## 4



## Regional clinics poorly equipped

## BY TRUDY MBALUKU

ven as county governments start to take shape, they will have to contend with the monumental task of providing their citizens with decent healthcare.

These devolved units may be disappointed but not surprised at the poor state of medical infrastructure, including the lack of basic requirements such as water, soap, working toilets in addition to qualified personnel.

On average, 50 per cent of the equipment in public medical facilities and research laboratories are obsolete and unserviceable, according to the 2012 Health Sector Working Group report.

The provision of medical facilities goes beyond erecting buildings; it includes meticulous planning to ensure such facilities have personnel, equipment and running water.

A case in point is the recently-constructed maternity wing at the Kariobangi North Health Centre using the Constituency Development Fund.

The new maternity wing has seven beds, two delivery rooms and a washing area. Two 2,500 litre tanks lie at the compound and will soon he hoisted to the roof of the building.

"These will store water supplied by the Nairobi Water Company," says Hilda Muthoni, the contractor.

However, a records officer at the health centre is skeptical about pledges to provide running water in an area of water scarcity.

In the patients' toilets all taps were dry when we visited the centre. To compound the problem, the taps and cisterns are rusted, an indication there may not have been water for a long time.

The officer cites this as a busy centre attending to more than 200 patients every day. Nevertheless, the clinic only has one clinician and pharmaceutical technician. A doctor comes in on Wednesdays but not always, sometimes staying



Charles Nyachae: The chairman Constitution Implementation Commission (CIC).

## **FACTFILE**

On average, 50 per cent of the equipment in public medical facilities and research laboratories are obsolete and unserviceable

away for more than two weeks.

"We handle so many patients ... I hope there are proper arrangements to equip the maternity block and hire additional staff, otherwise it will be just another building with no or minimal services."

said the officer.

The Kariobangi case is not unique; this is the situation that most facilities constructed through the Constituency Development Fund face.

It is not clear who should hire the staff and pay for running water, soap and disinfectants in the 100 or so CDF-funded health facilities.

The situation is the same at the Uthiru Dispensary in Kiambu. As a beneficiary of CDF money, an additional maternity ward was constructed but no allocation was made for its consumables.

"The new unit has attracted more people seeking free

services but medical supplies and staff have not been increased," says the medical officer in charge.

This confusion could continue if county governments respond to the health crisis by putting up more ill-equipped facilities.

"Promising free healthcare to all are just but "rosy" words when basic items like soap and water to control infections are lacking," says Dr Patrick Akuku one of the eight neurosurgeons in the county.

Dr Akuku says having physical buildings and offering free health services does not translate in service delivery.