



## Devolution and Health Sector

**Rose B. Osoro**  
**Commissioner**

## **Commission on Revenue Allocation**

**Devolution and Health  
Consultative Meeting  
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Nairobi, Kenya**

# Highlight of Issues across key health system areas

## Human Resources

- Secondment
- Optimal use of scarce expertise

## Pharmaceuticals

What will be the working relationship between KEMSA and county governments?

## Information Systems

How does the national system interlink with the county information system?

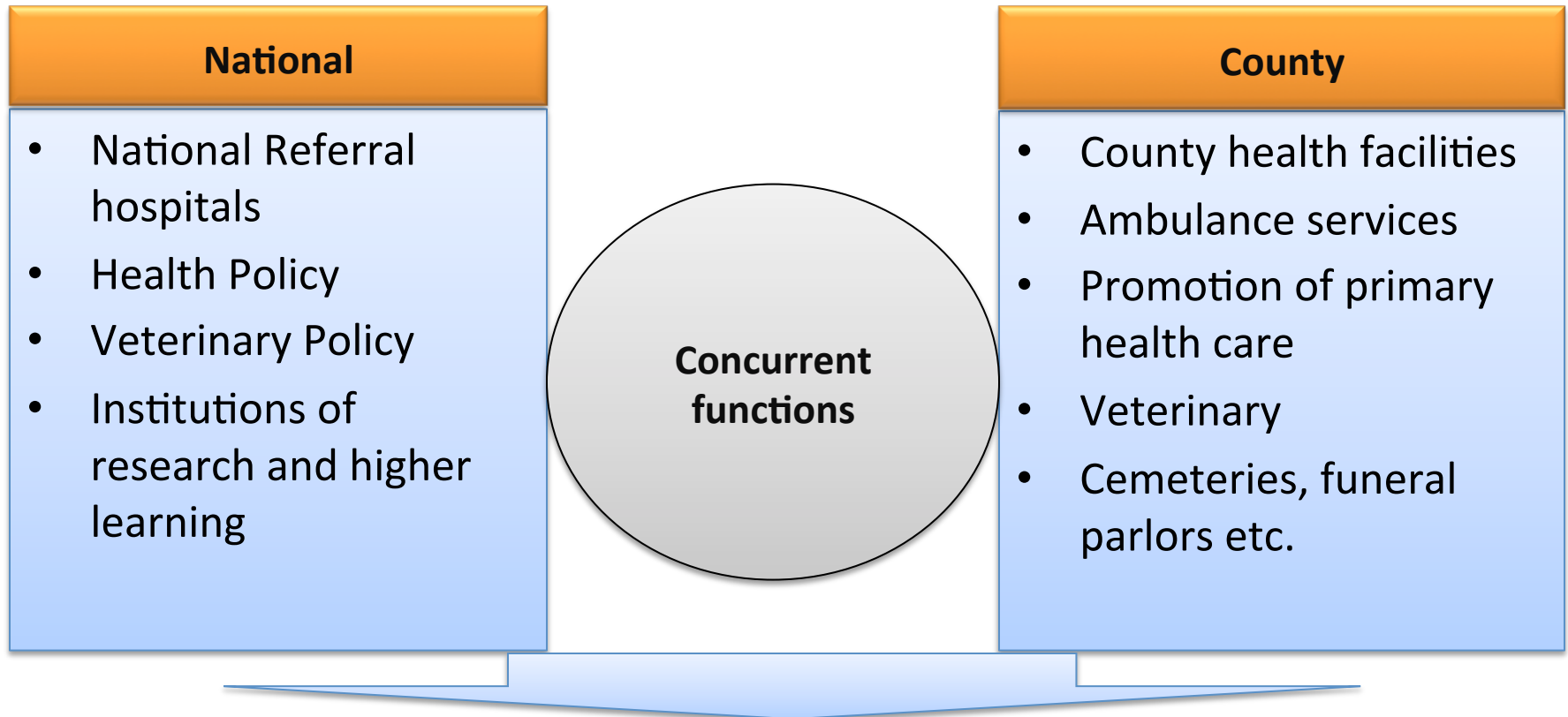
## National Lab

Is this a concurrent function?

## Other concerns

- Local authority health services left out in most health policy and budgetary decisions
- What is the mechanism of taking care of the extra cost of providing services to people outside the county?
- How do we capture the contribution of development partners in the health sector disaggregated by counties?
- What will happen to devolved funds? What happens to existing structures?

# Assignment of functions-Fourth Schedule



- Each of the above functions is a cost driver
- Service delivery functions assigned to counties are significant cost drivers

# Devolved Health and Cost Drivers

Note: Health service is a fundamental right of every Kenyan

## Possible areas for increased costs

- Case of emergency-who ultimately bears the cost?
- Health personnel cost is a significant cost driver

## Possible areas for cost savings

- Merger of the two ministries
- Institutional overhead costs

# Moving forward

- Need for a strong center (policy formulation, setting of norms and standards, regulation)
- Devolution is here to stay-need to embrace change
- Need for transition champions to guide the process to deal with the what, where, when, who, and how of devolution process
- Participation of the public
- CRA open for discussion, consultation

Thank You