I. VOTE MISSION STATEMENT

To provide accessible and quality healthcare to all people in the Rwenzori region through delivery of promotive, preventive, curative, palliative, and rehabilitative healthcare.

II. STRATEGIC OBJECTIVE

To contribute to improved human capital through increased access to general and specialized health services and hence improved quality of life for all people of the Rwenzori region.

III. MAJOR ACHIEVEMENTS IN 2021/22

- 1). The hospital perimeter wall fence meant to enforce security and safety of government property at 70% completion. This will provide the needed security on completion.
- 2) The Ministry of Health deployed an additional 30 staff under contract to boost the human resources to provide health services.
- 3) The appointment and inauguration of the Hospital Management Board was a big achievement since the hospital didn't have a board for almost two years and yet their role is so crucial in policy implementation and general oversight..
- 4) With support from our partner, Knowledge for Change, it was possible for functionalize the operation of the Orthopaedic Workshop which was non functional due to shortage of supplies from NMS.
- 5) The hospital was the only regional treatment centre for Covid 19 pandemic in the whole of Rwenzori. The hospital managed a total of 778 admitted cases of Covid 19 i.e 357 males and 421 females and discharged 629 patients. The total death due to Covid 19 was 130. The Case Fatality rate was 16.7 percent. A total of 18 criticall severe covid 19 cases were referred to national treatment centres for critical care management.

Half year output performance from July to December 2021 are as follows.

Inpatient services

Inpatient admissions were 10,697 out of the planned 24,720. Average Length Of Stay was 3.65 days against the planned 4 days, Bed Occupancy Rate was 61% out of the planned 80% Deliveries 3118

Referrals in were 1,930 out of the planned 7,500 cases.

Prevention and rehabilitation

ANC attendance were 3,603 out of the annual planned 8,974. Children immunized were 17,040 out of the planned 36,775 annually. Family planning contacts made were 1608 out of the planned 2,854 contacts.

Diagnostic services

Laboratory tests conducted were 67,127 out of the annual plan of 134,479 tests.

Ultrasound scans done were 5636 out of the annual plan of 15,000.

Xray examinations done were 2,683 out of the annual plan of 10,000 xray examinations.

Outpatients services

General outpatients attendance were 47,504 of the planned 313,583 annual attendance.

Specialized outpatients attendance were 46,502 of the annual plan of 124,717.

Referral in 1907

Medicines and health supplies

Medicines and medical supplies worth 402,735,753 was secured from National Medical Stores and private suppliers to the hospital.

Immunization

The number of children immunized were 17,040 out of the annual plan of 36,775 immunized childre.

Hospital management and support services

Assets register has been updated quarterly. The hospital has held two hospital management board meetings. Two senior staff meetings have been held in the quarter, salaries have been paid monthly and timely as well. Staff recruitment plan have been developed, cleared by Ministry of Public Service and submitted to HSC.

Pensions and gratuity have been paid.

Quarterly financial reports were submitted in time. Records and management information system have been managed.

Patients information were well managed as well as the management of the payroll.

Also, staff performance appraisal have been managed and submitted to Public Service as required.

Preventive and corrective maintenance of equipment was done in the Rwenzori region. Facilities covered include Fort Portal regional referral hospital, five General hospitals, and 14 Health Centre IVs.

IV. MEDIUM TERM BUDGET ALLOCATIONS

Table 4.1: Overview of Vote Expenditure (Ushs Billion)

			MTEF Budget Projections			
		2022/23 Proposed Budget	2023/24	2024/25	2025/26	2026/27
D	Wage	8.254	5.694	5.694	5.694	5.694
Recurrent	Non-Wage	2.646	3.104	3.663	3.663	3.663
ъ.	GoU	0.200	0.200	0.200	0.200	0.200
Devt.	Ext Fin.	0.000	0.000	0.000	0.000	0.000
	GoU Total	11.100	8.997	9.556	9.556	9.556
Total GoU+E	xt Fin (MTEF)	11.100	8.997	9.556	9.556	9.556
	Arrears	0.083	0.000	0.000	0.000	0.000
	Total Budget	11.183	8.997	9.556	9.556	9.556
Total Vote Bu	dget Excluding	11.100	8.997	9.556	9.556	9.556

Table 4.2: Budget Allocation by Department for Recurrent and Development (Ushs Billion)

D.W. T. J. G.W.	Draft Budget Esti	Draft Budget Estimates FY 2022/23	
Billion Uganda Shillings	Recurrent	Development	
Programme:12 HUMAN CAPITAL DEVELOPMENT	10.900	0.200	
SubProgramme:02 Population Health, Safety and Management	10.900	0.200	
Sub SubProgramme:01 Regional Referral Hospital Services	10.900	0.200	
001 Hospital Services	9.669	0.000	
002 Support Services	1.231	0.200	
Total for the Vote	10.900	0.200	

V. PERFORMANCE INDICATORS AND PLANNED OUTPUTS

Table 5.1: Performance Indicators

Programme: 12 HUMAN CAPIT	TAL DEVELOPMENT
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SubProgramme: 02 Population Health, Safety and Management

Sub SubProgramme: 01 Regional Referral Hospital Services

Department: 001 Hospital Services

Budget Output: 320009 Diagnostic Services

PIAP Output: Reduced morbidity and mortality due to HIV/AIDS, TB and malaria and other communicable diseases.

Indicator Name	Indicator Measure Base Year		Base Level	Performance Targets	
				2022/23	
% of HIV positive pregnant women initiated on ARVs for EMTCT	Percentage			%	
% of Hospitals, HC IVs and IIIs conducting routine HIV counseling and testing	Percentage	2020-21	80%	100%	
% of key populations accessing HIV prevention interventions	Percentage	2020-2021	35%	40%	
No. of health workers in the public and private sector trained in integrated management of malaria	Number	2020-2021	20	40	
No. of voluntary medical male circumcisions done	Number	2020-2021	2000	2500	

Budget Output: 320022 Immunisation Services

PIAP Output: Target population fully immunized

Indicator Name	Indicator Measure	Base Year	Base Level	Performance Targets
				2022/23
% Availability of vaccines (zero stock outs)	Percentage	2020/2021	80%	90%
% of Children Under One Year Fully Immunized	Percentage	2020-2021	60%	80%
% of functional EPI fridges	Percentage	2020-2021	80%	100%
% of health facilities providing immunization services by level	Percentage	2020/2021	90%	100%

Sub SubProgramme: 01 Regional Referra	ii Hospitai Sei vices			
Department: 001 Hospital Services				
Budget Output: 320023 Inpatient Services	3			
PIAP Output: Reduced morbidity and mo	ortality due to HIV/AID	S, TB and malaria and	other communicable diseases.	•
Indicator Name	Indicator Measure	Base Year	Base Level	Performance Targets
				2022/23
% of HIV positive pregnant women initiated on ARVs for EMTCT	Percentage	2020-2021	80%	100%
% of Hospitals, HC IVs and IIIs conducting routine HIV counseling and testing	Percentage	2020-2021	70%	80%
No. of HIV test kits procured and distributed	Number	2020-2021	11700	13000
Budget Output: 320027 Medical and Heal	th Supplies	L		
PIAP Output: Basket of 41 essential medi	cines availed			
Indicator Name	Indicator Measure	Base Year	Base Level	Performance Targets
				2022/23
% of health facilities utilizing the e-LIMIS (LICS)	Percentage	2020-2021	2%	20%
Budget Output: 320033 Outpatient Service	es	I		
PIAP Output: Reduced morbidity and mo	ortality due to HIV/AID	S, TB and malaria and	other communicable diseases.	•
Indicator Name	Indicator Measure	Base Year	Base Level	Performance Targets
				2022/23
% of HIV positive pregnant women initiated on ARVs for EMTCT	Percentage	2020-2021	95%	100%
% of Hospitals, HC IVs and IIIs conducting routine HIV counseling and testing	Percentage			%
% of key populations accessing HIV prevention interventions	Percentage	2020-2021	5%	10%
No. of health workers in the public and private sector trained in integrated management of malaria	Number	2020-2021	100	120
No. of HIV test kits procured and distributed	Number	2020-2021	11,700	13000

Sub SubProgramme: 01 Regional Refer	ral Hospital Services			
Department: 001 Hospital Services				
Budget Output: 320033 Outpatient Serv	vices			
Indicator Name	Indicator Measure	Base Year	Base Level	Performance Targets
				2022/23
No. of voluntary medical male circumcisions done	Number	2020-2021	2000	2200
Department: 002 Support Services				
Budget Output: 000005 Human Resour	ce Management			
PIAP Output: Human resources recruit	ed to fill vacant posts			
Indicator Name	Indicator Measure	Base Year	Base Level	Performance Targets
				2022/23
Staffing levels, %	Percentage	2020-2021	73%	79%
Budget Output: 000008 Records Manag	gement			
PIAP Output: Comprehensive Electron	ic Medical Record System	scaled up		
Indicator Name	Indicator Measure	Base Year	Base Level	Performance Targets
				2022/23
% of hospitals and HC IVs with a functional EMRS	Percentage	2020-2021	10%	20%
Project: 1576 Retooling of Fort Portal F	Regional Referral Hospital	1	•	
Budget Output: 000002 Construction M	lanagement			
PIAP Output: Hospitals and HCs rehab	ilitated/expanded			
Indicator Name	Indicator Measure	Base Year	Base Level	Performance Targets
				2022/23
No. of Health Center Rehabilitated and Expanded	Number	2020-2021	70% completed perimeter wall fence	100

VI. VOTE NARRATIVE

Vote Challenges

- 1) The ever increasing demand for health services which doesn't match the resources available for providing those services, eg. limited funding, human resources, and medicines and medical supplies.
- 2) Inability for the hospital to pay for utilities has always created domestic arrears for water and electricity.
- 3) The hospital has many fleet of vehicles including ambulances and these pose a big challenge in maintenance, fuel and repair costs.
- 4) Covid 19 pandemic and its effects has not left the hospital the same.
- 5) Staff accommodation is a major challenge since less than 20% of staff is accommodated within the staff quarters. This affect emergency response time.
- 6) Limited number of specialists and specialized services always lead to many referrals to national referral hospitals and this becomes very costly.
- 7) Lack of an accident and emergence unit for appropriate handling of emergencies.
- 8) Dilapidated wards/units and limited ward spaces cause over crowding.
- 9) Also limited number of other cadre of staff besides the specialists. This has been caused by the limited or constricted staff structure of the hospital which only provides for limited staff per cadre and thus affecting service delivery.
- 10) The high cost of utilities i.e. water and electricity bills which doesn't match the available budget. This always create perpetual domestic arrears. This forces the entity to ask for supplementary budget to cover the bills.
- 11) Inadequate financing from the government to meet the ever increasing demand and scope of health services to provide to the public. The annual budget has remain largely constant over the years and this affects healthcare delivery and the public perception about the facility.
- 12) Limited budget for medicines and medical supplies with National Medical Stores. This affects the quantity of medicines and other supplies delivered and perpetuate stockouts to the displeasure of the community and health service seekers.

Plans to improve Vote Performance

- 1) We plan to strengthen support supervision internally and to the lower level health facilities to impart skills and reduce referrals.
- 2) Strengthening monitoring and evaluation of services to identify service gaps and improvement areas.
- 3) Improve and prioritize staff motivation through rewards and sanctions.
- 4) We plan to seek and lobby a pool of development partners through which additional support to healthcare provision in this region could be enhanced. This could increase financial, material, infrastructural and human resource support thus supplementing government resources.
- 5) To continue to plan and budget to procure essential medical equipment since they continually depreciate and get outdated.
- 6) To lobby the Ministry of Health to construct a modern OPD/Emergency department since the current OPD was poorly planned and doesn't provide for proper emergency response.
- 7) Hospital management has planned to strengthen support supervision on the medical equipment maintenance team so that their performance is enhanced and the challenges affecting their work appreciated for corrective action.
- 8) There is a plan to dispose of all obsolete items or assets which is occupying a lot of space in the hospital. This will create additional space for service delivery and storage.
- 9) The hospital strategic plan has been developed and approved by the National Planning Authority. This will guide the service and infrastructure development and provide the direction to take for the next five years.
- 10) We will continue to lobby Parliament, Ministry of Finance, and NMS to increase funding for medicines/supplies and for operations

VII. Off Budget Support

Table 7.1: Off Budget Support by Project and Department

Billion Uganda Shillings	2022/23 Draft Etimates
Programme: 12 HUMAN CAPITAL DEVELOPMENT	1,420,000
SubProgramme: 02 Population Health, Safety and Management	1,420,000
Sub SubProgramme : 01 Regional Referral Hospital Services	1,420,000
Department: 002 Support Services	1,420,000
Total For The Vote	1,420,000

VIII. VOTE CROSS CUTTING POLICY AND OTHER BUDGETARY ISSUES

Table 8.1: Cross- Cutting Policy Issues

i) Gender and Equity

OBJECTIVE	Gender base violence (GBV) lead to unwanted pregnancies, defilement, disability among the victims, and sometimes lead to low adherence to ART. There are cases of maternal and neonatal deaths and undocumented cases of domestic violence. To promote all inclusive efforts that ensures gender equality and equity without discrimination against women, children, elderly, and the disabled. Health care should be guaranteed to all in the most fair way possible. Women must be included in key committees of the hospital, be allowed to actively participate in leadership and decision making. There is need to strengthen adolescent services and initiation of special clinics for the elderly and disabled
Issue of Concern	Hospital continues to register GBV, maternal and neonatal deaths. There is vulnerability and gender inequality and equity at the work place. Low involvement of men in family planning. Undocumented domestic violence cases. Low uptake of family planning.
Planned Interventions	Appointing a gender focal person to plan and implement gender issues. Establish an adolescent centre to address matters affecting adolescents. Training staff in GBV. Set up a breast feeding corner for mothers. Immunization of children. Cancer screening.
Budget Allocation (Billion)	0.040
Performance Indicators	Number of GBV managed (50 cases). Breast feeding corner for mothers created. Increase women representation in committees from 20% to 30%. Number of children immunized (target 37,846). Number of males involved in family planning (target 600).
ii) HIV/AIDS	
OBJECTIVE	High prevalence of HIV in the Rwenzori region and low adherence ART. To promote HIV case identification in children, adolescents and men. Also to promote viral load suppression among all age groups, TB and HIV case identification and generally client engagement and retention in HIV care. Also ART optimization, patient level data use and improve Early Infant Diagnosis infant outcomes and strengthening referrals through the regional third line committees. All the above is meant to achieve the 90-90-90 UNAIDS target.
Issue of Concern	Rwenzori region continues to register high prevalence of HIV in the community and low adherence to ART. Low retention rate for clients in care. Low identification of new HIV positive cases. Increased GBV leads to poor adherence to ART and disability.
Planned Interventions	Proper patient care for opportunistic infection. Early diagnosis of cases. Increased case identification of children, adolescents and men. Intensify follow ups of clients in care. Strengthen referral through third line committees. Sensitise on GBV dangers
Budget Allocation (Billion)	0.040
Performance Indicators	Number of individuals tested for HIV (target 6000). Increased identification and retention rates to 90%. Number of new HIV positive linked to care (target 95%). Number of newly tested HIV positive clients (target 500). Also the number of GBV handled (50)
iii) Environment	
OBJECTIVE	To promote all the activities that will protect and improve our environment. The hospital environment needs to be safe of infection and must promote good health. Infection prevention protocols with emphasis on highly infectious diseases will be disseminated to all staff through training in WHO guidelines and SOPS promoted All medical waste will be segregated and incinerated.
Issue of Concern	There is need to prevention infections among staff and clients. Also, there is poor medical waste segregation and

disposal. However, the need to having a clean and safe working environment is key in service delivery.

Planned Interventions	Adopt and customize universal IPC protocols. Train staff in infection prevention and control. Ensure atleast 80% of waste segregation from point of generation to disposal. Incinerate all waste in the incinerator. Provision of safe water and colour coded
Budget Allocation (Billion)	0.040
Performance Indicators	150 health workers trained in IPC protocols. Atleast 100 trees planted in the hospital. Atleast 50 waste segregation points set up and operationalized. Colour coded bins availed. Ensure safe and healthy work environment.
iv) Covid	
OBJECTIVE	To reduce the spread of Covid 19 in the hospital and the region. To counsel and treat all those infected at the treatment centre. To provide follow up support to infected and their families. Promote safety practices against Covid 19 spread and to do massive sensitization of the community.
Issue of Concern	Covid 19 is global pandemic which affected world economies. In Uganda, many have been infected, others died, and others hospitalized with mixed outcomes. Infections need to reduce through vaccination and sensitization. Treatment facility needs improvement
Planned Interventions	Promotion of infection prevention measures. Covid 19 testing and treatment of infected. Training of staff on the IPC protocols for Covid 19. Continued CMEs regarding Covid. Promotion of Covid 19 vaccination campaign. Participate in the surveillance.
Budget Allocation (Billion)	0.040
Performance Indicators	Test 50 % of clients for Covid. To treat 100% of Covid patients who report for care. Train 80% of staff in Covid 19 IPC protocols and safety measures. Conduct monthly radio talk shows on Covid 19 (12 shows). Also conduct quarterly Task Force meetings.

IX. PERSONNEL INFORMATION

Table 9.1: Staff Establishment Analysis

Title	Salary Scale	Number of Approved Positions	Number of filled Positions
ACCOUNTANT - FORT PORTAL REG. REF HOSPITAL	U4	1	0
ANAESTHETIC OFFICER - FORT PORTAL REG. REF HOSPITAL	U5	5	2
ASKARI - FORT PORTAL REG. REF HOSPITAL	U8	18	14
ASSISTANT ENGINEERING OFFICER (ELECTRICAL) - FORTPORTAL REG. REF HOSPITAL	U5	3	2
ASSISTANT PROCUREMENT OFFICER	U5U	1	0
CLINICAL OFFICER - FORT PORTAL REG. REF HOSPITAL	U5	13	8
Consultant (Anaesthesia)	U1SE	1	0
Consultant (ENT)	U1SE	1	0
Consultant (Internal Medicine)	U1SE	1	0
Consultant (Opthalamology)	U-ISE (SC)	1	0
Consultant (Paediatrics)	U1SE	1	0
Consultant (Pathology)	U1SE	2	0
Consultant (Surgery)	U1SE	1	0
Consultant Psychiatry	U1SE	2	0
Dispenser	U5(SC)	5	3
ENROLLED MIDWIFE - FORT PORTAL REG. REF HOSPITAL	U7	20	17
MEDICAL OFFICER SPECIAL GRADE - FORT PORTAL REG. REF HOSPITAL	U2	1	0
Medical Officer Special Grade (Paediatrics)	U2(Med-1)	1	0
Medical Officer Special Grade (Psychiatry)	U2U	1	0
Medical Officer Special Grade(Radiologist)	U2(Med-1)	1	0
Medical Officer Special Grade(Surgeon)	U2(Med-1)	1	0
Medical Officer Special GradeOrthopaedic Surgeon	U2U	1	0

Title	Salary Scale	Number of Approved Positions	Number of filled Positions
MOSG (Public Health)	U3 (SC)	1	0
Principal Medicla Officer	U2 (Med-1)	1	0
PROCUREMENT OFFICER	U4U	1	0
Psychiatric Clinical Officer	U5(SC)	2	0
RECORDS ASSISTANT - FORT PORTAL REG. REF HOSPITAL	U7	1	0
Senior Consultant (Internal Medicine)	UISE	2	0
Senior Medical Officer U3	U3 (Med-1)	1	0
SENIOR OPTHALMIC CLINICAL OFFICER	U4(Med-2)	2	0

Table 9.2: Staff Recruitment Plan

Post Title	Salary Scale	No. Of Approved Posts	No. Of Filled Posts	No. Of Vacant Posts	No. Of Posts Cleared for Filling FY2022/23	Gross Salary Per Month (UGX)	Total Annual Salary (UGX)
ACCOUNTANT - FORT PORTAL REG. REF HOSPITAL	U4	1	0	1	1	1,020,697	12,248,364
ANAESTHETIC OFFICER - FORT PORTAL REG. REF HOSPITAL	U5	5	2	3	2	898,337	21,560,088
ASKARI - FORT PORTAL REG. REF HOSPITAL	U8	18	14	4	4	277,660	13,327,680
ASSISTANT ENGINEERING OFFICER (ELECTRICAL) - FORTPORTAL REG. REF HOSPITAL	U5	3	2	1	1	937,360	11,248,320
ASSISTANT PROCUREMENT OFFICER	U5U	1	0	1	1	598,822	7,185,864
CLINICAL OFFICER - FORT PORTAL REG. REF HOSPITAL	U5	13	8	5	5	937,360	56,241,600
Consultant (Anaesthesia)	U1SE	1	0	1	1	4,200,000	50,400,000
Consultant (ENT)	U1SE	1	0	1	1	4,200,000	50,400,000
Consultant (Internal Medicine)	U1SE	1	0	1	1	0	0
Consultant (Opthalamology)	U-ISE (SC)	1	0	1	1	3,065,630	36,787,560
Consultant (Paediatrics)	U1SE	1	0	1	1	4,200,000	50,400,000
Consultant (Pathology)	U1SE	2	0	2	. 2	8,400,000	100,800,000
Consultant (Surgery)	U1SE	1	0	1	1	4,200,000	50,400,000
Consultant Psychiatry	U1SE	2	0	2	. 2	8,400,000	100,800,000
Dispenser	U5(SC)	5	3	2	1	1,200,000	14,400,000
ENROLLED MIDWIFE - FORT PORTAL REG. REF HOSPITAL	U7	20	17	3	2	577,257	13,854,168
MEDICAL OFFICER SPECIAL GRADE - FORT PORTAL REG. REF HOSPITAL	U2	1	0	1	1	2,202,751	26,433,012
Medical Officer Special Grade (Paediatrics)	U2(Med-1)	1	0	1	1	3,750,000	45,000,000
Medical Officer Special Grade (Psychiatry)	U2U	1	0	1	1	3,750,000	45,000,000
Medical Officer Special Grade(Radiologist)	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

Post Title	Salary Scale	No. Of Approved Posts	No. Of Filled Posts	No. Of Vacant Posts	No. Of Posts Cleared for Filling FY2022/23	Gross Salary Per Month (UGX)	Total Annual Salary (UGX)
Medical Officer Special GradeOrthopaedic Surgeon	U2U	1	0	1	1	3,750,000	45,000,000
MOSG (Public Health)	U3 (SC)	1	0	1	1	2,463,611	29,563,332
Principal Medicla Officer	U2 (Med-1)	1	0	1	1	4,500,962	54,011,544
PROCUREMENT OFFICER	U4U	1	0	1	1	940,366	11,284,392
Psychiatric Clinical Officer	U5(SC)	2	0	2	2	1,200,000	28,800,000
RECORDS ASSISTANT - FORT PORTAL REG. REF HOSPITAL	U7	1	0	1	1	471,240	5,654,880
Senior Consultant (Internal Medicine)	UISE	2	0	2	2	7,849,240	94,190,880
Senior Medical Officer U3	U3 (Med-1)	1	0	1	1	3,300,000	39,600,000
SENIOR OPTHALMIC CLINICAL OFFICER	U4(Med-2)	2	0	2	1	2,200,000	26,400,000
Total	-	-			43	86,991,293	1,130,991,684