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THE COMMUNITY HEALTH SERVICES BILL, 2020**A Bill for**

AN ACT of Parliament to provide a framework for the delivery of community health services; to promote access to primary health care services at the community level and reduce health disparities between counties; to provide for the training and capacity building of the community health workforce; and for connected purposes

ENACTED by the Parliament of Kenya, as follows—

PART 1—PRELIMINARY

1. This Act may be cited as the Community Health Services Act, 2020.

Short title.

2. In this Act—

Interpretation.

“Cabinet Secretary” means the Cabinet Secretary responsible for matters relating to health;

“community” means such number of villages as the county executive committee member in a county may demarcate as falling within a cluster for the effective delivery of community health services;

“committee” means the community health committee established pursuant to section 9(2)(b);

“county executive committee member” means the county executive committee member responsible for matters relating to health;

“community health unit” means the primary health structure serving a community and served by such community health officers and community health workers as the respective county executive committee member shall determine;

“community health workforce” means —

- (a) a certified medical practitioner carrying out functions related to healthcare delivery at the community level;
- (b) public officers within the county public service who are responsible for the delivery of community health services within a county; and

- (c) a community health worker elected by the community and involved in health-related work in the community the person lives in; and

“link facility” means the nearest health facility located within the area where the community health workforce offers services and acts as the community health unit referral centre.

3. The objects of this Act are to —

Objects.

- (a) provide a framework for the effective delivery of integrated, comprehensive and quality community health services at the county level of government;
- (b) enhance community access to basic health services;
- (c) provide a framework for the coordinated implementation of policies and standards formulated by the National government by the county government pursuant to this Act for the realisation of the right to health at the community level;
- (d) entrench the role of community health workers as extension workers in the provision of basic health care at the household level;
- (e) develop mechanisms and criteria for recognition, certification and accreditation of community health workforce;
- (f) provide a framework for the financing of community health services;
- (g) provide a framework for the conferment of community members with basic skills that will enable them render basic health services within their communities;
- (h) provide a mechanism for the identification of needs and gaps in the delivery of community health services and for the monitoring and evaluation of the impact of such services within the community; and
- (i) improve the quality of service delivery of community health services to address

determinants of health with a goal toward reducing socioeconomic health disparities.

4. A person shall, in the performance of their functions under this Act, be guided by the following principles in addition to the national values and principles set out under Article 10 and the objects of devolution specified under Article 174 of the Constitution—

Guiding principles.

- (a) inclusivity and equity in the provision of health services;
- (b) co-ordinated public participation in the formulation, implementation and monitoring of policies, strategies and plans aimed at ensuring the delivery of effective community health services;
- (c) empowerment and capacity building as a means of facilitating access to effective community health services;
- (d) transparency and accountability in the implementation of community health programmes and activities aimed at ensuring the realisation of the right to health;
- (e) access to information;
- (f) availability and access to timely delivery of services and timely and reliable information that facilitates the delivery and uptake of community health services; and
- (g) monitoring and evaluation of the policies, strategies and programmes established to enable the realisation of the right to health and the suitability of interventions put in place to address any gaps in the delivery of community health services.

PART II — COMMUNITY HEALTH SERVICES

5. The National government shall —

Role of National Government.

- (a) in collaboration with the county governments, formulate a policy on the delivery of community health services including, the —

- (i) technical resources and structures required for the delivery of community health services;
 - (ii) qualifications of persons eligible to serve within the community health workforce;
 - (iii) standards of service to be upheld by the community health workforce in the delivery of community health services;
 - (iv) reporting tools to be used by community health workforce; and
 - (v) mechanism for monitoring and evaluating the effectiveness with which community health services are delivered;
- (b) offer technical assistance to county governments in the establishment of structures required for the delivery of community health services within the county;
- (c) undertake research and innovation in community health services;
- (d) develop and review, in collaboration with the county governments, the curricula and training modules for the training of the community health workforce including, where appropriate, competency-based formal certification; and
- (e) collate, analyse and disseminate information necessary for the effective delivery of community health services.

6. (1) The County Government shall —

- (a) implement the national policy and standards on community health services;
- (b) mobilise resources necessary for the delivery of community health services in the respective county;
- (c) allocate adequate funds and resources necessary for the effective delivery of community health services within the respective county;
- (d) develop the necessary technological infrastructure required by the community health

Role of County Governments.

- workforce to effectively deliver community health services;
 - (e) put in place mechanisms to facilitate access to timely community health services by residents within the respective county;
 - (f) facilitate access to information regarding appropriate healthy behavior including basic information on sanitation, hygiene, and the prevention and treatment of communicable and non-communicable diseases; and
 - (g) co-ordinate the implementation of educational programmes for the community health workforce and avail resources required for the participation of the community health workforce in the programmes.
- (2) In ensuring that the county governments meet their obligations under subsection (1), the county executive committee member in each county shall—
- (a) advise the Governor on all matters relating to the delivery of community health services in the county;
 - (b) develop and implement county specific programs and strategies that promote access to community health services;
 - (c) collaborate with such entities as it may consider necessary—
 - (i) for the conduct of capacity building and training programmes with respect to the community health workforce;
 - (ii) in financing and resourcing the delivery of community health services in the county; and
 - (iii) in the establishment of structures for the supervision of the community health workforce;
 - (d) monitor and evaluate the effectiveness of community health programs delivered within the respective county;
 - (e) in every quarter, collate, analyse and disseminate information on delivery gaps and needs,

recommendations for improved delivery of community health services and other information relating to community health services delivered in the county;

- (f) oversee the implementation and adherence to national standards and guidelines on the delivery of quality community health services;
- (g) approve and integrate into the county budget the community health unit annual work plan and the budget;
- (h) make recommendations for the review of the standard reporting tools to the community health workforce;
- (i) put in place measures to ensure the safety of community health workforce while delivering community health services in the respective county;
- (j) provide the job aids required by community health workers in the delivery of community health services at the household level;
- (k) provide the necessary resources for capacity building of the community health workforce;
- (l) develop and carry out sensitisation programmes on community health services and the role of community health workforce in the county; and
- (m) perform such other function as may be necessary for the implementation of this Act.

(3) The county executive committee member may, for the effective performance of the functions under subsection (2), delegate the performance such functions as may be necessary to a public officer within the county public service or to a committee appointed in accordance with county legislation.

7. (1) There is established the office of the Director of Community Health Services, which shall be an office within the county public service.

Director of
Community Health
Services.

(2) The Director of Community Health Services shall be competitively recruited and appointed by the respective county public service board.

- (3) The Director of Community Health shall —
- (a) advise the respective the county executive committee member on —
 - (i) the integration of community health in the respective county integrated development plans and the annual development plan;
 - (ii) the number of community health units required in the respective county in order to effectively provide community health services at the community level;
 - (iii) the administrative and financial resources required to establish and maintain a community health unit and for its effective in order to remain effective;
 - (iv) resource mobilization, including the framework required for a community health fund to ensure the effective implementation of community health units work plans;
 - (v) the framework required for monitoring and evaluating the effectiveness of community health units;
 - (vi) programmes and strategies necessary to facilitate the delivery of community health services in the county; and
 - (vii) community health policies, guidelines, standards, curricular, manuals and job aids required to deliver community health services;
 - (b) put in place and oversee the implementation of quarterly programmes for—
 - (i) community health dialogue days; and
 - (ii) health action days with respect to community health units;
 - (c) circulate and facilitate access to information disseminated by community health units;
 - (d) establish linkages with development and implementing partners in order to improve the delivery of health services to the community;

- (e) maintain a database of the community health workforce in the county;
- (f) make arrangements for periodical evaluation of the policies and programmes in relation to the delivery of community health services in the county; and
- (g) perform such other functions as may be assigned by the county executive committee member.

8. (1) The county public service board shall competitively recruit and appoint such community health officers it may consider necessary for the proper and efficient implementation of this Act.

Community health officers.

- (2) A community health officer shall —
- (a) monitor and evaluate the implementation of decisions arising from community dialogue days and health action days;
 - (b) coordinate the implementation of community health activities by the community health workforce and the Committee;
 - (c) oversee the selection of community health workers by the Committee;
 - (d) provide technical support and training to community health workers and the Committee;
 - (e) compile and analyse data from the community health unit for incorporation into the health information system; and
 - (f) monitor the use and management of community health workers' kits.

9. (1) The county executive committee member shall, for the delivery of community health services at the grassroots level, —

Delivery of community health services.

- (a) coordinate the implementation of community health services at level 1 within the community;
- (b) ensure accountability and transparency in the use of resources by community health units;
- (c) develop strategies for the effective and efficient delivery of community health services at the grassroots level;

- (d) identify gaps existing within the community health workforce and make recommendations to the county executive committee member on the interventions necessary to address such gaps;
- (e) plan, coordinate and mobilize the community to participate in community dialogue and health action days;
- (f) work closely with link facilities to improve the access of the community health unit to health services;
- (g) facilitate the resolution of disputes that arise with respect to the delivery of community health services;
- (h) prepare quarterly reports on activities carried out by a community health unit; and
- (i) hold quarterly consultative meetings with the respective link facilities.

(2) The county executive community member may, for the effective performance of the functions under subsection (1), —

- (a) delegate the performance of any function specified under subsection (1) to such public officers within the respective Department as may be necessary; or
- (b) establish a community health committee.

10. (1) Where the county executive committee member establishes a community health committee under section 9 (2) (b), the committee shall consist of —

- (a) a community health worker nominated by community health workers within that community health unit;
- (b) the following persons elected by the community in a *baraza* convened by the county executive committee member in accordance with the respective county legislation —
 - (i) a woman representing women groups in that community;

Community health committee.

- (ii) a person with disability representing persons with disabilities in that community;
 - (iii) a representative of the youth in the community;
 - (c) one person representing the inter-religious organizations in the community nominated by an inter-religious organization with the largest membership;
 - (d) a ward public health officer;
 - (e) a community health officer who shall be an *ex officio* member of the committee and the secretary to the committee; and
 - (f) such other persons, not exceeding two, as may be prescribed in the respective county legislation.
- (2) A person is eligible for appointment as a member of the committee if that person is —
- (a) an adult of good standing with leadership qualities in the community;
 - (b) a member of the community;
 - (c) is literate and can read and write in at least one of the national languages or the local language;
 - (d) is not disqualified under any written law in Kenya from being appointed in to a public office; and
 - (e) meets such other requirements the county executive committee member may, in county legislation, prescribe.
- (3) The members of the committee shall elect the chairperson of the committee from amongst the persons appointed under subsection (2) (a) to (c).
- (4) The county executive committee member shall appoint the persons elected and nominated under (2) (a) to (c) by notice in the *Gazette*.
- (5) In appointing the committee under subsection (3), the county executive committee member shall ensure that not more than two thirds of the persons appointed represent one gender.

- (6) Each County Government may enact county specific legislation setting out —
- (a) the procedure for the nomination and election of members of the committee;
 - (b) the term of appointment of the members of a committee;
 - (c) such other criteria for nomination or election as the county executive committee member shall consider appropriate;
 - (d) the remuneration and terms and conditions for appointment of the members of the committee;
 - (e) grounds and procedure for the removal and replacement of a member of the committee;
 - (f) the procedure for the conduct of the business and affairs of the committee and for the convening of public forums by the committee;
 - (g) such other information as the county executive committee member may consider necessary for the effective functioning of the committee.

11. (1) A community health worker shall be nominated by the community in a public *baraza* and appointed by the county executive committee member.

Appointment of community health workers.

(2) A person shall be eligible for nomination and appointment as a community health worker under subsection (1) if such person —

- (a) is able to communicate in a language that can be understood by the community;
- (b) has undergone a prescribed course or training at an institution approved by the ministry responsible for health;
- (c) is a fit and proper person to be registered under this Act;
- (d) resides within the county; and
- (e) meets such other criteria as the county executive committee member may, in county legislation, prescribe.

(3) A community health worker shall be appointed on such terms and conditions and shall be paid such allowances as shall the county executive committee shall, in consultation with the respective County Public Service Board and the Salaries and Remuneration Commission, determine.

(4) Each county executive committee member shall prescribe, in county legislation, guidelines for the conduct of a public baraza under subsection (1).

12. (1) The county executive committee member shall assign to each community health worker such households in such localities in such manner as shall be prescribed in county legislation for the purpose of facilitating access to and ensuring the effective delivery of community health services at the grassroot level.

Functions of
community health
workers.

(2) A community health worker shall —

- (a) sensitize the community on the importance of quality health services and healthy lifestyles;
- (b) serve as a liaison between the community and the county health system;
- (c) provide community disease surveillance by reporting early signs of imminent health disasters or emergencies;
- (d) enroll and monitor the health status of members of the households assigned to the community health worker;
- (e) keep and maintain a register of members in all households assigned to the worker;
- (f) provide appropriate health advice to an assigned household in a language that the member of the household understands, including advice on—
 - (i) appropriate sanitation and hygiene techniques including household water treatment;
 - (ii) good nutrition;
 - (iii) maternal and postnatal care including advice on breastfeeding, family planning and immunisation;

- (iv) the prevention, transmission and management of communicable diseases; and
 - (v) the prevention and management of non-communicable diseases;
 - (g) render first aid services to an assigned household and where necessary, make referrals to the link facility;
 - (h) monitor the growth of children under the age of five years in an assigned household;
 - (i) detect common health ailments and minor injuries and recommend suitable interventions to the assigned household;
 - (j) provide lay counsellor services and support the assigned household on quality family-based care and support for a patient;
 - (k) submit report, at such intervals as shall be determined by the county executive committee member, on the health of each member of an assigned household and the barriers to health and health care in the household to the community health officer;
 - (l) collate and analyse information on the health status of the assigned households;
 - (m) manage community health resource centres;
 - (n) assist in coordinating monthly community health action days; and
 - (o) perform such function as may be assigned by the county executive committee member in county legislation or under any other law.
- (2) A community health worker shall, in the conduct of the functions specified under subsection (1)—
- (a) be ethical;
 - (b) inform the household of the use to which the information shall be put;
 - (c) ensure confidentiality;
 - (d) ensure accuracy of the information captured;

- (e) transmit the information within the timelines specified by county executive committee member; and
- (f) ensure access to personal data by persons to which that data relates.

13. (1) Each county executive committee member shall keep and maintain a register of all community health workers working in the county.

Register of community health workers.

(2) The county executive committee member may designate a public officer within the county public service as a registrar to keep and maintain the register under subsection (1).

(3) The register under subsection (1) shall include —

- (a) bio data information on community health workers including their—
 - (i) name and identification details; and
 - (ii) contact details;
- (b) information on the link facility to which the community health workers report;
- (c) the households assigned to each community health worker;
- (d) all community health workers who have been de-registered; and
- (e) such other information as the county executive committee member shall determine.

(4) There shall be kept and maintained, by the public officer responsible for overseeing the delivery of community health services in each ward, a register containing information specified under subsection (3) with respect to community health workers deployed to households in the respective ward.

(5) A community health worker shall notify the registrar under subsection (2) of any changes to their particulars within fourteen days of such change.

(6) The public officer shall, within seven days of receipt of the change in particulars under subsection (3)—

- (a) verify the information;
- (b) enter the change of particulars in the register; and
- (c) submit the information to the county executive committee member or the registrar, where designated, for the purpose of updating the register kept under subsection (1).

14. Any person may inspect the register or any document relating to any entry in the register and may, upon payment of such fee as may be prescribed by the county executive committee member, obtain a copy or extract from the register.

Inspection of the register.

15. (1) Each county executive committee member shall publish on a website maintained by the county government and publicize through such platforms as the county executive committee member shall consider appropriate information regarding the community health services available in the county and community health workforce delivering the health services within the county.

Information on community health services.

(2) The information published and publicized under subsection (1) shall include —

- (a) common health challenges in the county and the action required to prevent or mitigate the challenges;
- (b) the unique health issues affecting the communities in the county;
- (c) care, vaccines and other preventative measures available to protect the community from infectious diseases;
- (d) the proposed measures to handle or mitigate the emotional and financial burdens and other challenges that households face when dealing with communicable and non-communicable diseases; and
- (e) provide information about community resources available to support the households within the county.

(3) The information under subsection (2) shall be accessible to the residents of the county and shall be

published in a format that is easy to understand and in the languages spoken by residents of the county.

PART III – MISCELLANEOUS PROVISIONS

16. At the end of each financial year, the county executive committee member shall submit a report to the county assembly on the proposed implementation of community health programs in that year.

Reports.

17. Any person offering community health services shall adhere to such procedures, standards, code of ethics and guidelines as may be prescribed by regulations made under this Act or any other written law.

Procedures, standards, ethics and guidelines.

18. (1) The Cabinet Secretary may, in consultation with the Council of Governors, make regulations, prescribe standards and guidelines generally for the better carrying into effect of this Act.

Regulations.

(2) Without prejudice to the generality of subsection (1), the Cabinet Secretary may prescribe minimum standards relating to the following—

- (a) premises and facilities;
- (b) programmes of community health services;
- (c) training of community health workers;
- (d) certification and registration requirements;
- (e) health and safety;
- (f) communication and consultation; and
- (g) prescribe the records to be kept by counties offering community health services.

19. A county government may enact county specific legislation generally for the better carrying out of the provisions of this Act.

County legislation.

MEMORANDUM OF OBJECTS AND REASONS

The principal object of this Bill is to provide a framework for the regulation of community health services and the recognition of community health workers. The First Schedule of the Health Act, 2017 recognises Community Health Services at Level 1 as a function of the county governments. Community health services are instrumental in achieving preventive health care and ensuring access to health services in compliance with Article 43 of the Constitution.

Part II of the Bill sets out the role of the National Government and the role of county government in regard to the provision of community health services. It further establishes the office of the Deputy Director of Community Health Services and empowers the respective county executive committee members to establish, where necessary, a community health committee to ensure the effective delivery of community health services in the county. The Bill further seeks to ensure that the counties invest in community health services by requiring the counties to among other things, ensure the recruitment and retention of the community health workforce.

Part III of the Bill obligates the county executive committee member to maintain a register of community health workers.

Part IV of the Bill obligates the county executive committee member to table before the county assembly for debate the report on community health services delivered in the county. This seeks to ensure that the county assembly is informed in order to consider legislative interventions to strengthen community health services. In addition, the Cabinet Secretary, in consultation with county governors, is obligated to develop regulations on community health services.

Statement on the delegation of legislative powers and limitation of fundamental rights and freedoms

The Bill does not limit any fundamental rights and freedoms.

Statement that the Bill concerns county governments

The Bill concerns provision of community health services by the county governments. Health services are devolved under Paragraph 2 of Part 2 of the Fourth Schedule of the Constitution and community health services is classified as a level 1 in healthcare delivery under the Health Act, No. 21 of 2017.

Therefore, the Bill concerns county governments in terms of Article 110 (1) (a) of the Constitution.

Statement that the Bill is a money Bill within the meaning of Article 114 of the Constitution

The Bill is not a money Bill within the meaning of Article 114 of the Constitution.

Dated the 10th March, 2020.

AGNES P. ZANI,
Senator.