V1: Vote Overview

(i) Snapshot of Medium Term Budget Allocations

Table V1.1: Overview of Vote Expenditures

Billion Uganda Shil	llings	FY2016/17	FY20	FY2017/18		M	MTEF Budget Projections			
		Outturn	Approved Budget	Spent by End Sep	Proposed Budget	2019/20	2020/21	2021/22	2022/23	
Recurrent V	Wage	2.874	3.095	0.594	3.095	3.095	3.095	3.095	3.095	
Non V	Wage	3.242	2.034	0.399	1.684	2.034	2.034	2.034	2.034	
Devt.	GoU	1.051	1.060	0.053	1.060	1.060	1.060	1.060	1.060	
Ext.	. Fin.	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	
GoU 7	Γotal	7.167	6.188	1.046	5.839	6.188	6.188	6.188	6.188	
Total GoU+Ext (MT	Fin (FEF)	7.167	6.188	1.046	5.839	6.188	6.188	6.188	6.188	
A.I.A	Total	0.075	0.100	0.000	0.152	0.172	0.172	0.172	0.192	
Grand T	Γotal	7.243	6.288	1.046	5.991	6.360	6.360	6.360	6.380	

(ii) Vote Strategic Objective

- a. Scale up critical interventions
- b. Improve levels, and equity in access and demand
- c. Accelerate quality and safety improvements
- d. Improve efficiency and effectiveness of Services

V2: Past Vote Performance and Medium Term Plans

Performance for Previous Year FY 2016/17

General OPD attendance were 44,277/55,000; special clinic attendances 142,225/140,000; Inpatient admissions were 23,286/18,000; bed occupancy 99.5%/85%; ALOS of 4.5/4 days. Total lab investigations 104,834/100,000; imagings 8,685/9,000; 115/80 postmortems . 15,954/20,000 ANC attendances; 4,565/3,000 Family planning contacts; 48,664/32,250 mothers and children immunized; 6,529 deliveries. 85% Medical equipment was maintained in the region; 4 user training's done. Assorted medical equipment and parts procured. Renovations done on pediatric, surgical wards, theatre and part of administration block.

Performance as of BFP FY 2017/18 (Performance as of BFP)

- 1. The following outputs were realized in quarter one under program one of hospital services; Inpatient services: 6,414 admitted, Bed Occupancy rate of 99.5, Average Length of stay of 4 days, 1,012 Major Surgical procedures conducted and 1,881 deliveries. Outpatient services: 9,348 general OPD attendance and 33,992 Specialized OPD clinic attendance. Diagnostics: 38,985 Laboratory tests done, 2,497 imagings (Ultra sound scans (1,865) & X-rays (632)) done and 26 postmortems done. Preventive services: 4,198 mothers attended Antenatal care, 1,446 Family planning contacts were made, 11,596 were children immunized, 1,021 women were immunized and percentage of HIV + women not on art was 0%. Medicines and Supplies: Medicines and supplies worth UGX 186,084,396 supplied by NMS, cumulatively 18.3% of the Annual budget of UGX1,015,663,764 was supplied.
- 2. On Capital development: Procurement of Contractor for consultancy service for the construction of the staff house done, contract signed and consultancy service in progress. Request for permission from Public Service to procure a 4-wheel station wagon done. Inventory taking was done for medical equipment and Equipment to be procured identified, and the contractor to supply equipment identified, order put and equipment delivered to the hospital stores.

FY 2018/19 Planned Outputs

General OPD attendance of 40,000; Special clinic attendances 140,000; 25,000 Inpatient admissions; Bed occupancy rate 85%; Average Length of Stay of 4 days. Total lab investigations of 160,000; 9,000 Imagings to be conducted; 80 postmortems to be done. 18,000 ANC attendances; 5,500 Family planning contacts; 50,000 children immunized, 4,000 mothers immunised; deliveries. 85% Medical equipment was maintained in the region; 4 user training's done. Assorted medical equipment and parts procured. The hospital has planned for 152,000,000 to be raised from the private wing.

Medium Term Plans

In the midterm, the hospital plans are: Provision of general hospital services including cancer treatment; Construction of staff accommodation phase III; Continue maintenance of medical equipment in the region; Procurement of a staff van; Fencing entire hospital land; Construction of a casualty department; Purchase of office Furniture and equipment; Construct an Administration block; Installation of intercom; renovation of hospital structures.

Efficiency of Vote Budget Allocations

The hospital will observe the following to ensure there is efficiency while providing health care services in 2018/19 Financial year.

- Increased supervision internally and in the region.
- Monitoring within the hospital.
- Supervision of works.
- Improvement of resource accountability.
- Enhancement of quality of care provided by staff.
- Improvement of the working environment and occupational safety.
- Adherence to procurement regulations.

Vote Investment Plans

A 7-storeyed staff housing unit started in 2017/18, allocation of UGX 800,000,000 made for 2018/19, and construction to be done in phases up to 2020/21. Funding solicited from partners (JICA) for construction of Casualty unit and the hospital has been requested by the partner to provide UGX 137,000,000 as its contribution. Works scheduled to start in August 2018. 80,000,000 has been allocated to procurement of specialized medical equipment, while 18,000,000 was allocated to procuring Office equipment and furniture and 25,000,000 apportioned to replacing solar batteries and equipment.

Major Expenditure Allocations in the Vote for FY 2018/19

Procurement of Specialised Medical Equipment 80,000,000. Staff House Construction worth 800,000,000, Contribution Towards Casualty unit 137,000,000, Replacement of Solar Batteries 25,000,000, Office Furniture and Equipment 18,000,000.

V3: PROGRAMME OUTCOMES, OUTCOME INDICATORS AND PROPOSED BUDGET ALLOCATION

Table V3.1: Programme Outcome and Outcome Indicators

Vote Controller :

Programme: 56 Regional Referral Hospital Services

Programme Objective:

To improve the health of the catchment population through provision of specialized curative, preventive,

promotive and rehabilitative health services.

Responsible Officer: DR. ADAKU ALEX

Programme Outcome: Inclusive and quality healthcare services

Sector Outcomes contributed to by the Programme Outcome

1. Improved quality of life at all levels

	Performance Targets								
Programme Performance Indicators (Output)	2016/17 Actual	2017/18 Target	Base year	Baseline	2018/19 Target	2019/20 Target	2020/21 Target		
• % increase of specialised clinic outpatients attendances	0	11%			13%	15%	18%		
• % increase of diagnostic investigations carried	0				6%	8%	10%		
Bed occupancy rate	0				85%	85%	85%		

Table V3.2: Past Expenditure Outturns and Medium Term Projections by Programme

Billion Uganda shillings	2016/17	2017/18		2018-19	MTEF Budget Projections			ns
	Outturn	Approved Budget	Spent By End Q1	Proposed Budget	2019-20	2020-21	2021-22	2022-23
Vote :163 Arua Referral Hospital								
56 Regional Referral Hospital Services	7.109	6.188	1.022	5.839	6.188	6.188	6.188	6.188
Total for the Vote	7.109	6.188	1.022	5.839	6.188	6.188	6.188	6.188

V4: SUBPROGRAMME PAST EXPENDITURE OUTTURNS AND PROPOSED BUDGET ALLOCATIONS

Table V4.1: Past Expenditure Outturns and Medium Term Projections by SubProgramme

Billion Uganda shillings	2016/17	6/17 FY 2017/18		2018-19	Medium Term Projections			ons
	Outturn	Approved Budget	Spent By End Sep	Proposed Budget	2019-20	2020-21	2021-22	2022-23
Programme: 56 Regional Referral Hospital Services								
01 Arua Referral Hospital Services	5.835	4.880	0.922	4.531	4.880	4.880	4.880	4.880
02 Arua Referral Hospital Internal Audit	0.016	0.016	0.004	0.016	0.016	0.016	0.016	0.016
03 Arua Regional Maintenance	0.218	0.232	0.043	0.232	0.232	0.232	0.232	0.232

1004 Arua Rehabilitation Referral Hospital	1.051	0.667	0.053	0.937	0.800	0.800	0.800	0.667
1469 Institutional Support to Arua Regional Referral Hospital	0.000	0.393	0.000	0.123	0.260	0.260	0.260	0.393
Total For the Programme : 56	7.120	6.188	1.022	5.839	6.188	6.188	6.188	6.188
Total for the Vote :163	7.120	6.188	1.022	5.839	6.188	6.188	6.188	6.188

Table V4.2: Key Changes in Vote Resource Allocation

Major changes in resource allocation over and al previous financial year	bove the Justification for proposed Changes in Expenditure and Outputs
Vote :163 Arua Referral Hospital	
Programme : 56 Arua Referral Hospital	
Output: 03 Medicines and health supplies procu	red and dispensed
Change in Allocation (UShs Bn): (0.015)	The reduction in allocation to Medicines and health supplies is due to allocations made to cater for pensions and gratuity as a result of increase in the number of pensioners that has made it necessary to make cuts in other areas.
Output: 04 Diagnostic services	
Change in Allocation (UShs Bn): (0.013)	The reduction in allocation to Diagnostic services is due to allocations made to cater for pensions and gratuity as a result of increase in the number of pensioners that has made it necessary to make cuts in other areas.
Output: 06 Prevention and rehabilitation service	res
Change in Allocation (UShs Bn): (0.008)	The reduction in allocation to preventive and rehabilitation services is due to allocations made to cater for pensions and gratuity as a result of increase in the number of pensioners that has made it necessary to make cuts in other areas.
Output: 07 Immunisation services	
Change in Allocation (UShs Bn): (0.012)	The reduction in allocation to Immunization services is due to allocations made to cater for pensions and gratuity as a result of increase in the number of pensioners that has made it necessary to make cuts in other areas.
Output: 77 Purchase of Specialised Machinery &	& Equipment
Change in Allocation (UShs Bn): 0.080	This allocation was done to replace equipment that have breaken down or are outdated.
Output: 80 Hospital Construction/rehabilitation	
Change in Allocation (UShs Bn): (0.067)	The main capital investment priorities for 2018/19 FY is continuation of works on the construction of a 7-storeyed staff house.
Output: 81 Staff houses construction and rehabi	ilitation
Change in Allocation (UShs Bn): 0.200	The allocation made in 2017/18 was to kick the project which is estimated to cost about 8bn and the allocation in 2018/19 is to continue the project in a phased manner.
Output: 83 OPD and other ward construction at	nd rehabilitation
Change in Allocation (UShs Bn): 0.137	This allocation was made to cater for votes part contribution towards JICA project for construction of a Casualty unit.
Output: 85 Purchase of Medical Equipment	

Change in Allocation (UShs Bn):	(0.350)	This allocation was made to procure office equipment to
		replace those that are out of use.

Table V4.3: Major Capital Investment (Capital Purchases outputs over 0.5Billion)

FY	FY 2018/19				
Appr. Budget and Planned Outputs		xpenditures and Achievements y end Sep	Proposed Budget and Planned Outputs		
Vote 163 Arua Referral Hospital	·				
Programme : 56 Regional Referral Hospita	l Services				
Project : 1004 Arua Rehabilitation Referra	l Hospital				
Output: 81 Staff houses construction an	d rehabilitat	tion			
12-unit storeyed staff house constructed.		cocurement of Contractor for consultancy service for the construction of the staff house cone. Contract signed and consultancy service in progress.	A 7-Storeyed Staff Housing Unit Constructed		
Total Output Cost(Ushs 0.600 Thousand):		0.053	0.800		
Gou Dev't:	0.600	0.053	0.800		
Ext Fin:	0.000		0.000		
A.I.A:	0.000	0.000	0.000		

V5: VOTE CHALLENGES FOR 2018/19 AND ADDITIONAL FUNDING REQUESTS

Vote Challenges for FY 2018/19

Limited staff accommodation; inadequate budget inclusive of medicines and supplies; Limited equipment to match hospital mandate; high community expectations; Difficulty in projecting hospital service catchment population due to refugee influx from Sudan and Congo boarder. Staff retired in the last three years leaving the few with heavy work load. Manual data collection; Heavy work load due to HEP B testing, vaccination and treatment since the hospital is the main focal facility in the region. Unstable power supply from the provider (WENRECO) affects the smooth running of activities in the hospital; this may make the budget for fuel insufficient at the end of the year. The accounts section is manned by only one staff (Accounts Assistant). This makes him overwhelmed with work, which has led to delayed execution of payments, delayed preparation of final accounts and other accounts functions. The management team is totally new to IFMS and had to get some acquaintance with system.

Table V5.1: Additional Funding Requests

Additional requirements for funding and outputs in 2018/19	Justification of requirement for additional outputs and funding
Vote: 163 Arua Referral Hospital	
Programme: 56 Regional Referral Hospital Services	
OutPut: 77 Purchase of Specialised Machinery & Equipment	

Funding requirement UShs Bn : 0.500	Most of the increasing complicated cases the hospital receives are not fully managed and have to be referred out to Mulago and other facilities which is very expensive both to the hospital and patients themselves. Procurement of Specialized equipment will therefore enhance the hospitals capacity to provide specialized services, improved quality of care to patients, reduce on mortality from manageable conditions and reduce on the costly referrals.
OutPut: 80 Hospital Construction/rehabilitation	
Funding requirement UShs Bn : 1.400	Conducive and spacious office is critical for duty performance and motivation, this leads to improved quality service delivery, hence need for additional funding.
OutPut: 81 Staff houses construction and rehabilitation	
Funding requirement UShs Bn: 15.000	Accommodation is critical for duty attendance, motivation and response to emergencies. Staff house construction leads to improved and quality service delivery, hence need for additional funding in a phased manner.
OutPut: 85 Purchase of Medical Equipment	
Funding requirement UShs Bn : 0.500	The hospital has no staff van, inadequate furniture and office equipment. This if availed improves on staff motivation, good and healthy working environment and quality service delivery.