

# Kenya National Union of Nurses and Midwives



For Unity, Protection & Empowerment

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Registered Trade Union (Reg. No. TUV/169)

REF: NBI/KNUNM/KCG/783/26

Hon. Adan Duale, EGH,  
Cabinet Secretary,  
Ministry of Health,  
Afya House, Cathedral Road,  
P.O. Box 30016 00100  
Nairobi.

Dr. Lister Onsongo,  
CEO & Registrar,  
Nursing Council of Kenya,  
NCK Plaza, Kabarnet Lane, Off Ngong RD  
P.O. Box 20056-00200,  
Nairobi.

H.E Hon Paul Simba Arati,  
The Governor,  
Kisii County Government,  
P.O. Box 4550 - 40200,  
Kisii.

Dear Sirs/Madams,

**RE: THE MATERNAL DEATH INCIDENT AT KENYENYA SUB-COUNTY HOSPITAL, KISII COUNTY.**

The above subject matter refers. The letter Ref. No. NBI/KNUNM/KCG/82/26 dated 4<sup>th</sup> March 2026, is hereby withdrawn.

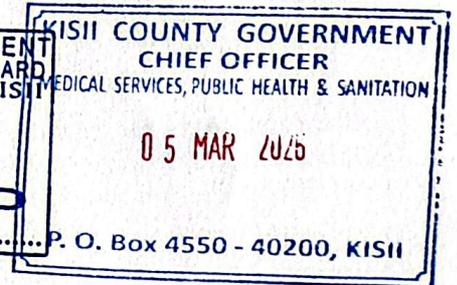
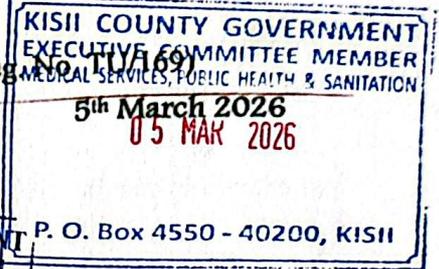
First and foremost, we extend our deepest condolences to the family of the deceased. The loss of life during childbirth is deeply painful and affects not only the family but also the healthcare providers who strive daily to save lives under extremely difficult conditions.

Based on the report of an investigation carried by the Union through the Kisii Branch, it is clear that the incident occurred in the context of severe systemic challenges beyond the control of the nurse on duty and therefore constitutional rights and labour protections cannot be suspended in moments of public emotion. This matter must be addressed within the framework of law and not convenience

**Key findings from the report on the incident.**

1. Only one nurse was assigned to the maternity ward during both day and night shifts.
2. No medical officer reviewed the patient during labour.
3. Although the hospital has a functional theatre, it was not utilized.
4. The facility has no stationed ambulance for emergency referral.

All correspondence should be addressed to the General Secretary



5. There is severe staff shortage, with the hospital operating under a single duty roster, leading to staff burnout.
6. The facility faces inadequate non-pharmaceutical supplies.
7. There is a lack of running tap water within the facility.
8. There was no medical officer in a hospital graded as L3A.

**Constitutional rights.**

**Article 41 – Right to Fair Labour Practices.**

Under Article 41 of the Constitution, every worker has the right to fair labour practices and reasonable working conditions.

Assigning a single nurse to operate an entire maternity ward both day and night without the support of a medical officer, adequate supplies, emergency transport, or basic infrastructure such as running water, constitutes unreasonable and unsafe working conditions.

To subsequently single out that nurse for blame amounts to victimization, unfair labour practice and a violation of constitutional rights. The Constitution does not permit employers to create unsafe systems and then punish employees for predictable outcomes of those unsafe systems. Our findings clearly demonstrate that the tragedy was not a result of negligence by the nurse on duty but the responsibility lies at the level of governance, budgeting, staffing policy, and facility management.

**Article 43 – Right to the Highest Attainable Standard of Health.**

Article 43 guarantees every person the right to the highest attainable standard of health, including reproductive healthcare. This constitutional obligation rests on the county government and its agents, not on one overworked nurse operating without a medical officer’s review, functional referral systems, adequate staffing and basic utilities.

**Professional Conduct of the Nurse.**

The maternity ward comprises of four units namely; Admission, Antenatal, Labour/delivery room and postnatal. The Units are staffed as follows; -

AREA	BED/COUCH CAPACITY	WHO RATIO	CURRENT NO OF NURSES	REQUIRED NO. OF NURSES	GAP
Admission	2	1:1	} 1	2	2
Antenatal	4	1:5		1	1
Labour/Delivery room	2	1:1		2	1
Post Natal	5	c/s 1:4 svd 1:7		2	2
<b>TOTAL</b>	<b>13</b>		<b>1</b>	<b>7</b>	<b>6</b>

Note, if they are running 2 shifts, a minimum of 14 nurses are required, for 3 shifts a minimum of 21 nurses are needed.

Flowing from the table above and according to the WHO ratio guidelines, there are supposed to be seven (7) nurses on every shift interchangeably. On this fateful day, only one nurse was on duty and covering all the four units single handedly.

The report indicates that upon deterioration of the patient's vital signs and discovery of heavy bleeding, immediate medical attention was provided, and resuscitative efforts were undertaken. Unfortunately, despite these efforts, the patient succumbed. It is important to note that:

- A single nurse cannot safely and effectively manage complex obstetric emergencies alone.
- The absence of a medical officer's review significantly limited the available medical interventions.
- Failure to utilize the theatre and the absence of emergency transport are administrative and institutional failures, not failures of nursing care.

#### **Our Demands.**

1. Immediate independent investigation focusing on institutional accountability.
2. Protection of the nurse from victimization.
3. Urgent recruitment and deployment of adequate maternity staff.
4. Mandatory medical officer coverage for labour wards.
5. Operational emergency transport systems.
6. Provision of essential supplies and restoration of basic utilities.
7. Review of the scope of practice for nurses.
8. Re-evaluation of the categorization of health facilities as Kenya Medical Practitioners and Dentists Council continues to recategorize health facilities without involvement of stakeholders and is posing serious service delivery challenges.

The Constitution protects both patients and healthcare workers. You cannot deny mothers safe systems of care and then criminalize the nurse left alone in that broken system. Accountability must be vertical not on convenience.

#### **Conclusion.**

Nurses remain committed to saving lives and upholding professional standards, even in the face of extreme adversity. However, accountability must begin at the level of policy, resource allocation, and facility management. We stand firmly with the nurse on duty and we shall pursue every constitutional and statutory remedy available to ensure justice prevails.

Thank you.

Yours faithfully,



**SETH PANYAKO,**  
**GENERAL SECRETARY.**