

# Vote:173 Mbarara Referral Hospital

## V1: Vote Overview

### I. Vote Mission Statement

To provide inclusive, accessible equitable and participatory comprehensive specialized Health services, Conduct Tertiary Health Training, Research and Contribute to the health Sector Strategic objectives.

### II. Strategic Objective

1. To offer comprehensive inclusive, accessible and participatory specialised curative, promotive, preventive and rehabilitative health care services.
2. To provide outreach specialist and technical support supervision services for prevention and control of Non-Communicable and Communicable Diseases with focus on high burden diseases like diabetes, Hypertension and HIV/AIDS, TB and Malaria.
3. To build capacity, offer tertiary training and continuing Professional Development to health workers for improved service delivery and HCIV functionality.
4. To strengthen operational health, technical and professional research.
5. To strengthen the referral systems for efficient and effective for improvement of quality, safety and scope of health care services.
6. To improve managerial efficiency and partnerships in resource mobilization, allocation, utilization and accountability.

### III. Major Achievements in 2019/20

The following outputs were achieved midyear by Mbarara Regional Referral Hospital (July - December 2019)  
In patient services:

1. 17,901 admissions achieved against Mid year target of 30,000
2. 4.2 Days average length of stay against Mid year target of 4 Days.
3. 85.5 % Bed occupancy rate against Mid year target of 85%
4. 4,669 Total surgical operations done of which 3,555 were major & 3,127 were minor against mid year target of 4,500.

Out patients Services:

1. 13,304 General outpatients against target of 20,000 Midyear Target;
2. 43,524 Special clinics attendance against Midyear target of 64,000.
3. A total of 4,842 deliveries done against 6,000 target mid-year.  
(2,733 Normal deliveries & 2,071 Caesarean sections)

General out patient's including special clinics attendances were below the target due to renovation works in OPD and also the Christmas festive season.

Diagnostics:

- 1) 90,812 Lab examination tests were done out of 46,500 Mid year target
- 2) 2,495 X-rays examinations were achieved out of 2750;
- 3) 3,679 Ultra sound imaging examinations done out of 4,000
- 4) 186 ECG (Electrocardiogram) tests done against 138
- 5) 143 ECHO (Echocardiography) done out of 140
- 6) 579 CT Scan Investigations out of 800
- 7) 101 Endoscopy tests out of 140
- 8) 91 Dialysis sessions carried out of 50.
- 9) 3,158 Blood transfusions done out of 3,000.

Prevention Services:

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8,762 antenatal attendances received out of 1,500; 1940 EMTCT(Elimination of mother to Child Transmission of HIV) achieved out of 200 planned; Postnatal attendances 1,835; 4,553 HCT(HIV Counselling and Testing) achieved; 1,752 Family Planning contacts registered out of 1,200 planned mid year.

### Immunization Services:

14,242 Immunizations out of 7,750. Due to the removal of the voucher system many mothers attend free ANC services in the hospital,

Over 50% deliver in the hospital and encouraged to have their babies immunized hence high performance against target.

### Management Services:

1) One Hospital Management Board meeting was held as per plan. 2 Hospital Board Sub Committee meetings held. 2 contracts committee meetings held; 3 Medicines and Therapeutic Committee; 8 Senior management and 24 departmental meetings.

2) Utility payments (Yaka for power) and water were cleared; 4,914 Meals provided to 670 malnourished children, destitute patients (Covering children in Oncology; Nutrition; Psychiatric; TB wards & abandoned patients in the wards. Buried (85 adults and 255 Children unclaimed bodies. (FSB MSB and aborted babies).

3) Hospital well cleaned supervised by the administrators and Infection Control and Prevention committee; Old items ( vehicles and obsolete medical equipment) were disposed off. .

4) Final accounts were prepared & audited; Domestic arrears submitted for verification by Earnest and Young as advised by Finance; Value for money audit exit meeting held with the Internal Audit team and a report produced.

5) Quarter one performance report compiled and submitted to Ministry of Finance. and Ministry of Health.

### Human Resource:

1) All staff paid Salaries for the two quarters amounting to Ugx 1,194,355,003 However, a balance of Ugx 93,191,977 remained due to some unfilled positions.

2) Monthly data capture was done including entry of newly transferred; staff. Recruitment for FY 2019/20 being followed up and staff formally under PEPFAR were regularized

3) Domestic arrears for pensioners were submitted to Earnest and Young for Audit and onward transmission to Ministry of Finance for payment.

4) Hospital restructuring with support from Ministries of Public service, and partners (Intra-Health) with a draft sent to Ministry of Health.

### Records Services:

1) 26 Weekly surveillance reports produced and submitted through MTRAC; 6 HMIS monthly reports produced and submitted to DHIS2, 2 Quarterly Health Management Information System( HMIS) reports produced and submitted to DHIS2,

2) 2 In-house trainings conducted specifically on data capture and reporting, On job mentorships by the records team, 6 Data cleaning activities conducted, 2 Quarterly data review meetings done; Data capture tools received from partners and distributed to wards,

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### Internal Audit:

1) Annual and quarterly work plans produced.; Exit meeting with the Auditor General was done and responses made;

2) Hospital Stores were inspected; management guided on internal controls; Deliveries of purchased witnessed and verified.

3) The FY 2018/19 internal audit report was produced, circulated and corrective actions taken.

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4) Auditor General's reports and responses submitted to PAC Management was advised on risk mitigation and performance improvement.

Capital development: (Hospital Construction and Rehabilitation).

1. Residential Buildings (Staff House construction):

The process of starting the Multi Year 56 Unit storeyed staff house construction (One Bed room, sitting room and kitchen self-contained) has been initiated. A consultant procured to develop structural drawings, BoQs and bidding process started. Clearances from the various authorities (NEMA, Mbarara Municipal Council, Ministry of Works and other relevant agencies done; Documentations already done, contracts committee reviewed, Documents submitted to the Solicitor General for legal advice and works planned to commence in 4th quarter.

2. Non Residential (Perimeter wall construction)

Perimeter wall construction ongoing; works estimated at 80%, works on gates started. Fittings being made for solar power and CCTV camera; Site meeting are ongoing and monthly updates given. Down payments made, Certificate amounting to Ugx 520 Million received and payment of Ugx 266 Million made. Works expected to be finished by 4th Quarter.

3. Laboratory Construction by East African Public Health Lab (EAPHLAB/World Bank.)

Construction works for the Laboratory are estimated at 80%; and ongoing works include window & ceiling finishings; fitting door & window frames; Electrical and plumbing works near completion; Site meetings and progress updates given monthly. Works delayed due to variations made & completion expected by June, 2020.

4) OPD Renovation works.

Renovation works at the Out patient's department completed with the walls and the roof newly painted and broken parts replaced; Works being finalised in the toilets and walk ways. Burglar proofing done and electrical fittings replaced and Payments made for certificate issued by the contractor.

5) Medical Ward:

Works completed on the Male side involving (painting, terrazzo floor works); Works still on going in the female side involving terrazzo floor, painting & plumbing. Monthly progress updates being made to management; Works expected for completion and ward occupied by March 2020

Institutional support (Retooling):

1. Purchase of Motor Vehicles and Other Transport; Ambulance procured, delivered and already in use with all payments made to Toyota.

2. Purchase of Medical Equipment: This involves assorted medical equipment and major maintenance obligations; for emergency and Specialised clinics; Equipment including 4 ventilators for ICU, 10 Beds for ICU and a central ICU monitor already delivered. Installed and in use in the ICU unit were procured. 2 washing machines and a Drier for hospital ward and theatre linen delivered and installed as per specifications and already in use.

3) ENT equipment as per specifications also delivered installed and already in use. and Specifications and clearances are further being made by the contracts committee for more specified procurements of medical equipment as an ongoing process.

Medical Equipment workshop

1) Conducted Equipment Inventory within the hospital and in the lower health Units. A computer received from JICA to support NOMAD. All inventory uploaded and updates on going.

2) Planned to refurbish the workshop & Staff identified for recruitment submitted to Health Service commission; Required tools identified, Electrical and Plumbing materials procured, installations done; Attended the Regional Medical Equipment Quarterly review meeting in Mbale and Soroti.

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3) Carried out routine repairs and equipment maintenance in the hospital; ICU equipment installed and theatre in emergency functionalised; User training activities on going with 4 CMEs done on Pulse Oxy-Meter and Table Autoclave use and maintenance & biomedical students and interns supported

### **IV. Medium Term Plans**

1. Improve hospital security, staff accommodation, rehabilitate existing infrastructure, reduce on costs of utilities by use rain water harvesting and solar power.
2. Reduce staff gaps by timely identification declaration and recruitment of staff within the allocated wage bill.
3. Strengthen and improve on data management, utilization and dissemination through digitalization
4. Continue lobbying and fast tracking Phase Two hospital construction of the hospital to meet the client service demands especially and move to meet national demands of Mbarara Capital City with the entity serving as a Regional Centre of Excellence
5. Continue developing and improving Specialized health care services, emergency and accident care, training and health research for improved livelihoods and labour productivity in the region.

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## V. Summary of Past Performance and Medium Term Budget Allocations

Table 5.1: Overview of Vote Expenditures (US\$ Billion)

	2018/19 Outturn	2019/20		2020/21	MTEF Budget Projections			
		Approved Budget	Expenditure by End Dec		2021/22	2022/23	2023/24	2024/25
<b>Recurrent</b>								
Wage	4.753	5.427	2.504	5.427	5.427	5.427	5.427	5.427
Non Wage	1.984	3.664	1.492	4.877	4.877	4.877	4.877	4.877
<b>Devt.</b>								
GoU	1.921	1.678	0.472	0.800	1.800	2.050	0.227	0.227
Ext. Fin.	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
<b>GoU Total</b>	<b>8.658</b>	<b>10.770</b>	<b>4.469</b>	<b>11.104</b>	<b>12.104</b>	<b>12.354</b>	<b>10.531</b>	<b>10.531</b>
<b>Total GoU+Ext Fin (MTEF)</b>	<b>8.658</b>	<b>10.770</b>	<b>4.469</b>	<b>11.104</b>	<b>12.104</b>	<b>12.354</b>	<b>10.531</b>	<b>10.531</b>
Arrears	0.162	1.122	0.653	0.210	0.000	0.000	0.000	0.000
<b>Total Budget</b>	<b>8.820</b>	<b>11.891</b>	<b>5.122</b>	<b>11.314</b>	<b>12.104</b>	<b>12.354</b>	<b>10.531</b>	<b>10.531</b>
<b>A.I.A Total</b>	<b>0.404</b>	<b>0.000</b>	<b>0.000</b>	<b>0.000</b>	<b>0.000</b>	<b>0.000</b>	<b>0.000</b>	<b>0.000</b>
<b>Grand Total</b>	<b>9.223</b>	<b>11.891</b>	<b>5.122</b>	<b>11.314</b>	<b>12.104</b>	<b>12.354</b>	<b>10.531</b>	<b>10.531</b>
<b>Total Vote Budget Excluding Arrears</b>	<b>9.062</b>	<b>10.770</b>	<b>4.469</b>	<b>11.104</b>	<b>12.104</b>	<b>12.354</b>	<b>10.531</b>	<b>10.531</b>

## VI. Budget By Economic Classification

Table V6.1 2019/20 and 2020/21 Budget Allocations by Item

<i>Billion Uganda Shillings</i>	2019/20 Approved Budget				2020/21 Draft Estimates		
	GoU	Ext. Fin	AIA	Total	GoU	Ext. Fin	Total
<b>Output Class : Outputs Provided</b>	<b>9.092</b>	<b>0.000</b>	<b>0.000</b>	<b>9.092</b>	<b>10.304</b>	<b>0.000</b>	<b>10.304</b>
211 Wages and Salaries	5.917	0.000	0.000	5.917	5.917	0.000	5.917
212 Social Contributions	0.477	0.000	0.000	0.477	1.887	0.000	1.887
213 Other Employee Costs	0.718	0.000	0.000	0.718	0.519	0.000	0.519
221 General Expenses	0.232	0.000	0.000	0.232	0.232	0.000	0.232
222 Communications	0.016	0.000	0.000	0.016	0.016	0.000	0.016
223 Utility and Property Expenses	0.757	0.000	0.000	0.757	0.757	0.000	0.757
224 Supplies and Services	0.522	0.000	0.000	0.522	0.522	0.000	0.522
225 Professional Services	0.003	0.000	0.000	0.003	0.003	0.000	0.003
227 Travel and Transport	0.213	0.000	0.000	0.213	0.213	0.000	0.213
228 Maintenance	0.231	0.000	0.000	0.231	0.231	0.000	0.231
273 Employer social benefits	0.005	0.000	0.000	0.005	0.005	0.000	0.005
<b>Output Class : Capital Purchases</b>	<b>1.678</b>	<b>0.000</b>	<b>0.000</b>	<b>1.678</b>	<b>0.800</b>	<b>0.000</b>	<b>0.800</b>
312 FIXED ASSETS	1.678	0.000	0.000	1.678	0.800	0.000	0.800
<b>Output Class : Arrears</b>	<b>1.122</b>	<b>0.000</b>	<b>0.000</b>	<b>1.122</b>	<b>0.210</b>	<b>0.000</b>	<b>0.210</b>

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321 DOMESTIC	1.122	0.000	0.000	1.122	0.210	0.000	0.210
<b>Grand Total :</b>	<b>11.891</b>	<b>0.000</b>	<b>0.000</b>	<b>11.891</b>	<b>11.314</b>	<b>0.000</b>	<b>11.314</b>
<b>Total excluding Arrears</b>	<b>10.770</b>	<b>0.000</b>	<b>0.000</b>	<b>10.770</b>	<b>11.104</b>	<b>0.000</b>	<b>11.104</b>

## VII. Budget By Programme And Subprogramme

**Table V7.1: Past Expenditure Outturns and Medium Term Projections by Programme and SubProgramme**

Billion Uganda shillings	FY 2018/19 Outturn	FY 2019/20		2020-21 Proposed Budget	Medium Term Projections			
		Approved Budget	Spent By End Dec		2021-22	2022-23	2023-24	2024-25
<b>56 Regional Referral Hospital Services</b>	<b>9.223</b>	<b>11.891</b>	<b>5.122</b>	<b>11.314</b>	<b>12.104</b>	<b>12.354</b>	<b>10.531</b>	<b>10.531</b>
01 Mbarara Referral Hospital Services	7.284	10.137	4.618	10.438	10.228	10.228	10.228	10.228
02 Mbarara Referral Hospital Internal Audit	0.016	0.016	0.005	0.016	0.016	0.016	0.016	0.016
03 Mbarara Regional Maintenance Workshop	0.000	0.060	0.027	0.060	0.060	0.060	0.060	0.060
1004 Mbarara Rehabilitation Referral Hospital	1.534	1.278	0.359	0.600	1.600	1.850	0.000	0.000
1479 Institutional Support to Mbarara Regional Hospital	0.389	0.400	0.113	0.000	0.000	0.000	0.000	0.000
1578 Retooling of Mbarara Regional Referral Hospital	0.000	0.000	0.000	0.200	0.200	0.200	0.227	0.227
<b>Total for the Vote</b>	<b>9.223</b>	<b>11.891</b>	<b>5.122</b>	<b>11.314</b>	<b>12.104</b>	<b>12.354</b>	<b>10.531</b>	<b>10.531</b>
<b>Total Excluding Arrears</b>	<b>9.062</b>	<b>10.770</b>	<b>4.469</b>	<b>11.104</b>	<b>12.104</b>	<b>12.354</b>	<b>10.531</b>	<b>10.531</b>

## VIII. Programme Performance and Medium Term Plans

**Table V8.1: Programme Outcome and Outcome Indicators ( Only applicable for FY 2020/21)**

<b>Programme :</b>	56 Regional Referral Hospital Services				
<b>Programme Objective :</b>	Quality inclusive, participatory, accessible and equitable specialised Regional Referral Hospital Services				
<b>Responsible Officer:</b>	Dr. Barigye Celestine Hospital Director				
<b>Programme Outcome:</b>	Quality and accessible Regional Referral Hospital Services				
<i>Sector Outcomes contributed to by the Programme Outcome</i>					
<b>1. Improved quality of life at all levels</b>					
Outcome Indicators	Performance Targets				
			2020/21	2021/22	2022/23
	Baseline	Base year	Target	Projection	Projection
• % increase of specialised clinic outpatients attendences	25	2018	40%	70%	80%
• % increase of diagnostic investigations carried	55%	2018	75%	85%	90%
• Bed occupancy rate	85%	2017	85%	85%	85%

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<b>SubProgramme: 01 Mbarara Referral Hospital Services</b>			
<b>Output: 01 Inpatient services</b>			
No. of in-patients (Admissions)	30,000	32,000	35,000
Average Length of Stay (ALOS) - days	4	4	4
Bed Occupancy Rate (BOR)	85%	85%	85%
<b>Output: 02 Outpatient services</b>			
No. of general outpatients attended to	40,000	42,000	45,000
No. of specialised outpatients attended to	128,000	130,000	132,000
Referral cases in	4,600	4,650	4,800
<b>Output: 04 Diagnostic services</b>			
No. of laboratory tests carried out	93,000	94,000	95,000
No. of patient xrays (imaging) taken	5,500	5,600	5,800
Number of Ultra Sound Scans	8,000	8,200	8,500
<b>Output: 05 Hospital Management and support services</b>			
Quarterly financial reports submitted timely	4	4	4
<b>Output: 06 Prevention and rehabilitation services</b>			
No. of antenatal cases (All attendances)	3,000	3,250	3,500
No. of children immunised (All immunizations)	15,500	16,000	16,500
No. of family planning users attended to (New and Old)	2,500	2,600	2,800
Number of ANC Visits (All visits)	3,000	3,200	3,500
Percentage of HIV positive pregnant women not on H	0%	0%	0%
<b>Output: 07 Immunisation Services</b>			
Number of Childhood Vaccinations given (All contac	15,500	15,600	15,800
<b>SubProgramme: 02 Mbarara Referral Hospital Internal Audit</b>			
<b>Output: 05 Hospital Management and support services</b>			
Quarterly financial reports submitted timely	4	4	4
<b>SubProgramme: 03 Mbarara Regional Maintenance Workshop</b>			
<b>Output: 05 Hospital Management and support services</b>			
Quarterly financial reports submitted timely	yes	yes	yes
<b>SubProgramme: 1004 Mbarara Rehabilitation Referral Hospital</b>			
<b>Output: 81 Staff houses construction and rehabilitation</b>			
No. of staff houses constructed/rehabilitated	1	1	1

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## SubProgramme: 1578 Retooling of Mbarara Regional Referral Hospital

### Output: 85 Purchase of Medical Equipment

Value of medical equipment procured (Ush Bn)	.2	.2	.2
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## IX. Major Capital Investments And Changes In Resource Allocation

Table 9.1: Major Capital Investment (Capital Purchases outputs over 0.5Billion)

FY 2019/20		FY 2020/21
Appr. Budget and Planned Outputs	Expenditures and Achievements by end Dec	Proposed Budget and Planned Outputs
<b>Vote 173 Mbarara Referral Hospital</b>		
<i>Program : 08 56 Regional Referral Hospital Services</i>		
Development Project : 1004 Mbarara Rehabilitation Referral Hospital		
<b>Output: 08 56 81 Staff houses construction and rehabilitation</b>		
Start up construction of Phase One 4 storied 56 Unit staff house.	1) The process of starting the Multi Year 56 Unit storeyed staff house (One Bed room, sitting room and kitchen self-contained) construction was initiated. This involves procuring a consultant to develop structural drawings, BoQs that will kick start the bidding process. This will also include starting the bidding the process, seeking clearances from the various authorities (NEMA, Mbarara Municipal Council, Ministry of Works and other relevant agencies. 2) Various consultations with MOH infrastructure division already done for designs and technical advice. 3) Documentations already done and the contracts committee reviewed; Documents submitted to the Solicitor General for legal advice and clearance. 4) Adverts expected by February for consultancy and bidders for works and award of contract planned to commence in 4th quarter. 5) Site hand over and ground breaking planned by end of April and works to fully commence before end of the quarter.	56 unit storried(One bed room, sitting and kitchen self contained) junior staff house constructed
<b>Total Output Cost(Ushs Thousand)</b>	<b>600,000</b>	<b>600,000</b>
Gou Dev't:	600,000	600,000
Ext Fin:	0	0
A.I.A:	0	0

## X. Vote Challenges and Plans To Improve Performance

### Vote Challenges

1) The hospital has many specialised services Eg. (Renal Dialysis, CT Scan, Neuro Surgery, Cancer treatment and Electro, Encephalogram(EEG) and the medical supplies for these services are not in the NMS list. This calls for adjustments and considerations on budgetary allocations for medicines and supplies.

2) Poor medical equipment functionality due to wear, tear, long usage and inadequate maintenance since the hospital does not yet have a fully functional Regional Medical Equipment maintenance workshop. Specialised equipment keeps breaking down (Eg X-ray, CT scan, BP machines, autoclaves associated with high parts/ maintenance costs.



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- 3) Inadequate and limited staff accommodation associated with high rents costs, difficulty in staff attraction and retention. This affects duty coverage and emergency response especially at night.
- 4) Lack of a functional Incinerator for proper waste management/disposal. The hospital basically stores the waste but has no facility for final disposal or incineration especially for the infectious waste.
- 5) Old and dilapidated structures with limited working space causing overcrowding. There is limited land for expansion and no attendants shade. Need for fast tracking second phase of hospital construction.
- 6) Heavy Work load/inadequate staff due to the restricted structure: The Current establishment structure is 377 out stripped by increased work load leading to fatigue and inefficiencies. Need to fasten restructuring as already started.
- 7) Utility bills especially the YAKA system for hospital services continues to create domestic arrears

### Plans to improve Vote Performance

- 1) The hospital will be committed to work within the provisions of the approved budget and service delivery targets with emphasis to quality improvement (Improved Stock management, proper accountability for medicines and reduction of stock outs, as a contribution to achieve the health sector objectives.
- 2) Management will strengthen support supervision to the lower health facilities in the region to build their capacity to deliver improved services. The units will also be supported to operationalise the theatres, improve referrals and management of Emergencies. This will reduce unnecessary referrals and streamline the referral system. Training, mentorship, placements and surgical camps will be supported to address the common Non Communicable diseases in the region.
- 3) Monitoring and Evaluation using Standard check lists for both internal and external technical supervision will be enforced in the region and avenues for information sharing established for improved service delivery.
- 4) Service contracts with duty schedules, task allocations and schedules of duties for improved performance management among the staff. Staff welfare will be improved by provision of teas, working tools and timely payments of emoluments; Improve duty coverage using biometric analysis and duty attendance registers; lobby with partners to fill service delivery gaps and ensure timely and regular supply of medicines and other sundries.
- 5) The regional Medical Equipment maintenance activities including user trainings will be strengthened for equipment functionality, with improved clean and safe working environment to ensure user/patients/workers' rights and safety.
- 6) Internal resource controls especially for finances, medicines and other resources will be enforced coupled with proper leadership and governance to ensure accountability and value for money. The medicines and therapeutic committee in place will be strengthened for effective and efficient management of medicines.
- 7) Management structures, committees and bodies functionalized for efficiency and effectiveness in service delivery. Strict and close Supervision of works by appointing contract managers, frequent site meetings, strict verification of items procured by user units to ensure quality and value for money working through project management committees (Appointed Project managers)
- 8) Stake holders' involvement including the local communities, Partners for integrated service delivery will be enforced. Regular planning, review, feedback and updates meetings conducted including client's engagement for sensitization, mobilization and feedback through the media.

### XI Off Budget Support

**Table 11.1 Off-Budget Support by Sub-Programme**

<i>Billion Uganda Shillings</i>	<b>2019/20 Approved Budget</b>	<b>2020/21 Draft Estimates</b>
<b>Programme 0856 Regional Referral Hospital Services</b>	<b>0.00</b>	<b>2.05</b>

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<i>Recurrent Budget Estimates</i>		
<b>01 Mbarara Referral Hospital Services</b>	<b>0.00</b>	<b>2.05</b>
<i>436-Global Fund for HIV, TB &amp; Malaria</i>	<i>0.00</i>	<i>1.77</i>
<i>451-Global Alliance for Vaccines Immunisation</i>	<i>0.00</i>	<i>0.28</i>
<b>Total for Vote</b>	<b>0.00</b>	<b>2.05</b>

## XII. Vote Cross Cutting Policy And Other Budgetary Issues

Table 12.1: Cross- Cutting Policy Issues

Issue Type: **HIV/AIDS**

<b>Objective :</b>	1) To reduce incidence of HIV infections by implementing the 90,90,90 policy of Test Treat and Suppress
<b>Issue of Concern :</b>	Increased HIV incidence among MARPS (Commercial Sex workers, Working class, Long distance drivers, adolescents)
<b>Planned Interventions :</b>	Conduct HIV health education, Safe male circumcision, condom distribution HIV/AIDS/TB counselling/testing; Treat STDs and STIs Positives initiated on ART; Exposed clients provided PEP, Condoms distributed. moonlight outreaches done,
<b>Budget Allocation (Billion) :</b>	8,000,000.000
<b>Performance Indicators:</b>	Numbers of: Health education sessions held, People counselled & tested. Males circumcised, Positives initiated on ART; Exposed clients provided PEP, Condoms distributed. Moonlight outreaches done, Couples tested
<b>Objective :</b>	To give HAART to all eligible clients (95,95,95 policy)
<b>Issue of Concern :</b>	Total elimination of HIV by Concern to have 90% of the total population tested for HIV, 95% of the positives put into care and 95% Viral suppression.
<b>Planned Interventions :</b>	<ul style="list-style-type: none"> <li>• Targeted testing</li> <li>• Viral Load monitoring.</li> <li>• Supplies</li> <li>• Provision of Pr-ePEP prophylaxis .</li> <li>• Client follow up for Lost to follow patients.</li> </ul>
<b>Budget Allocation (Billion) :</b>	10,000,000.000
<b>Performance Indicators:</b>	<ul style="list-style-type: none"> <li>• Number of clients on full HAART,</li> <li>• Number of clients counselled,</li> <li>• Compliance levels of those client treatment.</li> <li>• Number of clients followed up•</li> </ul>

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Issue Type:	Gender
<b>Objective :</b>	To have equal access to health services despite gender, age, sex and sexual orientation and social economic status or otherwise.
<b>Issue of Concern :</b>	Access to maternal child health services
<b>Planned Interventions :</b>	Provision of free maternal child health services, automatic waiver for services under the paying wing for all mothers and children who can't afford; Document and follow up Gender based violence cases in the hospital.
<b>Budget Allocation (Billion) :</b>	4,000,000.000
<b>Performance Indicators:</b>	Number of deliveries conducted in the facility and children below five treated; Number of clients with disabilities treated. Waivers provided in the private wing; Number of gender based violence cases reported and handled in the hospital.
<b>Objective :</b>	To educate the community about the dangers of late service seeking behaviour
<b>Issue of Concern :</b>	Delayed health seeking behaviour resulting into complications, high morbidity and mortality especially maternal and neonatal morbidity
<b>Planned Interventions :</b>	Health education at hospital, Community outreaches, special clinics adolescents and paediatrics, old, disabled and incapacitated Involvement of special groups Improve supervision, referral system, emergency & ambulatory services.
<b>Budget Allocation (Billion) :</b>	8,000,000.000
<b>Performance Indicators:</b>	Number of mothers seeking early ANC in 1st to 4th Visits; mothers delivering in hospital, Reduction in maternal perinatal death, Number of cases referred by CHWs & peers.

Issue Type:	Environment
<b>Objective :</b>	To have a clean and safe working hospital environment
<b>Issue of Concern :</b>	Hospitable and Safe environment resulting into accidents, insecurity and infection
<b>Planned Interventions :</b>	Safe clean water; constant power; cleaning supervision, Qi 5S. Signages; compound beatification, tree cover; Provision of protective wear & uniforms; Supervision; Disposal of obsolete items and equipment
<b>Budget Allocation (Billion) :</b>	6,000,000.000
<b>Performance Indicators:</b>	Clean & safe working environment; Availability of water, power Proper waste management, staff protected. 5S implemented.
<b>Objective :</b>	To ensure proper hospital waste disposal and management
<b>Issue of Concern :</b>	Hospital environmental pollution and public safety.
<b>Planned Interventions :</b>	Proper waste segregation, transportation & disposal, functional sewage system, disposal of expired items, incineration of dangerous wastes. Use of power and water monitored.
<b>Budget Allocation (Billion) :</b>	2,000,000.000
<b>Performance Indicators:</b>	Clean, safe and welcoming hospital environment, Reduced accumulation of expired items, dangerous wastes disposed,

### XIII. Personnel Information

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**Table 13.1 Staff Establishment Analysis**

Title	Salary Scale	Number Of Approved Positions	Number Of Filled Positions
Consultant (Anaesthesia)	U1SE	1	0
Consultant (Medicine)	U1SE	1	0
Consultant (Obs. & Gyn)	U1SE	1	0
Senior Consultant MEDICAL	U1SE	1	0
Medical Officer Special Grade (Medicine)	U2(Med-1)	1	0
Medical Officer Special Grade (Surgeon)	U2(Med-1)	1	0
SEN PRINCIPAL NURSING OFFICER	U2(Med-2)	1	0
Principal Anaesthetic Officer	U3(Med-2)	1	0
PRINCIPAL PSYCHIATRIC CLINICAL OFFICER	U3(Med-2)	1	0
SENIOR ORTHOPAEDIC OFFICER	U4(Med-2)	1	0
SENIOR RADIOGRAPHER	U4(Med-2)	2	1
ORTHOAEDIC TECHNICIAN	U5(SC)	1	0
ENROLLED MIDWIFE	U7(Med)	52	47
Consultant (Orthopaedic)	US1E	1	0
Senior Consultant (Surgery)	US1E	1	0

**Table 13.2 Staff Recruitment Plan**

Post Title	Salary Scale	No. Of Approved Posts	No Of Filled Posts	Vacant Posts	No. of Posts Cleared for Filling FY2020/21	Gross Salary Per Month (UGX)	Total Annual Salary (UGX)
Consultant (Anaesthesia)	U1SE	1	0	1	1	4,200,000	50,400,000
Consultant (Medicine)	U1SE	1	0	1	1	4,200,000	50,400,000
Consultant (Obs. & Gyn)	U1SE	1	0	1	1	4,200,000	50,400,000
Consultant (Orthopaedic)	US1E	1	0	1	1	4,200,000	50,400,000
ENROLLED MIDWIFE	U7(Med)	52	47	5	5	3,065,790	36,789,480
Medical Officer Special Grade (Medicine)	U2(Med-1)	1	0	1	1	3,750,000	45,000,000
Medical Officer Special Grade (Surgeon)	U2(Med-1)	1	0	1	1	3,750,000	45,000,000
ORTHOAEDIC TECHNICIAN	U5(SC)	1	0	1	1	1,200,000	14,400,000
Principal Anaesthetic Officer	U3(Med-2)	1	0	1	1	3,100,000	37,200,000
PRINCIPAL PSYCHIATRIC CLINICAL OFFICER	U3(Med-2)	1	0	1	1	3,100,000	37,200,000
SEN PRINCIPAL NURSING OFFICER	U2(Med-2)	1	0	1	1	3,500,000	42,000,000
Senior Consultant MEDICAL	U1SE	1	0	1	1	4,500,000	54,000,000
Senior Consultant (Surgery)	US1E	1	0	1	1	4,500,000	54,000,000

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SENIOR ORTHOPAEDIC OFFICER	U4(Med-2)	1	0	1	1	2,200,000	26,400,000
SENIOR RADIOGRAPHER	U4(Med-2)	2	1	1	1	2,200,000	26,400,000
<b>Total</b>		67	48	19	19	51,665,790	619,989,480