs	53,085,212.00	28,350,414

10. Employee Costs

Description	2024/2025	2023/2024 FY
	Kshs	Kshs
Salaries, wages, and allowances	2,281,000.00	2,977,800.00
Staff medical expenses and Insurance cover	14,500.00	31,100.00
Other employee costs (<i>specify</i>)		
Employee costs	2,295,500	3,008,900

11. Board of Management Expenses

Description	2024/2025	2023/2024 FY
	Kshs	Kshs
Sitting allowance	509,400.00	392,200.00
Travel and accommodation allowance	301,500.00	515100.00
Airtime allowances		
Total	810,900.00	907,300

12. Depreciation and Amortization Expense

Description	2024/2025	2023/2024 FY
	Kshs	Kshs
Property, plant and equipment	1,033,659.00	1,033,659
Total depreciation and amortization	1,033,659.00	1,033,659

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13. Repairs And Maintenance

Description	2024/2025	2023/2024 FY
	Kshs	Kshs
Property- Buildings	727,520.00	937,000.00
Medical equipment.	382,880.00	690,340.00
Computers and accessories		640,000.00
Motor vehicle expenses	640,250.00	1,160,080.00
Total repairs and maintenance	1,750,650.00	3,427,420

14. Grants And Subsidies

Description	FY 2024/2025	2023/2024 FY
	Kshs	Kshs
Social benefit expenses	0	2092,157
Other grants and subsidies (SPA)	9,047,357.00	2,450,000
Total grants and subsidies	9,047,357.00	4,542,157

15. General Expenses

Description	2024/2025	2023/2024 FY
	Kshs	Kshs
Bank charges	73,191.00	144,385.72
Contracted services	850,000.00	910,000.00
Electricity expenses	761,940.00	972,000.00
Fuel and Lubricants	1,586,885.00	1,570,000.00
Other Fuels	229,000.00	485,000.00
General Office Supplies	2,412,400.00	6,487,000.00
Travel and accommodation allowance	262,100.00	1,121,100.00
Printing and stationery	1,029,121.00	2,330,470.00
Telephone and mobile phone services	53,500.00	6,000.00
Internet expenses	222,950.00	87,198.00
Staff training and development	557,500.00	593,036.00
Transfer to Ober Health Centre	0	160,000.00
Total General Expenses	8,038,587.00	17,396,190

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16. Cash And Cash Equivalents

Description	FY2024/2025	2023/2024 FY
	KShs	KShs
Current accounts	2,647,845.79	758,382.00
Cash In Hand	0	0
Total cash and cash equivalents	2,647,845.79	758,382.00

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

Description		FY2024/2025	2023/2024 FY
Financial institution	Account number	KShs	KShs
a) Current account			
Kenya Commercial bank	1163186821	2,647,845.76	758,382.00
Sub- total		2,647,845.76	758,382.00
b) Others(specify)			
cash in hand		0	0
Sub- total		0	0
Grand total		2,647,845.76	758,382.00

17. Receivables From Exchange Transactions

Description	FY2024/2025	2023/2024 FY
	KShs	KShs
Medical services receivables	8,791,000.00	17,170,000.00
Less: impairment allowance	0	0
Total receivables	8,791,000.00	17,170,000

Analysis of Receivables From Exchange Transactions

Description	FY2024/2025		2023/2024 FY	
	Kshs	% of the total	Kshs	% of the total
	Current FY	% of the total	Comparative FY	% of the total
Less than 1 year	8,791,000.00	100%		%
Between 1- 2 years		%	xxx	%
Between 2-3 years		%	xxx	%
Over 3 years	-	%	17,170,000.00	100%

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Total (a+b)	8,791,000.00	%	17,170,000	%
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18. Inventories

Description	FY 2024-2025	2023/2024 FY
	KShs	KShs
Pharmaceutical supplies	900,766.00	184,000.
Laboratory supplies	135,000.00	230,000.
Food supplies	20,500.00	43,000
Linen and clothing supplies	0	0
Cleaning materials supplies	0	0
Non-Pharmaceutical supplies	495,651.00	123,500
Less: provision for impairment of stocks		
Total	1,551,917.00	580,500

Detailed disclosure on inventories

	FY 2024-2025	2023/2024 FY
Opening balance	580,500.00	368,420
Additional Inventory in the year		15,780,200
Inventory expensed in the year		15,568,120
Write-downs in the year	0	
Closing balance	1,551,917.00	580,500

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Notes to the Financial Statements (Continued)

19. 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
Cost	8,500,000.00		1,265,625.00	743,750.00	122,382.00	1,743,267.00			12,375,024.00
At 1 July 2023 (previous year)									
Additions									
Disposals									
Transfers/adjustments									
Revaluation Adjustments									
At 30th Jun 2024	8,500,000.00		1,687,500.00	850,000.00	152,978.00	2,218,205.00			13,408,683.00
At 1 July 2024 (current year)	8,500,000.00		1,687,500.00	850,000.00	152,978.00	2,218,205.00			13,408,683.00
Additions				55,000		5,979,175.00		6162201	12,196,376
Disposals									
Transfer/adjustments									
Revaluation Adjustments									
At 30th Jun 2025	8,500,000.00		1,687,500	905,000.00	152,978	8,197,380.00		6162201	25,605,059
Depreciation and impairment									
At 1 July 2024 (previous year)	8,500,000.00		(421,875.00)	(106,250.00)	(30,596.00)	(474,938.00)			(1,033,659.00)
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									
At 30 JULY 2024	8,500,000.00		1,687,500	905,000.00	152,978	8,197,380.00		6162201	25,605,059
At July 2024 (current year)			(421,875.00)	(106,250.00)	(30,596.00)	(474,938.00)			(1,033,659.00)
Depreciation									
Disposals									
Impairment									
Transfer/adjustment									
At 30th June 2025	8,500,000		1265625	798750	122,382	7722442		6162201	24,571,400
Net book values	8,500,000		1265625	798750	122,382	7722442		6162201	24,571,400
At 30 th Jun 2024 (previous)									
At 30 th Jun 2025 (current)	8,500,000.00		1,687,500	905,000.00	152,978	8,197,380.00		6162201	25,605,059

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20. Trade and other Payables

Description	FY 2024-2025		2023/2024 FY	
	KShs		KShs	
Trade payables	26,655,398		6,085,000	
Employee dues	0		0	
Total trade and other payables	26,655,398		6,085,000	
Ageing analysis:	FY 2024-2025	% of the Total	2023/2024 FY	% of the total
Under one year		%		%
1-2 years		%		%
2-3 years		%		%
Over 3 years		%		%
Total		%		%

21. Cash Generated from Operations

Description	FY 2024-2025		2023/2024 FY	
	KShs		KShs	
Surplus for the year before tax	20,103,346		10,186,368	
Adjusted for:				
Depreciation	1,033,659		1,033,659.00	
Non-cash grants received	(29,993,281)			
Working Capital adjustments	(8,856,276)			
Increase in inventory	(971,417)		(107,890.00)	
Decrease in receivables	(8,853,242)			
Increase in payables	20,570,398			
Net cash flow from operating activities	1,889,463		925,769	

22. Financial Risk Management

The entity's activities expose it to a variety of financial risks including credit and liquidity risks and effects of changes in foreign currency. The hospital'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. The hospital does not hedge any risks and has in place policies to ensure that credit is only extended to customers with an established credit history.

The entity's financial risk management objectives and policies are detailed below:

(i) Credit risk

The entity 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.

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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 the hospital'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 the entity's maximum exposure to credit risk without taking account of the value of any collateral obtained is made up as follows:

Description	Total amount	Fully performing	Past due	Impaired
	Kshs	Kshs	Kshs	Kshs
At 30 June 2024 (previous year)				
Receivables from exchange transactions	1,267,250	1,267,250	0	0
Total	1,267,250	1,267,250	0	0
At 30 June 2025 (current year)				
Receivables from exchange transactions	8,791,000	8,791,000	0	0
Total	8,791,000	8,791,000	0	0

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 the hospital has recognised in the financial statements is considered adequate to cover any potentially irrecoverable amounts. The entity has significant concentration of credit risk on amounts due from Social Health Authority. The board of management sets the hospital'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 the hospital's board of management who have built an appropriate liquidity risk management framework for the management of the entity's short, medium and long-term funding and liquidity management requirements. The entity manages liquidity risk through continuous monitoring of forecasts and actual cash flows.

The table below represents cash flows payable by the hospital 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.

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Description	Less than 1 month	Between 1-3 months	Over 5 months	Total
	Kshs	Kshs	Kshs	Kshs
At 30 June 2024				
Trade payables		3,042,500	3,042,500	6,085,000
Current portion of borrowings	0	0	0	0
Provisions	0	0	0	0
Deferred income	0	0	0	0
Employee benefit obligation	0	0	0	0
Total		3,042,500	3,042,500	

(iii) Market risk

The hospital has put in place an internal audit function to assist it in assessing the risk faced by the entity 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 the entity'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.

a) Foreign Currency Risk

The entity has no foreign transactional currency exposures, because it does not use foreign currency in purchasing its commodities and services

Interest Rate Risk

Interest rate risk is not applicable since the institution is not borrowing from Commercial Entities

23. Related Party Balances

Nature of related party relationships

Entities and other parties related to the entity 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.

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

- i) The National Government;
- ii) The County Government;

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- iii) Board of Management;
- iv) Key Management

24. Events after the Reporting Period

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

25. Ultimate and Holding Entity

The entity is a Semi- Autonomous Government Agency under the Department of Health. Its ultimate parent is the County Government of Homa Bay.

26. Currency

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

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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.

Reference No. on the external audit Report	Issue / Observations from Auditor	Management comments	Status: (Resolved / Not Resolved)	Timeframe: (Put a date when you expect the issue to be resolved)
OAG/HBRO/HEALTH MBITA SCH/2023/2024	Errors in the Financial Statement	The issue was acknowledged and appropriate recommendations were adhered to in the Amended FS	Resolved	30/12/2024
OAG/HBRO/HEALTH MBITA SCH/2023/2024	Unsupported Medical/Clinical cost	All the relevant supporting documents were availed under the appendices	Resolved	30/12/2024
OAG/HBRO/HEALTH MBITA SCH/2023/2024	Unsupported cash and cash equivalent	A bank balance certificate was availed	Resolved	30/12/2024
OAG/HBRO/HEALTH MBITA SCH/2023/2024	Inaccurate balance of Receivable from non exchange transactions	An Attached appendices was availed to support the schedules	Resolved	30/06/2024
OAG/HBRO/HEALTH MBITA SCH/2023/2024	Incomplete property, Plant & Equipment Balance	Escalated to County Department of Public Works, Lands	Not Resolved	30/06/2025
OAG/HBRO/HEALTH MBITA SCH/2023/2024	Lack of Autonomy in the Operations of the Hospital	The Management escalated the issues to the relevant County Offices	Not Resolved	30/06/2025

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Reference No. on the external audit Report	Issue / Observations from Auditor	Management comments	Status: (Resolved / Not Resolved)	Timeframe: (Put a date when you expect the issue to be resolved)
OAG/HBRO/HEALTH MBITA SCH/2023/2024	Non-compliance with Level Four Hospital Requirements	The Management is taking all the measures to align the facility with Kenya Quality of Health Requirements	Not Resolved	30/06/2025
OAG/HBRO/HEALTH MBITA SCH/2023/2024	Lack of Approved Budget	An Approved Budget was provided in the appendices	Resolved	30/06/2024

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.



Accounting Officer

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