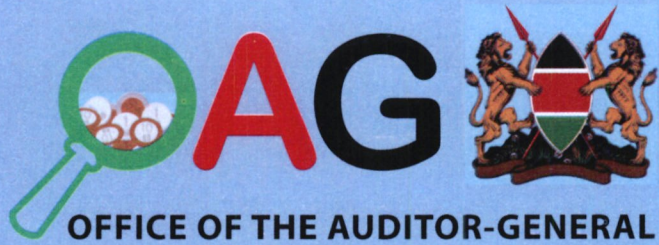
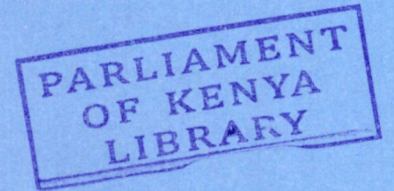


REPUBLIC OF KENYA



*Enhancing Accountability*

**REPORT**



**OF**

**THE AUDITOR-GENERAL**

**ON**

**KIMITI LEVEL 4 HOSPITAL**

**FOR THE YEAR ENDED  
30 JUNE, 2025**

**COUNTY GOVERNMENT OF MACHAKOS**

PAPERS LAYD  
DATE 19/11/2025  
Tabled by Sen Mutinda on behalf of Majority Leader  
- Belinda  
COMMITTEE  
CLERK AT THE TABLE







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**KIMITI Level 4 HOSPITAL  
(Machakos County Government)**

**ANNUAL REPORT AND FINANCIAL STATEMENTS**

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

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

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**1. Acronyms & Glossary of Terms**

CSR	Corporate Social Responsibility
OSHA	Occupational Health & Safety Act
PFMA	Public Financial Management Act
MED SUP	Medical Superintendent
HMT	Hospital Management Team
NSM	Nursing Services Manager
HAO	Hospital Administrative Officer
CRF	County Revenue Fund
IPSAS	International Public Sector Accounting Standards
Fiduciary Management	Key management personnel who have financial responsibility in the entity.

**2. Key Entity Information and Management**

**(a) Background information**

Kimiti Level 4 Hospital is a level 4 hospital established under gazette notice number 786 and is domiciled in Machakos County under the Health Department. The hospital is governed by Management team appointed by the department.

**(b) Principal Activities**

The Vision of the Hospital is to become a Centre of excellence in quality healthcare services, training & research in Machakos County and Kenya at large, while its mission is to provide accessible, responsive, quality healthcare services through innovation, training and research. The main mandate of Kimiti Level 4 Hospital is to provide curative, preventive, promotive and rehabilitative health services. It offers specialized clinical services in various disciplines. It serves as a centre for research activities, training for medical students and health workers.

The Following are the key Objectives of the Hospital:

- i. To provide High quality healthcare services.
- ii. To serve as a Centre that can be utilized by local stakeholders for development or implementation of medical intervention of health policies.
- iii. To build and strengthen partnership and sector coordination.
- iv. To advocate and mobilize for adequate funding to the hospital.

**(c) Key Management**

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

- County Department of Health
- Accounting Officer/ Medical Superintendent
- Health Management Team (HMT)

**(d) Fiduciary Management**

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

No.	Designation	Name
1.	Medical Superintendent	Mary Mbithi
3.	Head of Finance	Eric Milo
4.	Accountant – Reporting	Grace Musyoki
5.	Head Of Supply Chain	Geoffrey Keli
6.	Nursing Services Manager	Lucia Mutisya

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

**(e) Fiduciary Oversight Arrangements**

The following committees and bodies are assigned fiduciary oversight authority for management of Kimiti Level 4 Hospital;

- Clinical Research and Standards Committee.
- Audit committee
- Risk Committee
- County Assembly
- Parliamentary (Senate) committees

**(f) Entity Headquarters**

P.O. Box 373,  
Kimiti Level 4  
Kimiti Market  
TALA, KENYA

**(g) Entity Contacts**

Telephone: (254)701-948-691  
E-mail: [Kimitihospital@gmail.com](mailto:Kimitihospital@gmail.com)  
Website: [www.machakos.go.ke](http://www.machakos.go.ke)

**(h) Entity Bankers**

Kenya Commercial Bank  
Branch: Tala  
P.O.Box 173 – 90131,  
Tala

**(i) Independent Auditors**

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

**(j) Principal Legal Adviser**

The Attorney General  
State Law Office

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

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Harambee Avenue  
P.O. Box 40112  
City Square 00200  
Nairobi, Kenya




**(k) County Attorney**


Machakos County Legal Office  
P.O. Box. 1996,  
Machakos, Kenya

**3. The Board of Management**

There was no Board of Directors in Kimiti Level (4) Hospital.

**4. Key Management Team**

Ref	Management	Details
1.	 <p><b>Mary Mbithi</b> holds a Bachelor of Science Degree in Clinical Medicine and Surgery. She has over 12 years' experience in the medical field.</p>	<p>Medical Superintendent/ Accounting Officer</p>
2.	 <p><b>Eric Milo</b> has over 13 years' experience in Accounting and Finance. He holds a Master's in Business Administration, a Bachelor's Degree in Commerce &amp; CPA (K).</p>	<p>Head of Finance</p>
3.		<p>Nursing Services Manager</p>

	<p><b>Lucia Mutisya</b> has 34 years' experience in nursing. She holds a Diploma in Nursing and is a Kenya Registered Community Health Nurse.</p>	
4.	 <p><b>Geoffrey Keli</b> has over 15 years' experience in Supply Chain Management. He holds a Diploma in Purchasing Management.</p>	<p>Head of Supply Chain Management</p>

**5. Chairman's Statement**

There was no chairman's statement because there is no Board of Management (BOM).

**6. Report of The Medical Superintendent**

It is my pleasure to present the Kimiti Level 4 Hospital Financial Statements for the year ended 30th June 2025, which are in line with the Public Finance Management (PFM) Act, 2012. The Act requires final financial statements to be prepared, published, publicized and submitted to the County Assembly, Office of the Auditor General, the National Treasury, the Controller of Budget and Commission for Revenue Allocation within a period of two months after the end of each Financial Year.

Attached are the Hospital's Statements which have been prepared in line with the requirements of the PFM Act 2012, which present a true and fair view of state of affairs of the County Government of Machakos for the year ended 30th June, 2025.

The Financial statements highlights both qualitative and quantitative user information about the performance of the hospital based on the revenue received and collected from the county and NHIF or Facility Improvement Fund versus numerous expenses incurred in line to promotion of quality health care services.

Our focus still remains on infectious disease like diarrhoea diseases, respiratory infections, road traffic accidents, HIV/AIDS, Tuberculosis, helminths and other common infections affecting our catchment community. The non-communicable component of our morbidity burden is also quite huge and significant and substantial focus and resources will continue being prioritized on tackling these diseases like diabetes, hypertension, cancer, COPD, heart and kidney diseases, asthma, road traffic e accidents, drugs and substance abuse, and others. Preventive promotive and rehabilitate health has been lagging behind in our priorities and will be a big game changer in health in the future. We have to invest in primary Health Care for us to reap the benefits and dividend which accrue from prevention of diseases.

The future looks bright for the hospital and we look forward to better performance in the subsequent quarters and years.

  
.....

**Name: Mary Mbithi**  
**Medical Superintendent**

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

Kimiti Level 4 Hospital has Six (6) strategic objectives within the current Strategic Plan for the FY 2024- 25. These objectives have been identified through a participatory process that reviewed the health priorities of the Governor’s Manifesto, the National Government’s priorities of BETA (Bottom-Up Transformation Agenda) and more specifically on Universal Health Care, NIUPLAN, SDGs and the MTP IV. The strategic objectives are a synthesised product of the afore-mentioned planning frameworks that amalgamate the thematic focus and health sector aspirations.

The strategic objectives are as follows;

- Free maternal health services
- Affordable health care services
- Strategic partnership with Donors for adequate funding
- Clinical services and products
- Healthcare financing and sustainability
- Quality improvement

Kimiti Level 4 Hospital develops its annual work plans based on the above six objectives. Assessment of the management’s performance against its annual work plan is done on a quarterly basis. The hospital achieved its performance targets set for the FY 2024/2025 period for its own strategic pillars, as indicated in the diagram below:

<b>Strategic Pillar/Theme/Issues</b>	<b>Objective</b>	<b>Key Performance Indicators</b>	<b>Activities</b>	<b>Achievements</b>
Maternal health care services	•To Provide free maternal health care services	•Number of maternal deliveries	•Surgeries, pre-natal and post natal services •Normal deliveries	•Managed to achieve 99% free maternal health care services
Affordable and timely health care services	•To Ensure timely provision of health care services to all patients	•Number of in-patients and out-patients served	•Treatment of in-patient and out-patient	•Managed to improve timely health care provision from 65% to 75%
	• To Establish and enhance	• No of stock-out tracer drugs	• Rational use of Medications	• Hospital Drug

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

Clinical services and products	good clinical governance	<ul style="list-style-type: none"> <li>• No of prescription reviewed</li> <li>• Updated SOPs</li> <li>• No of Pharma co vigilance conducted</li> </ul>	<ul style="list-style-type: none"> <li>• Rational use of blood and blood products</li> <li>• Provision of Health products</li> </ul>	<p>formulary in place.</p> <ul style="list-style-type: none"> <li>• %reduction in morbidity and mortality.</li> </ul>
Healthcare financing and sustainability	<ul style="list-style-type: none"> <li>•To increase revenue Generation</li> </ul>	<ul style="list-style-type: none"> <li>•Revenue Reports</li> <li>•%increase in revenue</li> </ul>	<ul style="list-style-type: none"> <li>•Diversify Revenue Streams</li> <li>•Review User Fee Charges</li> <li>•Increase Customer Base</li> </ul>	<ul style="list-style-type: none"> <li>•Revenue improved compared to previous year</li> <li>•Review of user fees continuous and on progress</li> </ul>
Strategic partnership	Conduct sensitization and research in order to attract donors	Number of donors offering financial support	Collaboration with donors	Managed to partner with Red-Cross
Quality improvement	<ul style="list-style-type: none"> <li>•Enhance Continuous Quality Improvement</li> <li>• Enhance customer care services</li> </ul>	<ul style="list-style-type: none"> <li>•Training Reports</li> <li>• Customer care desks</li> </ul>	<ul style="list-style-type: none"> <li>•Training of staff</li> <li>• Customer care desks</li> <li>Minutes of the change Agents</li> </ul>	<ul style="list-style-type: none"> <li>•More than 50 Staff trained and its continuous</li> <li>•Monthly meeting for change Agents Achieved.</li> </ul>

## **8. Corporate Governance Statement**

The governance of Kimiti Level 4 Hospital is overseen by the County Government through the Department of Health Services since there is no Board of Management. The Hospital Management, led by the Medical Superintendent, ensures effective administration, accountability, and adherence to relevant laws and policies. This statement outlines the governance framework in place for the year ended 30th June 2025.

### **i. Appointment of Board Members**

Currently, Kimiti Level 4 Hospital does not have a Board in place. Governance oversight is exercised by the County Government through the Department of Health Services, in line with the Public Finance Management Act and other relevant regulations.

### **ii. Roles and Functions of the Board**

Since there is no Board, strategic oversight and policy direction are provided directly by the County Government. The Hospital Management Team is responsible for day-to-day operations and reports to the County Executive Committee Member (CECM) for Health.

### **iii. Induction, Training, and Development**

Not applicable. However, management staff undergo continuous professional development and training in line with County Government programs.

### **iv. Board and Members' Performance**

Not applicable. Oversight performance is instead assessed through County Government reporting mechanisms, performance contracting, and both internal and external audits.

### **v. Number of Board Meetings**

Not applicable. Governance meetings are instead conducted through leadership forums convened by the County Health Department.

### **vi. Succession Plan**

The County Government is responsible for leadership appointments within the hospital and succession planning for critical positions to ensure continuity of service delivery.

### **vii. Policy to manage Conflict of Interest**

All hospital staff and management are bound by the Public Officer Ethics Act, County Public Service policies, and professional codes of conduct to prevent conflicts of interest.

### **viii. Board Remuneration**

There is no Board remuneration since no Board exists. Staff remuneration follows the guidelines of the Salaries and Remuneration Commission (SRC) and County Public Service regulations.

### **ix. Ethics and Conduct**

The hospital is guided by the Public Service Code of Conduct, County Government regulations, and professional ethical standards to promote integrity, accountability, and transparency.

**x. Governance Audit**

Governance audits are undertaken by the County Government's Internal Audit Department, the Controller of Budget, and the Auditor-General in line with statutory requirements.

**xi. Communication Policy**

The hospital communicates key information through established County Government channels to ensure transparency, accountability, and timely dissemination of information to stakeholders.

**xii. Terms of Reference of Committees**

Although there is no Board, the hospital has internal committees to oversee critical functions and support decision-making.

**xiii. Policy on Related Party Transactions**

The hospital adheres strictly to the Public Procurement and Asset Disposal Act and other regulations to ensure fairness, competitiveness, and transparency in related party transactions.

## **9. Management Discussion and Analysis**

The main operational performance of Kimiti Level 4 Hospital involves provision of health care services. The hospital collects some revenue from patients either via Mpesa – Paybill or NHIF/SHA while offering the services. Currently, the operations of the facility are managed by transfers from the County Government. The monies are used to improve the facility and provide both curative and preventive care services to Kimiti residents. The main challenges faced include delay in disbursement of funds from the County Treasury and large patients work load vs available workforce.

Kimiti Level 4 Hospital is governed by all medical regulatory frameworks, the constitution of Kenya 2010 and other statutory policies put in place either by the national or county government. To that extent, no major non-compliance that may lead to contingent liabilities has been reported. The hospital has no pending court cases unless those of patients such as rape cases and which the facility must support upon request from law-enforcement agencies. However, the facility has pending account payables that should be settled from various suppliers.

The hospital is planning to implement the following projects,

- Overhauling the plumbing system of the hospital
- Renovating and painting the whole hospital
- Planting trees around the hospital and open spaces
- Construction of incinerator
- Install solar power lighting system
- Acquisition of Laundry Machine and Dental Chair
- Construction of a fence
- Drilling of Hospital borehole.

The major risks facing Kimiti level 4 Hospital and which the top management should address immediately for smooth operations and quality health care services include;

- Operational costs emanating from faulty medical equipment
- Market risks resulting from competition from private sector offering quality health care services.
- Delayed cash flow from county treasury
- Over stretched work force in some sections within the Facility

All staff statutory deductions such as PAYE, NSSF and SHA are remitted by the County Government. However, the facility has long outstanding pending bills which should be paid. Currently, the entity's has financial probity and has no serious governance issues which should be addressed.

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

Kimiti Level 4 Hospital exists to transform lives. This is what guides us to deliver our strategy for 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.

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

This Sustainability Strategy outlines Kimiti Level 4 Hospital's commitment to delivering high-quality healthcare in a manner that preserves environmental, social, and economic resources for present and future generations (sustainable healthcare concept). Aligned with global best practices such as the Sustainable Development Goals (SDGs) particularly SDG 3 (Good Health), SDG 6 (Clean Water), SDG 12 (Responsible Production), SDG 13 (Climate Action), SDG 17 (Partnerships) and tailored to our country's healthcare context, this strategy integrates sustainability across governance, operations, procurement, and community engagement.

Key achievements during the reporting period include:

Waste Reduction: Implemented strict waste reduction protocols focusing on reduce, reuse and recycle.

Local Supplier Engagement: Allocated 30%of contracts to local suppliers and contractors, women, youth and PWD owned businesses.

Key failures and mitigation measures include;

Resource Constraints: Renewable energy rollout delayed due to funding challenges.

Staff Resistance: Initial low adoption of waste protocols. The mitigation is increased training.

Kimiti Level 4 Hospital is embedding sustainability at the heart of healthcare delivery; balancing environmental stewardship, social inclusion, and operational efficiency. We commit to continuous improvement, transparent reporting and delivering resilient, equitable healthcare for our community and future generations.

### **ii) Environmental performance**

The hospital is in the process of developing world class environmental policy that will promote e – cycling of wastes to avoid health hazards that can negatively affect our clients

and staff. The waste passes through a microwave during treatment process, which renders it harmless before they are taken to the dumpsite. The incinerator burns the waste at a very high temperature and the products is harmless.

**iii) Employee welfare**

The recruitment and appointment of the medical practitioners and other staff conducted by County Public Services Board in collaboration with mother department of Health. However, the posting and allocation of roles is done based on several elements among them, gender parity. Improvement of employee skills and career management is done through employee sponsorship to further their studies in line with their careers. This is done by sponsorship and supporting employees to attend short courses offered by the government institutions. Training programs are based on the identified needs from the training needs assessments and are emphasized for performance improvement addressing both individual and organizational goals. Performance management system is a process conducted by the employer to identify areas of weakness and support the individuals in order to get better results. It's an annual exercise intended to provide employees with clear understanding of job expectations, regular feedback on performance, advice and steps for improving performance, rewards for good performance and actions for poor performance. It helps to measure performance and ultimately the achievement of intended results for the organization. Lastly, the welfare of the staff is highly valued on the policy safety and compliance of the occupational safety and health act of 2007, (OSHA).

**iv) Market place practices-**

The organisation should outline its efforts to:

**a) Responsible competition practice.**

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

**b) Responsible Supply chain and supplier relations**

Ensures best involvement of suppliers in the tendering process and feedback given to suppliers in good time

**c) Responsible marketing and advertisement**

Effectively done through the use of website and daily newspapers, corporate social responsibility/community engagement

**d) Product stewardship or Awareness Creation**

The hospital safeguards consumers rights and interest issues through protection of health and safety and ensures quality service provision guided by ethics and timeliness.

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

Kimiti level 4 hospital has conducted numerous Corporate Social Responsibility (CSR) activities during the year by offering free – cancer and tuberculosis screening and treatment

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

The management submit their report together with the audited financial statements for the year that ended June 30, 2025, which show the state of the hospital's affairs.

**Principal activities**

The principal activities of the entity are to provide quality and affordable preventive, promotive, rehabilitative and curative health services in both Kimiti Sub- County and other local regions.

**Results**

The results of the entity for the year ended June 30 2025 are set out on pages 1 to 62

**Board of Management**

There was no Board of Management (BOM) during FY 2024-2025.

**Auditors**

The Auditor General is responsible for the statutory audit of the *entity* in accordance with Article 229 of the Constitution of Kenya and the Public Audit Act 2015.



.....  
**Name: Mary Mbithi**

**Medical Superintendent**

## **12. Statement of Board of Management's Responsibilities**

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

The Management is responsible for the preparation and presentation of the entity's financial statements, which give a true and fair view of the state of affairs of the entity for and as at the end of the financial year (period) ended on June 30, 2025. This responsibility includes: (i) maintaining adequate financial management arrangements and ensuring that these continue to be effective throughout the reporting period, (ii) maintaining proper accounting records, which disclose with reasonable accuracy at any time the financial position of 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 entity; (v) selecting and applying appropriate accounting policies, and (vi) making accounting estimates that are reasonable in the circumstances.

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

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

### **Approval of the financial statements**

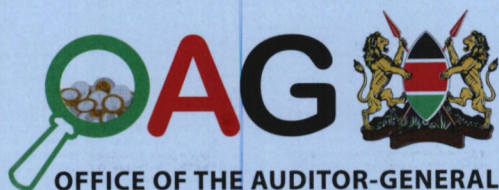
The Hospital's financial statements were approved by the Management on 15/10/25 and signed on its behalf by:

.....  
**Name:**  
**Chairperson**  
**Board of Management**

*Mary*  
.....  
**Name: Mary Mbithi**  
**Accounting Officer**

# REPUBLIC OF KENYA

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Email: info@oagkenya.go.ke  
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HEADQUARTERS  
Anniversary Towers  
Monrovia Street  
P.O Box 30084-00100  
NAIROBI

*Enhancing Accountability*

## REPORT OF THE AUDITOR-GENERAL ON KIMITI LEVEL 4 HOSPITAL FOR THE YEAR ENDED 30 JUNE, 2025 - COUNTY GOVERNMENT OF MACHAKOS

### PREAMBLE

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

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

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

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

### REPORT ON THE FINANCIAL STATEMENTS

#### Qualified Opinion

I have audited the accompanying financial statements of Kimiti Level 4 Hospital - County Government of Machakos set out on pages 1 to 58, which comprise of the statement of

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*Report of the Auditor-General on Kimiti Level 4 Hospital for the year ended 30 June, 2025 - County Government of Machakos*

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, except for the effect of the matters described in the Basis for Qualified Opinion section of my report, the financial statements present fairly, in all material respects, the financial position of Kimiti Level 4 Hospital-County Government of Machakos as at 30 June, 2025 and of its financial performance and its cash flows for the year then ended, in accordance with International Public Sector Accounting Standards (Accrual Basis) and comply with the Health Act, 2017, the County Governments Act, 2012, and the Public Finance Management Act, 2012.

### **Basis for Qualified Opinion**

#### **1. Non-Disclosure of Property, Plant and Equipment**

The statement of financial position reflects a Nil balance in respect to property, plant and equipment. However, review of Hospital records and physical verification revealed various assets including land, buildings, motor vehicles, furniture, computers and equipment which were not disclosed in the financial statements. In addition, the ownership documents for the land where the Hospital is built were not provided for audit review.

In the circumstances, the accuracy, completeness and ownership of property, plant and equipment with a Nil balance could not be confirmed.

#### **2. Unsupported In-Kind Contributions from County Government**

The statement of financial performance and as disclosed in Note 7 to the financial statements reflect revenue from exchange transactions of Kshs.27,451,193 which relate to in-kind contributions from the County Government. Included in the amount is food and ration and pharmaceutical and non-pharmaceutical supplies totaling Kshs.2,239,454 and Kshs.2,787,131 respectively which were not supported with acknowledgment letters, donation agreements or delivery notes.

In the circumstances, the accuracy and completeness of in-kind contributions totalling Kshs.27,451,193 could not be confirmed.

The audit was conducted in accordance with International Standards of Supreme Audit Institutions (ISSAIs). I am independent of the Kimiti Level 4 Hospital Management in accordance with ISSAI 130 on the Code of Ethics. I have fulfilled other ethical

responsibilities in accordance with the ISSAIs and in accordance with other ethical requirements applicable to performing audits of financial statements in Kenya. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my qualified opinion.

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

### **Emphasis of Matter**

#### **Budgetary Control and Performance**

The statement of comparison of budget and actual amounts reflects final receipts budget and actual on comparable basis of Kshs.9,073,227 and Kshs.6,505,394 respectively resulting to an under-funding of Kshs.2,567,833 or approximately 28% of the budget.

The under-utilization affected the planned activities and may have impacted negatively on service delivery to the public.

My opinion is not modified in respect of this matter.

### **Other Information**

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

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

My opinion on the financial statements does not cover the Other Information and accordingly, I do not express an audit opinion or any form of assurance 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, except for the effect of the matters described in the Basis for Conclusion on Lawfulness and Effectiveness in the Use of Public Resources section of my report, I confirm that nothing else has come to my attention to cause me to believe that public resources have not been applied lawfully and in an effective way.

## **Basis for Conclusion**

### **1. Non-Compliance with Ethnicity and People Living with Disabilities**

During the year under review, the total number of employees of the Hospital was twenty-three (23) out of whom twenty-two (22) or approximately ninety-six percent (96%) of the total number were members of the dominant ethnic community in the County. This is contrary to Section 65(1)(e) of the County Government Act of 2012 which states that in selecting candidates for appointment, the County Public Service Board shall consider the need to ensure that at least thirty percent of the vacant posts at entry level are filled by candidates who are not from the dominant ethnic community in the County. In addition, Management had not employed any person living with disabilities contrary to Section 13 of the Persons living with Disability Act, 2023.

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

### **2. Failure to Maintain Fixed Asset Register**

As previously reported, the Hospital Management did not maintain a fixed asset register to control its assets. This is contrary to Regulation 136(1) of the Public Finance Management (County Governments) Regulations, 2015 which states that the Accounting Officer shall be responsible for maintaining a register of assets under his or her control or possession as prescribed by the relevant laws.

In the circumstances, the existence of an effective mechanism to safeguard assets could not be confirmed and Management was in breach of the regulations.

### **3. Non-Compliance with Requirement in Universal Health Care**

As previously reported, review of records, interviews with staff and physical verification of equipment revealed that the hospital did not meet the requirements of Kenya Quality Model for Health Policy Guidelines due to staff deficits by 91 or approximately 90% of the authorized establishment as shown below:

<b>Staffing Requirement</b>	<b>Level 4 Standard</b>	<b>Number in Hospital</b>	<b>Variance</b>	<b>Percentage</b>
Medical Officers	16	0	16	100
Anesthesiologists	2	0	2	100
General Surgeons	2	0	2	100
Gynecologists	2	0	2	100
Pediatricians	2	0	2	100
Radiologists	2	0	2	100
Registered Community Health Nurses	75	10	65	87
<b>Total</b>	<b>101</b>	<b>10</b>	<b>91</b>	<b>90</b>

In addition, no renal and radiology services were offered and the Hospital lacked the necessary equipment and machines outlined in the Health Policy Guidelines as detailed below;

### **Equipment and Machines**

<b>Equipment and Machines</b>	<b>Level 4 Hospital Standard</b>	<b>Actuals in the Hospital</b>	<b>Variance</b>	<b>Percentage %</b>
Incubators (Newborn)	5	0	5	100
Cots	5	1	4	80
Resuscitaire in theatre	1	0	1	100
Resuscitaire in labour ward	2	1	1	50
Functional ICU Beds	6	0	6	100
HDU Beds	6	0	6	100
Renal Unit with Dialysis Machines	5	0	5	100
Functional Operating Theaters Maternity and General	2	0	2	100

### **Bed Capacity**

<b>Bed Capacity</b>	<b>Minimum Requirement</b>	<b>Actual Numbers</b>	<b>Variance</b>	<b>% Actual Against Minimum Requirement</b>
Beds Available	150	24	126	84
<b>Total</b>	<b>150</b>	<b>24</b>	<b>126</b>	<b>84</b>

The deficiencies contravene the First Schedule of Health Act, 2017 and imply that accessing the highest attainable standard 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.

In the circumstances, the Hospital may not be able to deliver quality services as a Level 4 Hospital.

#### **4. Stalled Construction of Staff Quarters**

Project inspection at the Hospital in June, 2025 revealed that construction of staff quarters which had been awarded at a contract sum of Kshs.6,725,792 had stalled in the prior years at the superstructure level. Before it stalled, certificate number 1 of Kshs.2,496,273 had been paid to the contractor. Although Management explained that steps had been taken with the contractor and the Department of Health to ensure completion of the project, no evidence was provided for audit review. In addition, procurement documents, contract, bills of quantities and payment vouchers in support of the contract were not provided for audit review.

In the circumstances, the timely completion of the project and value for money on the total amount of Kshs.2,496,273 paid to the contractor could not be confirmed.

The audit was conducted in accordance with ISSAI 3000 and ISSAI 4000. The standards require that I comply with ethical requirements and plan and perform the audit to obtain assurance about whether the activities, financial transactions and information reflected in the financial statements comply in all material respects, with the authorities that govern them. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my conclusion.

### **REPORT ON EFFECTIVENESS OF INTERNAL CONTROLS, RISK MANAGEMENT AND GOVERNANCE**

#### **Conclusion**

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

#### **Basis for Conclusion**

##### **1. Lack of an Approved Staff Establishment**

The Hospital did not have an approved staff establishment contrary to Section B.2(1) of the Human Resource Policies and Procedures Manual for the Public Service, 2016 which requires every public entity to prepare human resource plans based on comprehensive job analysis to support achievement of goals and objectives in their strategic plans.

In the circumstances, operation of the Hospital at an optimum level could not be confirmed.

## **2. Lack of a Strategic Plan and Operational Plan**

As at the time of the audit in September, 2025, Management had not developed a strategic plan and an operational plan to guide its long-term objectives and day-to-day activities.

In the circumstances, absence of strategic and operational plans may result in uncoordinated activities, inefficient resource utilization, and failure to achieve key objectives.

## **3. Lack of Information Technology (IT) Strategic Committee, Steering Committee and IT Policy**

During the year under review, the Hospital Management had not put in place an IT Strategy Committee, IT Steering Committee, IT Policy, business continuity plan and an IT continuity plan.

In the circumstances, absence of the committees, IT policy and plans, strategic advice on ICT initiatives and IT mission and goals of the Hospital could not be confirmed.

## **4. Lack of Risk Management Policy and Disaster Recovery Plan**

As previously reported, the Hospital Management had not put in place a Risk Management Policy, strategies and risk register to mitigate against risk. It was therefore not clear how risk exposure was managed. This is contrary to Regulation 158(1)(a) and (b) of the Public Finance Management (County Governments) Regulations, 2015. Further, the Hospital did not have disaster recovery and business continuity plans required for identifying, preventing, and mitigating against disasters and ensuring that its operations are not interrupted.

In the circumstances, Management's preparedness towards responding to risk 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 the Management and Board of Directors**

Management is responsible for the preparation and fair presentation of these financial statements in accordance with International Financial Reporting 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 Directors is responsible for overseeing the Hospital's financial reporting process, reviewing the effectiveness of how Management monitors compliance with relevant legislative and regulatory requirements, ensuring that effective processes and systems are in place to address key roles and responsibilities in relation to governance and risk management, and ensuring the adequacy and effectiveness of the control environment.

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

My responsibility is to conduct an audit of the financial statements in accordance with Article 229(4) of the Constitution, Section 35 of the Public Audit Act, 2015 and the International Standards of Supreme Audit Institutions (ISSAIs). The standards require that, in conducting the audit, I obtain reasonable assurance about whether the financial statements as a whole are free from material misstatements, whether due to fraud or error and to issue an auditor's report that includes my opinion in accordance with Section 48 of the Public Audit Act, 2015. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with ISSAIs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

In conducting the audit, Article 229(6) of the Constitution also requires that I express a conclusion on whether or not in all material respects, the activities, financial transactions and information reflected in the financial statements are in compliance with the authorities that govern them and that public resources are applied in an effective way. In addition, I consider the entity's control environment in order to give an assurance on the

effectiveness of internal controls, risk management and governance processes and systems in accordance with the provisions of Section 7 (1) (a) of the Public Audit Act, 2015.

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

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

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

**Nairobi**

**04 November, 2025**

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

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

Description	Notes	2024/25	2023/24
		Kshs	Kshs
<b>Revenue from non-exchange transactions</b>			
Transfers from the County Government	6	3,300,000	7,350,000
In-kind contributions from the County Government	7	27,451,193	-
Grants from donors and development partners	8	-	-
Transfers from other Government entities	9	-	-
Public contributions and donations	10	-	-
		<b>30,751,193</b>	<b>7,350,000</b>
<b>Revenue from exchange transactions</b>			
Rendering of services- Medical Service Income	11	4,634,432	257,070
Revenue from rent of facilities	12		
Finance /Interest Income	13		
Other income ( <i>specify</i> )	14	-	-
<b>Revenue from exchange transactions</b>		<b>4,634,432</b>	<b>257,070</b>
<b>Total revenue</b>		<b>35,385,625</b>	<b>7,607,070</b>
<b>Expenses</b>			
Medical/Clinical costs	15	8,515,790	4,367,271
Employee costs	16	22,888,409	215,000
Board of Management Expenses	17	-	-
Depreciation and amortization expense	18	-	-
Repairs and maintenance	19	378,375	813,469
Grants and subsidies	20	-	-
General expenses	21	2,036,054	1,490,333
Finance costs	22		
<b>Total expenses</b>		<b>33,818,628</b>	<b>6,886,073</b>
<b>Other gains/(losses)</b>			
Gain on disposal of non-Current assets	23	-	-
Unrealized gain on fair value of investments	24	-	-
Medical services contracts Gains/Losses	25	-	-
Impairment loss	26	-	-
Gain on foreign exchange transactions		-	-
<b>Total other gains/(losses)</b>		<b>-</b>	<b>-</b>
<b>Net Surplus/ (Deficit) for the year</b>		<b>1,566,997</b>	<b>720,997</b>



(The notes set out on pages 11 to 55 form an integral part of the Annual Financial Statements.)

***Kimiti Level 4 Hospital (Machakos County Government)***

***Annual Report and Financial Statements for The Year Ended 30<sup>th</sup> June 2025***

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The Hospital's financial statements were approved by the Management on 15/10/25 and signed on its behalf by:

.....		
<b>Chairman</b>	<b>Head of Finance</b>	<b>Medical Superintendent</b>
<b>Board of Management</b>	<b>ICPAK No: 34845</b>	

*Kimiti Level 4 Hospital (Machakos County Government)*  
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**15. Statement of Financial Position As At 30<sup>th</sup> June 2025**

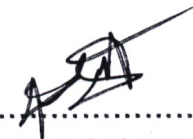
Description	Notes	2024/25	2023/24
		Kshs	Kshs
<b>Assets</b>			
<b>Current assets</b>			
Cash and cash equivalents	27	152,959	1,138,795
Prepayments	28	-	-
Receivables from exchange transactions	29	2,567,833	560,654
Receivables from non-exchange transactions	30	-	-
Inventories	31	1,227,003	563,916
<b>Total Current Assets</b>		<b>3,947,795</b>	<b>2,263,364</b>
<b>Non-current assets</b>			
Property, plant, and equipment	32	-	-
Intangible assets	33	-	-
Investment property	34	-	-
Biological Assets	35	-	-
<b>Total Non-current Assets</b>		<b>-</b>	<b>-</b>
<b>Total assets (A)</b>		<b>3,947,795</b>	<b>2,263,364</b>
<b>Liabilities</b>			
<b>Current liabilities</b>			
Trade and other payables	36	1,654,363	1,536,930
Refundable deposits from customers/Patients	37	-	-
Provisions	38	-	-
Finance lease obligation	39	-	-
Current portion of deferred income	40	-	-
Current portion of borrowings	41	-	-
<b>Total Current Liabilities</b>		<b>1,654,363</b>	<b>1,536,930</b>
<b>Non-current liabilities</b>			
Provisions	38	-	-
Non-Current Finance lease obligation	39	-	-
Non-Current portion of deferred income	40	-	-
Non - Current portion of borrowings	41	-	-
Service concession Arrangements	42	-	-
<b>Total Non-current liabilities</b>		<b>-</b>	<b>-</b>
<b>Total Liabilities (B)</b>		<b>1,654,363</b>	<b>1,536,930</b>
<b>Net assets (A-B)</b>		<b>2,293,431</b>	<b>726,434</b>

**Kimiti Level 4 Hospital (Machakos County Government)**  
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Description	Notes	2024/25	2023/24
		Kshs	Kshs
<b>Represented By:</b>			
Revaluation reserve		-	-
Accumulated surplus/Deficit		2,293,431	726,434
Capital Fund		-	-
<b>Total Net Assets</b>		<b>2,293,431</b>	<b>726,434</b>

*(The notes on pages 11 to 55 form an integral part of the Annual Financial Statements.)*

The Hospital's financial statements were approved by the Management on 15/10/25 and signed on its behalf by:

.....		.....
<b>Chairman</b>	<b>Head of Finance</b>	<b>Medical Superintendent</b>
<b>Board of Management</b>	<b>ICPAK No: 34845</b>	

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

Description	Revaluation reserve	Accumulated surplus/Deficit	Capital Fund	Total
<b>As at July 1, 2023(previous year)</b>	-	5,437	-	5,437
Revaluation gain	-	-	-	-
Adjusted Surplus/(deficit) for the year		720,997		720,997
Capital/Development grants	-	-	-	-
<b>As at June 30, 2024 (previous year)</b>	-	726,434	-	726,434
				-
<b>At July 1, 2024 (current year)</b>	-	726,434	-	726,434
Adjustments (June 2024 employee cost)		(25,000)		(25,000)
Revaluation gain	-	-	-	-
Surplus/(deficit) for the year	-	1,566,997	-	1,566,997
Capital/Development grants	-	-	-	-
<b>At June 30, 2025 (current year)</b>	-	2,268,431	-	2,293,431

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

<b>Description</b>	<b>Notes</b>	<b>2024/25</b>	<b>2023/24</b>
		<b>Kshs</b>	<b>Kshs</b>
<b>Cash flows from operating activities</b>			
<b>Receipts</b>			
Transfers from the County Government	6	3,300,000	7,350,000
Grants from donors and development partners	8	-	-
Transfers from other Government entities	9	-	-
Public contributions and donations	10	-	-
Rendering of services- Medical Service Income	11	2,066,599	257,070
Revenue from rent of facilities	12	-	-
Finance / interest income	13	-	-
Miscellaneous receipts	14	-	-
<b>Total Receipts</b>		<b>5,366,599</b>	<b>7,607,070</b>
<b>Payments</b>			
Medical/Clinical costs	15	3,489,206	4,367,271
Employee costs	16	448,800	215,000
Board of Management Expenses	17	-	-
Repairs and maintenance	19	378,375	813,469
Grants and subsidies	20	-	-
General expenses	21	2,036,054	1,490,333
Finance costs	22	-	-
Refunds paid out		-	-
<b>Total Payments</b>		<b>6,352,435</b>	<b>6,886,073</b>
<b>Net cash flows from operating activities</b>		<b>(985,836)</b>	<b>720,997</b>
<b>Cash flows from investing activities</b>			
Purchase of property, plant, equipment		-	-
Purchase of intangible assets		-	-
Proceeds from the sale of PPE			
Acquisition of investments		-	-
<b>Net cash flows used in investing activities</b>		<b>-</b>	<b>-</b>
<b>Cash flows from financing activities</b>			
Proceeds from borrowings		-	-
Repayment of borrowings		-	-
Capital grants received		-	-
<b>Net cash flows used in financing activities</b>		<b>-</b>	<b>-</b>
<b>Net increase/(decrease) in cash and cash equivalents</b>		<b>(985,836)</b>	<b>720,997</b>

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<b>Description</b>	<b>Notes</b>	<b>2024/25</b>	<b>2023/24</b>
		<b>Kshs</b>	<b>Kshs</b>
Cash and cash equivalents at 1 July		1,138,795	417,798
<b>Cash and cash equivalents at 30 Jun</b>		<b>152,959</b>	<b>1,138,795</b>

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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 utilization
	a	B	c=(a+b)	d	e=(c-d)	f=d/c %
	Kshs	Kshs	Kshs	Kshs		Kshs
Budget carryovers from the previous year	-	1,138,795	1,138,795	1,138,795	-	100%
<b>Receipts</b>						
Transfers from the County Government	3,300,000	-	3,300,000	3,300,000	-	100%
Grants from donors and development partners	-	-	-	-	-	-
Transfers from other Government entities	-	-	-	-	-	-
Public contributions and donations	-	-	-	-	-	-
Rendering of services- Medical Service Income	4,634,432	-	4,634,432	2,066,599	2,567,833	45%
Revenue from rent of facilities	-	-	-	-	-	-
Finance / interest income	-	-	-	-	-	-
Miscellaneous receipts	-	-	-	-	-	-
<b>Total receipts</b>	<b>7,934,432</b>	<b>1,138,795</b>	<b>9,073,227</b>	<b>6,505,394</b>	<b>2,567,833</b>	<b>72%</b>
<b>Expenses</b>						
Medical/Clinical costs	3,580,911	1,138,795	4,719,706	3,474,206	1,245,500	74%
Employee costs	708,800	-	708,800	463,800	245,000	65%

***Kimiti Level 4 Hospital (Machakos County Government)***  
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Remuneration of directors	-	-	-	-	-	0%
Repairs and maintenance	528,975	-	528,975	378,375	150,600	72%
Grants and subsidies	-	-	-	-	-	0%
General expenses	3,115,746	-	3,115,746	2,036,054	1,079,692	65%
Finance costs	-	-	-	-	-	0%
Refunds	-	-	-	-	-	0%
<b>Total Operational Expenditure paid</b>	<b>7,934,432</b>	<b>1,138,795</b>	<b>9,073,227</b>	<b>6,352,435</b>	<b>2,720,792</b>	<b>70%</b>
<b>Capital Expenditure paid</b>	-	-	-	-	-	-
<b>Surplus for the period</b>	-	-	-	<b>152,959</b>	<b>(152,959)</b>	

***Budget notes***

The budget performance for Medical/Clinical Costs, Employee costs, Repairs and Maintenance and General expenses were below 90% due to shortfall in revenue.

**Budget Reconciliation**

	<b>Description of Particulars</b>	<b>Amount in Kshs</b>
	Actual Surplus Amounts as per the statement of Budget	152,959
1	Reason for differences	-
	Closing Cash and Cash Equivalent as per the statement of Cash flows	152,959

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

### **1. General Information**

Kimiti Level 4 Hospital is established by and derives its authority and accountability from Gazette Notice Number No.786 dated 4th February 2020. The entity is wholly owned by the Machakos County Government and is domiciled in Machakos County in Kenya. The entity's principal activity is rendering medical services to the public.

### **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 Note 5 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.

**3. Adoption of New and Revised Standards**

*i. New and amended standards and interpretations in issue effective in the year ended 30 June 2025*

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

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

<b>Standard</b>	<b>Effective date and impact:</b>
IPSAS 43	<p><i>Applicable 1<sup>st</sup> January 2025</i></p> <p>The standard sets out the principles for the recognition, measurement, presentation, and disclosure of leases. The objective is to ensure that lessees and lessors provide relevant information in a manner that faithfully represents those transactions. This information gives a basis for users of financial statements to assess the effect that leases have on the financial position, financial performance and cashflows of an Entity.</p> <p>The new standard requires entities to recognise, measure and present information on right of use assets and lease liabilities.</p>
IPSAS 44: Non- Current Assets Held for Sale and Discontinued Operations	<p><i>Applicable 1<sup>st</sup> January 2025</i></p> <p>The Standard requires,</p> <p>Assets that meet the criteria to be classified as held for sale to be measured at the lower of carrying amount and fair value less costs to sell and the depreciation of such assets to cease and:</p> <p>Assets that meet the criteria to be classified as held for sale to be presented separately in the statement of financial position and the results of discontinued operations to be presented separately in the statement of financial performance.</p>
IPSAS 45- Property Plant and Equipment	<p><i>Applicable 1<sup>st</sup> January 2025</i></p> <p>The standard supersedes IPSAS 17 on Property, Plant and Equipment. IPSAS 45 has additional guidance/ new guidance for heritage assets, infrastructure assets and measurement. Heritage assets were previously</p>

Standard	Effective date and impact:
	<p>excluded from the scope of IPSAS 17 in IPSAS 45, heritage assets that satisfy the definition of PPE shall be recognised as assets if they meet the criteria in the standard. IPSAS 45 has an additional application guidance for infrastructure assets, implementation guidance and illustrative examples. The standard has clarified existing principles e.g valuation of land over or under the infrastructure assets, under- maintenance of assets and distinguishing significant parts of infrastructure assets.</p>
<p>IPSAS 46 Measurement</p>	<p><i>Applicable 1<sup>st</sup> 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"> <li>i. Providing further detailed guidance on the implementation of commonly used measurement bases and the circumstances under which they should be used.</li> <li>ii. Clarifying transaction costs guidance to enhance consistency across IPSAS;</li> <li>iii. Amending where appropriate guidance across IPSAS related to measurement at recognition, subsequent measurement and measurement related disclosures.</li> </ul> <p>The standard also introduces a public sector specific measurement bases called the current operational value.</p>
<p>IPSAS 47- Revenue</p>	<p><i>Applicable 1<sup>st</sup> 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>

Standard	Effective date and impact:
<p>IPSAS 48- Transfer Expenses</p>	<p><i>Applicable 1<sup>st</sup> 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>
<p>IPSAS 49- Retirement Benefit Plans</p>	<p><i>Applicable 1<sup>st</sup> January 2026</i></p> <p>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.</p>
<p>IPSAS 50: Exploration For &amp; Evaluation of Mineral Resources</p>	<p><i>Applicable 1<sup>st</sup> January 2027</i></p> <p>The objective of this Standard is to specify the financial reporting for the exploration for and evaluation of mineral resources. The Standard requires:</p> <ul style="list-style-type: none"> <li>i. Limited improvements to existing accounting practices for exploration and evaluation expenditures.</li> <li>ii. Entities that recognize exploration and evaluation assets to assess such assets for impairment in accordance with this Standard and measure any impairment in accordance with IPSAS 26.</li> <li>iii. Disclosures that identify and explain the amounts in 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.</li> </ul>

*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, 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 2024/2025 was approved by the County Assembly on **26<sup>th</sup> June 2024**. Subsequent revisions or additional appropriations were made to the approved budget in accordance with specific approvals from the appropriate authorities. The additional appropriations are added to the original budget by the entity upon receiving the respective approvals in order to conclude the final budget. Accordingly, the *entity* recorded additional appropriations on the FY 2024/2025 budget following the Management'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 *10* 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.

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 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 29*.

## **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.

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

*Notes to the Financial Statements (Continued)*

**m. Social Benefits**

Social benefits are cash transfers provided to i) specific individuals and / or households that meet the eligibility criteria, ii) mitigate the effects of social risks and iii) Address the need of society as a whole. 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.

**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.

**s. Foreign currency transactions**

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

**t. Borrowing costs**

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

**u. Related parties**

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, the *Entity* 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 Co-operative Bank of Kenya at the end of the financial year. For the purposes of these financial statements, cash and cash equivalents also include short term cash imprests and advances to authorised public officers and/or institutions which were not surrendered or accounted for at the end of the financial year.

**x. Comparative figures**

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

**y. Subsequent events**

There have been no events subsequent to the financial year end with a significant impact on the financial statements for the year ended June 30, 2025.

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

The preparation of 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 Note 38. Provisions are measured at the management's best estimate of the expenditure required to settle the obligation at the reporting date and are discounted to present value where the effect is material.

**Notes to Financial Statements Continued**

**6. Transfers from the County Government**

Description	2024/25	2023/24
	KShs	KShs
<b>Unconditional Grants</b>		
Operational Grant	3,300,000	7,350,000
Level 5 Grants	-	-
Unconditional Development Grants	-	-
Other Grants	-	-
	<b>3,300,000</b>	<b>7,350,000</b>
<b>Conditional Grants</b>		
User Fee Forgone	-	-
Transforming Health Services For Universal Care Project)	-	-
DANIDA	-	-
Wards Development Grant	-	-
Paediatric Block Grant	-	-
Administration Block Grant	-	-
Laboratory Grant	-	-
<b>Total Government Grants And Subsidies</b>	<b>3,300,000</b>	<b>7,350,000</b>

**6 b Transfers from The County Government**

Name of the Entity sending the grant	Amount recognized to Statement of financial performance	Amount deferred under deferred income	Amount recognised in capital fund.	Total grant income during the period	2023/24
	Kshs	Kshs			
			Kshs	Kshs	Kshs
Machakos County Government	3,300,000	-	-	3,300,000	7,350,000
<b>Total</b>	<b>3,300,000</b>	<b>-</b>	<b>-</b>	<b>3,300,000</b>	<b>7,350,000</b>

**Notes to Financial Statements Continued**

**7. In Kind Contributions from The County Government**

Description	2024/25	2023/24
	KShs	KShs
Salaries and wages	22,424,609	-
Food & Rations	2,239,454	-
Medical supplies-Drawings Rights (KEMSA)	-	-
Pharmaceutical and Non-Pharmaceutical Supplies	2,787,131	-
Utility bills	-	-
<b>Total grants in kind</b>	<b>27,451,193</b>	<b>-</b>

**8. Grants From Donors and Development Partners**

Description	2024/25	2023/24
	KShs	KShs
Cancer Centre grant- DANIDA	-	-
World Bank grants	-	-
Paediatric ward grant- JICA	-	-
Research grants	-	-
Other grants	-	-
<b>Total grants from development partners</b>	<b>-</b>	<b>-</b>

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

Name of the Entity sending the grant	Amount recognized to Statement of financial performance	Amount deferred under deferred income	Amount recognised in capital fund.	Total grant income during the year	2023/24
	KShs	KShs	KShs	KShs	KShs
Donor e.g., DANIDA	-	-	-	-	-
JICA	-	-	-	-	-
World Bank	-	-	-	-	-
<b>Total</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>

**Notes to Financial Statements Continued**

**9. Transfers From Other Government Entities**

Description	2024/25	2023/24
	KShs	KShs
Transfer from National Government (Ministry of Health)	-	-
Transfer from National Hospital	-	-
Transfer from Institute	-	-
<b>Total Transfers</b>	-	-

**10. Public Contributions and Donations**

Description	2024/25	2023/24
	KShs	KShs
Public donations	-	-
Donations from local leadership	-	-
Donations from religious institutions	-	-
Donations from other international organisations and individuals	-	-
Other donations( <i>specify</i> )	-	-
Donations in kind-amortised	-	-
<b>Total donations and sponsorships</b>	-	-

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

Description	2024/25	2023/24
	Kshs	Kshs
<b>Balance unspent at beginning of year</b>	-	-
Current year receipts	-	-
Amortised and transferred to revenue	-	-
<b>Conditions to be met – remain liabilities</b>	-	-

**Notes to Financial Statements Continued**

**11. Rendering of Services-Medical Service Income**

<b>Description</b>	<b>2024/25</b>	<b>2023/24</b>
	<b>KShs</b>	<b>KShs</b>
Pharmaceuticals	-	-
Non-Pharmaceuticals	-	-
Laboratory	-	-
Radiology	-	-
Orthopaedic and Trauma Technology	-	-
Theatre	-	-
Accident and Emergency Service	-	-
Anaesthesia Service	-	-
Ear Nose and Throat service	-	-
Nutrition service	-	-
Cancer centre service	-	-
Dental services	-	-
Reproductive health	-	-
Paediatrics services	-	-
Farewell home services	-	-
Ambulance Services		
Other medical services income (NHIF/SHA)	4,634,432	257,070
<b>Total revenue from the rendering of services</b>	<b>4,634,432</b>	<b>257,070</b>

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

**12. Revenue From Rent of Facilities**

Description	2024/25	2023/24
	Kshs	Kshs
Residential property	-	-
Commercial property	-	-
<b>Total Revenue from rent of facilities</b>	-	-

**13. Finance /Interest Income**

Description	2024/25	2023/24
	Kshs	Kshs
Interest income from Cash investments and fixed deposits	-	-
Interest income from short- term/ current deposits	-	-
Interest income from Treasury Bills	-	-
Interest income from Treasury Bonds	-	-
Interest from outstanding debtors	-	-
<b>Total finance income</b>	-	-

**14. Miscellaneous Income**

Description	2024/25	2023/24
	KShs	KShs
Insurance recoveries	-	-
Income from sale of tender	-	-
Services concession income	-	-
Sale of goods (water, publications, containers etc)	-	-
Write backs (Deposits, payments in advance etc)	-	-
Bad debts recovered	-	-
<i>Others</i>	-	-
<b>Total Miscellaneous income</b>	-	-

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

**15. Medical/ Clinical Costs**

<b>Description</b>	<b>2024/25</b>	<b>2023/24</b>
	<b>KShs</b>	<b>KShs</b>
Dental costs/ materials	-	-
Laboratory chemicals and reagents	357,570	551,300
Public health activities	-	-
Food and Ration	2,389,448	137,471
Uniform, clothing, and linen	-	-
Dressing and Non-Pharmaceuticals	583,516	3,124,090
Pharmaceutical supplies	3,026,296	347,810
Health information stationery	-	-
Reproductive health materials	-	-
Sanitary and cleansing Materials	288,420	206,600
Purchase of Medical gases	-	-
X-Ray/Radiology supplies	-	-
Other medical related clinical costs (Other Current Transfers)	1,870,541	-
<b>Total medical/ clinical costs</b>	<b>8,515,790</b>	<b>4,367,271</b>

**16. Employee Costs**

<b>Description</b>	<b>2024/25</b>	<b>2023/24</b>
	<b>KShs</b>	<b>KShs</b>
Salaries, wages, and allowances	22,888,409	215,000
Contributions to pension schemes	-	-
Service gratuity	-	-
Performance and other bonuses	-	-
Staff medical expenses and Insurance cover	-	-
Group personal accident insurance and WIBA	-	-
Social contribution	-	-
Other employee costs	-	-
<b>Employee costs</b>	<b>22,888,409</b>	<b>215,000</b>

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

**17. Board of Management Expenses**

Description	2024/25	2023/24
	Kshs	Kshs
Chairman's Honoraria	-	-
Sitting allowance	-	-
Mileage	-	-
Insurance expenses	-	-
Induction and training	-	-
Travel and accommodation allowance	-	-
Airtime allowances	-	-
<b>Total</b>	-	-

**18. Depreciation and Amortization Expense**

Description	2024/25	2023/24
	Kshs	Kshs
Property, plant and equipment	-	-
Intangible assets	-	-
Investment property carried at cost	-	-
<b>Total depreciation and amortization</b>	-	-

**19. Repairs And Maintenance**

Description	2024/25	2023/24
	KShs	KShs
Property- Buildings	242,465	428,969
Medical equipment	85,860	50,000
Office equipment	-	-
Furniture and fittings	-	66,500
Computers and accessories	-	97,000
Motor vehicle expenses	50,050	171,000
Maintenance of civil works	-	-
<b>Total repairs and maintenance</b>	<b>378,375</b>	<b>813,469</b>

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

**20. Grants And Subsidies**

Description	2024/25	2023/24
	Kshs	Kshs
Community development and social work	-	-
Education initiatives and programs	-	-
Free/ subsidised medical camp	-	-
Disability programs	-	-
Free cancer screening	-	-
Social benefit expenses	-	-
Other grants and subsidies( <i>specify</i> )	-	-
<b>Total grants and subsidies</b>	-	-

**21. General Expenses**

Description	2024/25	2023/24
	KShs	KShs
Advertising and publicity expenses	-	-
Catering expenses	133,432	118,550
Waste management expenses	-	-
Insecticides and rodenticides	-	-
Audit fees	-	-
Bank charges	20,805	14,143
Conferences and delegations	-	-
Consultancy fees	-	-
Contracted services	-	-
Electricity expenses	220,960	156,510
Fuel and Lubricants	538,100	240,800
Insurance	-	-
Research and development expenses	-	-
Travel and accommodation allowance	100,000	100,000
Legal expenses	-	-
Licenses and permits	-	-
Courier and postal services	-	-
Printing and stationery	723,157	550,880
Hire charges	-	-
Rent expenses	-	-
Water and sewerage costs	201,600	131,500
Skills development levies	-	-

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Telephone and mobile phone services	98,000	177,950
Internet expenses	-	-
Staff training and development	-	-
Subscriptions to professional bodies	-	-
Subscriptions to newspapers periodical, magazines, and gazette notices	-	-
Library books/Materials	-	-
Parking charges	-	-
<b>Total General Expenses</b>	<b>2,036,054</b>	<b>1,490,333</b>

**22. Finance Costs**

Description	2024/25	2023/24
	KShs	KShs
Borrowings (amortized cost) *	-	-
Finance leases (amortized cost)	-	-
Interest on Bank overdrafts/Guarantees	-	-
Interest on loans from commercial banks	-	-
<b>Total finance costs</b>	<b>-</b>	<b>-</b>

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

Description	2024/25	2023/24
	KShs	KShs
Property, plant, and equipment	-	-
Intangible assets	-	-
Other assets not capitalised ( <i>specify</i> )	-	-
<b>Total gain on sale of assets</b>	<b>-</b>	<b>-</b>

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

Description	2024/25	2023/24
	KShs	KShs
Investments at fair value	-	-
<b>Total gain</b>	<b>-</b>	<b>-</b>

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

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

Description	2024/25	2023/24
	KShs	KShs
Comprehensive care contracts with NHIF/SHA	-	-
Non- Comprehensive contracts care with NHIF/SHA	-	-
Linda Mama Program	-	-
Waivers and Exemptions	-	-
<b>Total Gain/Loss</b>	-	-

**26. Impairment Loss**

Description	2024/25	2023/24
	KShs	KShs
Property, plant, and equipment	-	-
Intangible assets	-	-
Investments	-	-
<b>Total impairment loss</b>	-	-

**27. Cash And Cash Equivalents**

Description	2024/25	2023/24
	KShs	KShs
Current accounts	152,959	1,138,795
On - call deposits	-	-
Fixed deposits accounts	-	-
Cash in hand	-	-
Others( <i>specify</i> )- Mobile money	-	-
<b>Total cash and cash equivalents</b>	<b>152,959</b>	<b>1,138,795</b>

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

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

Description		2024/25	2023/24
Financial institution	Account number	KShs	KShs
<b>a) Current account</b>			
Kenya Commercial Bank	1134754388	151,345	560,330
Kenya Commercial Bank	1112396705	1,614	578,465
<b>Sub- total</b>		<b>152,959</b>	<b>1,138,795</b>
<b>b) On - call deposits</b>			
Kenya Commercial bank		-	-
Equity Bank – etc		-	-
<b>Sub- total</b>		<b>-</b>	<b>-</b>
<b>c) Fixed deposits account</b>			
Bank Name		-	-
<b>Sub- total</b>		<b>-</b>	<b>-</b>
<b>d) Others(specify)</b>			
Cash in hand		-	-
Mobile money- Mpesa, Airtel money		-	-
<b>Sub- total</b>		<b>-</b>	<b>-</b>
<b>Grand total</b>		<b>152,959</b>	<b>1,138,795</b>

**28. Prepayments**

Description	2024/25	2023/24
	Kshs	Kshs
Insurance	-	-
Rent	-	-
Water	-	-
Internet	-	-
Others specify	-	-
Total	-	-

**29. Receivables From Exchange Transactions**

Description	2024/25	2023/24
	KShs	KShs
Medical services receivables	2,567,833	560,654
Rent receivables	-	-
Other exchange debtors	-	-
Less: impairment allowance	-	-
<b>Total receivables</b>	<b>2,567,833</b>	<b>560,654</b>

**Analysis of Receivables From Exchange Transactions**

Description	2024/25		2023/24	
	Kshs		Kshs	
	Current FY	% of the total	Comparative FY	% of the total
Less than 1 year	2,567,833	100%	-	0%
Between 1- 2 years	-	%	560,654	100%
Between 2-3 years	-	%	-	%
Over 3 years	-	%	-	%
<b>Total (a+b)</b>	<b>2,567,833</b>	<b>100%</b>	<b>560,654</b>	<b>100%</b>

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

Description	2024/25	2023/24
	KShs	KShs
Transfers from the County Government	-	-
Undisbursed donor funds	-	-
Other debtors ( <i>non-exchange transactions</i> )	-	-
Less: impairment allowance	-	-
<b>Total</b>	-	-

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

Description	2024/25		2023/24	
	Kshs		Kshs	
	Current FY	% of the total	Comparative FY	% of the total
Less than 1 year	-	%	-	%
Between 1- 2 years	-	%	-	%
Between 2-3 years	-	%	-	%
Over 3 years	-	%	-	%
<b>Total (a+b)</b>	-	%	-	%

**31. Inventories**

Description	2024/25	2023/24
	KShs	KShs
Pharmaceutical supplies	1,227,003	563,916
Non-Pharmaceutical supplies	-	-
Maintenance supplies	-	-
Food supplies	-	-
Linen and clothing supplies	-	-
Cleaning materials supplies	-	-
General supplies	-	-
Less: provision for impairment of stocks	-	-
<b>Total</b>	<b>1,227,003</b>	<b>563,916</b>

**Detailed disclosure on inventories**

	2024/25	2023/24
	FY	Comparative FY
Opening balance	563,916	-
Additional Inventory in the year		
Food & Ration	2,239,454	-
Pharmaceutical	2,787,131	-
KEMSA	4,152,292	-
Inventory expensed in the year	(8,515,790)	-
Write-downs in the year	-	-
Others specify	-	-
<b>Closing balance</b>	<b>1,227,003</b>	<b>-</b>

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*Notes to the Financial Statements (Continued)*

**32. Property, Plant and Equipment**

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

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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
Disposals		-	-	-	-	-	-	-	-
Impairment		-	-	-	-	-	-	-	-
<b>At 30 June 2024</b>		-	-	-	-	-	-	-	-
At July 2024 (current year)		-	-	-	-	-	-	-	-
Depreciation		-	-	-	-	-	-	-	-
Disposals		-	-	-	-	-	-	-	-
Impairment		-	-	-	-	-	-	-	-
Transfer/adjustment		-	-	-	-	-	-	-	-
<b>At 30<sup>th</sup> June 2025</b>		-	-	-	-	-	-	-	-
<b>Net book values</b>									
At 30 <sup>th</sup> Jun 2024 (previous)	-	-	-	-	-	-	-	-	-
At 30 <sup>th</sup> Jun 2025 (current)	-	-	-	-	-	-	-	-	-

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

**33. Intangible Assets-Software**

Description	2024/25	2023/24
	KShs	KShs
<b>Cost</b>		
<b>At beginning of the year</b>	-	-
Additions	-	-
Additions-Internal development	-	-
Disposal	-	-
<b>At end of the year</b>	-	-
<b>Amortization and impairment</b>		
<b>At beginning of the year</b>	-	-
Amortization for the period	-	-
Impairment loss	-	-
<b>At end of the year</b>	-	-
<b>NBV</b>	-	-

**34. Investment Property**

Description	2024/25	2023/24
	KShs	KShs
<b>At beginning of the year</b>	-	-
Additions	-	-
Disposals during the year	-	-
Fair value gain	-	-
Depreciation ( <i>where investment property is at cost</i> )	-	-
Impairment	-	-
<b>At end of the year</b>	-	-

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

**35. Biological Assets**

Description	2024/25	2023/24
	Kshs	Kshs
Trees in a plantation forest	-	-
Animals: Dairy Cattle, Pigs, Sheep	-	-
Others specify	-	-
<b>Total</b>	-	-

**36. Trade and other Payables**

Description	2024/25		2023/24	
	KShs		KShs	
Trade payables	1,654,363		1,536,930	
Employee dues	-		-	
Third-party payments (e.g. unremitted payroll deductions)	-		-	
Audit fee	-		-	
Doctors' fee	-		-	
<b>Total trade and other payables</b>	<b>1,654,363</b>		<b>1,536,930</b>	
<b>Ageing analysis:</b>	<b>2024/25</b>	<b>% of the Total</b>	<b>2023/24</b>	<b>% of the total</b>
Under one year	-	0%	-	%
1-2 years	1,654,363	100%	1,536,930	100%
2-3 years	-	%	-	%
Over 3 years	-	%	-	%
<b>Total</b>	<b>1,654,363</b>	<b>100%</b>	<b>1,536,930</b>	<b>100%</b>

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

Description	2024/25		2023/24	
	KShs		KShs	
Medical fees paid in advance		-		-
Credit facility deposit		-		-
Rent deposits		-		-
Others ( <i>specify</i> )		-		-
<b>Total deposits</b>		-		-
<b>Ageing analysis:</b>	<b>Current FY</b>	<b>% of the Total</b>	<b>Comparative FY</b>	<b>% of the Total</b>
Under one year	-	%	-	%
1-2 years	-	%	-	%
2-3 years	-	%	-	%
Over 3 years	-	%	-	%
<b>Total</b>	-	%	-	%

**38. Provisions**

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

**39. Finance Lease Obligation**

Description	2024/25	2023/24
	Kshs	Kshs
Current Lease obligation	-	-
Long term lease obligation	-	-
<b>Total</b>	-	-

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

**40. Deferred Income**

Description	2024/25	2023/24
	KShs	KShs
Current Portion	-	-
Non-Current Portion	-	-
<b>Total</b>	-	-

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

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

**41. Borrowings**

Description	2024/25	2023/24
	KShs	KShs
<b>Balance at beginning of the period</b>	-	-
External borrowings during the year	-	-
Domestic borrowings during the year	-	-
Repayments of external borrowings during the year	-	-
Repayments of domestic borrowings during the year	-	-
<b>Balance at end of the period</b>	-	-

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

Description	2024/25	2023/24
	KShs	KShs
Current Obligation	-	-
Non-Current Obligation	-	-
<b>Total</b>	-	-

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

**42. Service Concession Arrangements**

Description	2024/25	2023/24
	KShs	KShs
Fair value of service concession assets recognized under PPE	-	-
Accumulated depreciation to date	-	-
Net carrying amount	-	-
Service concession liability at beginning of the year	-	-
Service concession revenue recognized	-	-
Service concession liability at end of the year	-	-

**43. Cash Generated from Operations**

Description	2024/25	2023/24
	KShs	KShs
Surplus for the year before tax	1,581,997	-
<b>Adjusted for:</b>		
Depreciation	-	-
Non-cash grants received	-	-
Impairment	-	-
Gains and losses on disposal of assets	-	-
Contribution to provisions	-	-
Contribution to impairment allowance	-	-
<b>Working Capital adjustments</b>		
Increase in inventory	(663,087)	-
Increase in receivables	(2,007,179)	-
Increase in deferred income	-	-
Increase in payables	102,433	-
Increase in payments received in advance	-	-
<b>Net cash flow from/used in operating activities</b>	<b>(985,836)</b>	-

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

**44. 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. 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	560,654	560,654	-	-
Receivables from –non-exchange transactions	-	-	-	-
Bank balances	1,138,795	1,138,795	-	-
<b>Total</b>	<b>1,699,449</b>	<b>1,699,449</b>	-	-
At 30 June 2025 (current year)				
Receivables from exchange transactions	2,567,833	2,567,833	-	-
Receivables from –non-exchange transactions	-	-	-	-
Bank balances	152,959	152,959	-	-
<b>Total</b>	<b>2,720,792</b>	<b>2,720,792</b>	-	-

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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 no significant concentration of credit risk. The 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.

Description	Less than 1 month	Between 1-3 months	Over 5 months	Total
	Kshs	Kshs	Kshs	Kshs
<b>At 30 June 2024</b>				
Trade payables	-	-	1,536,930	1,536,930
Current portion of borrowings	-	-	-	-
Provisions	-	-	-	-
Deferred income	-	-	-	-
Employee benefit obligation	-	-	-	-
<b>Total</b>	-	-	<b>1,536,930</b>	<b>1,536,930</b>
<b>At 30 June 2025</b>				
Trade payables	-	-	1,639,363	1,639,363
Current portion of borrowings	-	-	-	-
Provisions	-	-	-	-
Deferred income	-	-	-	-
Employee benefit obligation	-	-	-	-
<b>Total</b>	-	-	<b>1,639,363</b>	<b>1,639,363</b>

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

**(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.

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

**a) Foreign currency risk**

The entity has no transactional currency exposures. Such exposure arises through purchases of goods and services that are done in currencies other than the local currency. Invoices denominated in foreign currencies are paid after 30 days from the date of the invoice and conversion at the time of payment is done using the prevailing exchange rate. The carrying amount of the entity's foreign currency denominated monetary assets and monetary liabilities at the end of the reporting period are as follows:

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

The entity manages foreign exchange risk from future commercial transactions and recognised assets and liabilities by projecting expected sales proceeds and matching the same with expected payments.

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

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

**Foreign currency sensitivity analysis**

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

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

**b) Interest rate risk**

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

**Management of interest rate risk**

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

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

**Sensitivity analysis**

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

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

**iv) Capital Risk Management**

The objective of the entity's capital risk management is to safeguard the Hospital's ability to continue as a going concern. The entity capital structure comprises of the following funds:

<b>Description</b>	<b>2024/25</b>	<b>2023/24</b>
	<b>Kshs</b>	<b>Kshs</b>
Revaluation reserve	-	-
Retained earnings	2,293,431	726,434
Capital reserve	-	-
<b>Total funds</b>	<b>2,293,431</b>	<b>726,434</b>
Total borrowings	-	-
Less: cash and bank balances	-	-
Net debt/ ( <i>excess cash and cash equivalents</i> )	-	-
<b>Gearing</b>	-	-

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

**45. 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.

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

Description	2024/25	2023/24
	Kshs	Kshs
<b>Transactions with related parties</b>		
<b>a) Services offered to related parties</b>		
Services	-	-
Sales of services	-	-
<b>Total</b>	-	-
<b>b) Grants from the Government</b>		
Grants from County Government	3,300,000	7,350,000
Grants from the National Government Entities	-	-
Donations in kind	-	-
<b>Total</b>	<b>3,300,000</b>	<b>7,350,000</b>
<b>c) Expenses incurred on behalf of related party</b>		
Payments of salaries and wages for employees	-	-
Payments for goods and services	-	-
<b>Total</b>	-	-
<b>d) Key management compensation</b>		

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Description	2024/25	2023/24
	Kshs	Kshs
Directors' emoluments	-	-
Compensation to the medical Sup	-	-
Compensation to key management	-	-
<b>Total</b>	<b>3,300,000</b>	<b>7,350,000</b>

**46. Segment Information**

Where an organisation operates in different geographical regions or in departments, IPSAS 18 on segmental reporting requires an entity to present segmental information of each geographic region or department to enable users understand the entity's performance and allocation of resources to different segments.

**47. Contingent Liabilities**

Contingent liabilities	2024/25	2023/24
	Kshs	Kshs
Court case against the hospital	-	-
Bank guarantees in favour of subsidiary	-	-
<b>Total</b>	<b>-</b>	<b>-</b>

**48. Capital Commitments**

Capital Commitments	2024/25	2023/24
	Kshs	Kshs
Authorised For	-	-
Authorised And Contracted For	-	-
<b>Total</b>	<b>-</b>	<b>-</b>

**49. Events after the Reporting Period**

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

**50. Ultimate and Holding Entity**

The entity is a County Corporation/ or a Semi- Autonomous Government Agency under the Department of Health. Its ultimate parent is the County Government of Machakos.

**51. Currency**

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

**20. Appendices**

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

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

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)
1.	Non disclosure of Property, Plant and Equipment The statement of financial position reflects Nil balance on property plant and equipment for the year under review and as disclosed in Note 31 to the financial statements. However, physical verification carried out in the hospital revealed that the hospital has assets including land, buildings, motor vehicles and furniture and equipment which have not been valued and disclosed in the financial statements.	The management endeavours to comply with Accrual mode of reporting for Level 4 Hospitals whereby the value of Property, Plant and Equipment (PPE) should be included in Note 31 and the statement for Financial Position. Currently, the entity (Kimiti Level 4 Hospital) maintains a list of all the assets including PPE and it's awaiting the entire County asset valuation exercise to be conducted.	Not Resolved	Process Ongoing

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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)
2.	Failure to Appoint a Hospital Committee During the year under review, the Hospital operated without a Hospital Committee to oversee administration, promote the development, approve plans, programs, and budget estimates of the Hospital. This was contrary Section 11(1) of the Machakos County Health Services Act No.7 of 2021 states that there is established a board in each hospital to be known as Hospital Management Board.	The management is in the process of appointing a Board of Management/Directors to comply with section 11 of the Machakos County Health Service Act 2021. However, this has not crippled operations of the facility because there are well established Health Management Committee (HMT) headed by the Medical Superintendent.	Not Resolved	Process Ongoing
3.	Non - Compliance with Requirements in Universal Health Care Review of the Hospital's records and inspection of the physical facilities revealed the following	Currently, the management has identified all the medical gaps within human resource and equipment. The management has managed to allocate funds during FY.2024/2025 for recruitment of medical practitioners in different cadres including medical officers, surgeons and health nurses.	Not Resolved	Process Ongoing

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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)
	deficiencies in staff, services and equipment.	Additionally, outdated and broken-down equipment and machines will be serviced or replaced in due course.		
4.	Lack of Risk Management Policy During the year under review, the Hospital did not have a risk management policy in place. This was contrary to Regulation 158(1) of the PFM (County Governments) Regulations, 2015 which states that the Accounting Officer shall ensure that the County Government entity develops risk management strategies.	The management is in the process of developing a Risk Management Policy for all health facilities.	Not Resolved	Process Ongoing

*May*  
.....  
Accounting Officer

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**Appendix II: Projects Implemented by The Entity**

**Projects**

Projects implemented by the Hospital Funded by development partners

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

**Status of Projects completion**

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

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

Name of Transferring entity: Machakos County Government

Name of Beneficiary entity: Kimiti Level 4 Hospital

Confirmation of amounts received by [Kimiti Level 4 Hospital] as at 30 <sup>th</sup> June 2025)					
Reference Number	Date Disbursed	Recurrent (A)	Development (B)	Total (C)=(A+B)	Remarks
FT24257G5TYG	16-Sep-24	1,000,000	-	1,000,000	Received
FT243335G4V5	28-Nov-24	1,000,000	-	1,000,000	Received
FT25077LDLVM	18-Mar-25	1,300,000	-	1,300,000	Received
<b>Total</b>		<b>3,300,000</b>	-	<b>3,300,000</b>	

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

Head of Accounts Department - Disbursing Entity:  
 Name BERNARD MUYI Sign [Signature] Date 15/10/25

Head of Accounts Department - Beneficiary Entity:  
 Name ERIC MULO Sign [Signature] Date 15/10/25

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**Appendix IV Reporting of Climate Relevant Expenditures**

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

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**Appendix V: Disaster Expenditure Reporting Template**

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

