## **Vote Summary**

### V1: Vote Overview

This section sets out the Vote Mission, Strategic Objectives, and provides a description of the vote's services (i) Snapshot of Medium Term Budget Allocations

Table V1 below summarises the Medium Term Budget allocations for the Vote:

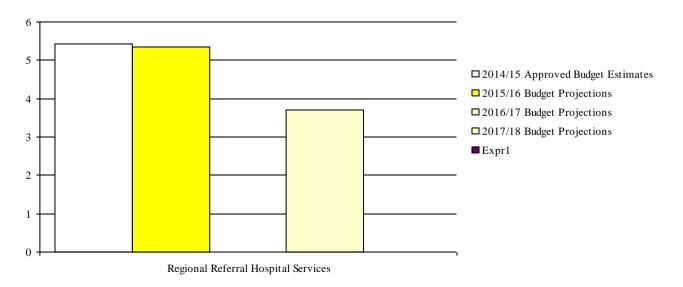
Table V1.1: Overview of Vote Expenditures (UShs Billion)

		2012/14	2014	/15 Spent by	MTEF B	Budget Proje	ctions
(i) Excluding	Arrears, Taxes	2013/14 Outturn	Approved " Budget	Spent by End Sept	2015/16	2016/17	2017/18
	Wage	2.781	3.432	0.724	3.432	3.432	1.806
Recurrent	Non Wage	1.027	1.306	0.326	1.306	0.860	0.860
Development	GoU	0.736	0.700	0.175	0.600	1.050	1.050
	Ext.Fin	0.000	0.000	0.000	0.000	0.000	0.000
	GoU Total	4.545	5.438	1.225	5.338	5.342	3.716
Fotal GoU+D	onor (MTEF)	4.545	5.438	1.225	5.338	5.342	3.716
(ii) Arrears	Arrears	0.000	0.000	0.000	0.000	N/A	N/A
and Taxes	Taxes**	0.000	0.000	0.000	0.000	N/A	N/A
	Total Budget	4.545	5.438	1.225	5.338	N/A	N/A
(iii) Non Tax	Revenue	0.000	0.200	0.062	0.240	0.480	0.500
	Grand Total	4.545	5.638	1.287	5.578	N/A	N/A
Excluding '	Taxes, Arrears	4.545	5.638	1.287	5.578	5.822	4.216

\* Donor expenditure data unavailable

\*\* Non VAT taxes on capital expenditure

The chart below shows total funding allocations to the Vote by Vote Function over the medium term: Chart V1.1: Medium Term Budget Projections by Vote Function (UShs Bn, Excluding Taxes, Arrears





### **Vote Summary**

#### (ii) Vote Mission Statement

The Vote's Mission Statement is:

To increase access to all people in Rwenzori region to quality general and specialized health services.

#### (iii) Vote Outputs which Contribute to Priority Sector Outcomes

The table below sets out the vote functions and outputs delivered by the vote which the sector considers as contributing most to priority sector outcomes.

Sector Outcome 1:	Sector Outcome 2:	Sector Outcome 3:		
Increased deliveries in health facilities	Children under one year old protected against life threatening diseases	Health facilities receive adequate stock of essential medicines and health supplies (EMHS)		
Vote Function: 08 56 Regional Refer	ral Hospital Services			
<b>Outputs Contributing to Outcome 1:</b>	<b>Outputs Contributing to Outcome 2:</b>	<b>Outputs Contributing to Outcome 3:</b>		
Outputs Provided	Outputs Provided	None		
085601 Inpatient services	085606 Prevention and rehabilitation			
085602 Outpatient services	services			
085606 Prevention and rehabilitation services				
Capital Purchases				
085680 Hospital Construction/rehabilitation				
085681 Staff houses construction and rehabilitation				

### V2: Past Vote Performance and Medium Term Plans

This section describes past and future vote performance, in terms of key vote outputs and plans to address sector policy implementation issues.

#### (i) Past and Future Planned Vote Outputs

#### 2013/14 Performance

The hospital procured Consultancy for Design, Plans and supervision of private wing and staff houses construction which produced good results. Other Procurements include Furniture, Medical Equipments and instruments (assorted), Motor vehicle Station wagon and Pick-up double cabin, computer sets, lap tops, and Television Sets.

Constructions include: three storied private ward building, interns Hostel & staff houses, walk ways connecting stores to other units approximately 265 meters, Shed for HIV clinic and a car Shed.

#### Preliminary 2014/15 Performance

Procure Equipments, Delivery beds and other assorted equipment and furniture to improve the hospital work environment. Procurement of Ultrasound Equipment.

#### Table V2.1: Past and 2015/16 Key Vote Outputs\*

Vote, Vote Function Key Output	201 Approved Budget and Planned outputs	4/15 Spending and Outputs Achieved by End Sept	2015/16 Proposed Budget and Planned Outputs
Vote: 164 Fort Portal Re	eferral Hospital		
Vote Function: 0856 Reg	ional Referral Hospital Services		
Output:085601	Inpatient services		
Description of Outputs:	25,200 inpatients admissions; 85% bed occupancy rate and 5 day average stay for inpatients.	Total No. of Patients admitted: 7,269 Total maternal deliveries - 1,851	27,000 inpatients admissions; 85% bed occupancy rate and 5 day average stay for inpatients.

## Vote Summary

Vote, Vote Function Key Output	Approved Budge Planned outputs	2014 t and	l/15 Spending and Achieved by E		2015/16 Proposed Budget and Planned Outputs	
	The increase in all account of the risin inputs for hospital	ng cost of	5 6		The increase in allocation is account of the	on
Performance Indicators:						
No. of in patients admitted	25,200		7269		27,000	
Bed occupancy rate (inpatients)	85		101		95	
Average rate of stay for inpatients (no. days)	5		4		5	
Output Cos	st: UShs Bn:	1.399	UShs Bn:	0.294	UShs Bn:	1.887
Output:085602	Outpatient services					
Description of Outputs:	150,000 outpatien 50,000 specialized attendance. The in account of the con	l clinic crease is on	63,020 No. of Speciali	outpatients- zed outpatients-	100,000 outpatient's attenda 50,000 specialized clinic attendance. The increase is o account of the complexity of	n
	patients seen		20,414		patients seen	
<i>Performance Indicators:</i> No. of specialised outpatien attended to	ts 50,000		24,414		70,000	
No. of general outpatients attended to	120,000		63,020		150,000	
Output Cos	st: UShs Bn:	0.841	UShs Bn:	0.173	UShs Bn:	1.129
Output:085603	Medicines and heal	th supplies pr	ocured and dis	pensed		
Description of Outputs:	Medicines deliver and dispensed Sh 1,428,801,318		Value of Medic Medical suppli		Medicines delivered by NM and dispensed Shs. 1,628,801,318	S
Performance Indicators:						
Value of medicines received/dispensed (Ush bn)	1.428801318 )		0.278		1,628,801,318	
Output Cos	st: UShs Bn:	0.190	UShs Bn:	0.042	UShs Bn: (	).295
Output:085604	<b>Diagnostic services</b>					
Description of Outputs:	100,000 lab test 5, imagings 6,000 Ul		No. of Lab Tes No of X- rays- No of Ultra sou	1,610	109,000 lab test 10,000 xray imagings 6,000 Ultrasound	j
Performance Indicators:						
Patient xrays (imaging)	11,000		3,272		10,000	
No. of labs/tests	100,000		25,000		109,000	
1	st: UShs Bn:	0.279	UShs Bn:	0.061	UShs Bn: (	).448
Output: 085606	Prevention and reh					
Description of Outputs:	3,000 family plan 30,000 immunisat ANC visits,		Ante-Natal case Family palanni PMTCT cases VCT/RCT 21,1 No. of immunis	ng contacts- 691 - 748, 64 person	3,000 family planning contac 24,000 immunisations, 15,50 ANC visits,	
Performance Indicators:						
<i>Performance Indicators:</i> No. of people receiving family planning services	3,000		748		3,000	
No. of people receiving	3,000 30,000		748 9,978		3,000 24,000	

## **Vote Summary**

Vote, Vote Function Key Output	Approved Bud Planned outpu	get and	4/15 Spending and Achieved by En	-	2015/16 Proposed Budget Planned Outputs	
Output Cost.	UShs Bn:	0.212	UShs Bn:	0.055	UShs Bn:	0.355
Output:085681 S	taff houses cons	struction and re	habilitation			
Description of Outputs:	Construction of roomed staff ho		Construction of storeyed houses	0	Construction of 4 roomed staff house	
Performance Indicators:						
No. of staff houses constructed/rehabilitated	4		4		4	
Output Cost.	UShs Bn:	0.562	UShs Bn:	0.140	UShs Bn:	0.462
Vote Function Cost	UShs Bn:	5.63	8 UShs Bn:	1.225	UShs Bn:	5.578
Cost of Vote Services:	UShs Bn:	5.63	8 UShs Bn:	1.225	<mark>UShs Bn:</mark>	5.578

\* Excluding Taxes and Arrears

#### 2015/16 Planned Outputs

1- Procure Equipment, Delivery beds and other assorted equipment and furniture to improve the hospital work environment 2- Construct double roomed staff accommodation

3- Monitoring, Evaluation and Appraisal of Capital Development

### Table V2.2: Past and Medum Term Key Vote Output Indicators\*

	15	MTEF Projections					
Vote Function Key Output Indicators and Costs:	2013/14 Outturn	Approved Outturn by Plan End Sept		2015/16	2016/17	2017/18	
Vote: 164 Fort Portal Referral Hospi							
Vote Function:0856 Regional Referral	Hospital Serve						
Average rate of stay for inpatients (no. days)		5	4	5	5	5	
Bed occupancy rate (inpatients)		85	101	95	95	95	
No. of in patients admitted		25,200	7269	27,000	27,000	27,000	
No. of general outpatients attended to		120,000	63,020	150,000	150,000	100,000	
No. of specialised outpatients attended to		50,000	24,414	70,000	70,000	50,000	
Value of medicines received/dispensed (Ush bn)		1.428801318	0.278	1,628,801,318	1,828,801,318	1828801318	
No. of labs/tests		100,000	25,000	109,000	110,000	100,000	
Patient xrays (imaging)		11,000	3,272	10,000	13,000	11,000	
No. of antenatal cases		12,500	2,950	15,500	15,000	10,000	
No. of people immunised		30,000	9,978	24,000	24,000	24,000	
No. of people receiving family planning services		3,000	748	3,000	3,000	3,000	
No. of hospitals benefiting from the rennovation of existing facilities.		0	0				
No. reconstructed/rehabilitated general wards		0	0				
No. of staff houses constructed/rehabilitated		4	4	4	4	4	
No. of maternity wards constructed		0	0				
No. of maternity wards rehabilitated		0	0				
No. of OPD wards constructed		0	0				
No. of OPD wards rehabilitated		0	0				
No. of other wards constructed		0	0	0	0		

## **Vote Summary**

Vote Function Key Output		2014/15		MTEF F		
Indicators and Costs:	2013/14 Outturn	Approved Plan	Outturn by End Sept	2015/16	2016/17	2017/18
No. of other wards rehabilitated		0	0	0	1	
No. of theatres constructed		0	0			
No. of theatres rehabilitated		0	0			
Value of medical equipment procured (Ush Bn)		0.100	0			
Vote Function Cost (UShs bn)	4.545	5.638	1.225	5.578		4.216
Cost of Vote Services (UShs Bn)	4.545	5.638	1.225	5.578		4.216

#### Medium Term Plans

Procurement of Medical Equipments, Construction of staff quarters- Storyed double room staff houses

#### (ii) Efficiency of Vote Budget Allocations

To attract and retain critical staff; we need to construct reasonable and appropriate staff houses. This will provide more working hours, hence improve quality of service delivery and emphasize training and motivation.

#### Table V2.3: Allocations to Key Sector and Service Delivery Outputs over the Medium Term

	(i) Allocat	ion (Shs B	n)		(ii) % Vote	e Budget		
Billion Uganda Shillings	2014/15	2015/16	2016/17	2017/18	2014/15	2015/16	2016/17	2017/18
Key Sector	3.0	3.8	3.5	2.1	53.5%	<u>68.7%</u>	59.6%	50.6%
Service Delivery	3.5	4.6	4.3	2.6	61.8%	<u>82.0%</u>	74.6%	61.8%

Inpatient day Shs. 10,200 Outpatient Shs. 2,200 Investigation Shs. 2,220 Preventive intervention Shs. 2,220 Cost of Medicine per outpatient Shs. 2,200

#### Table V2.4: Key Unit Costs of Services Provided and Services Funded (Shs '000)

Unit Cost Description	Actual 2013/14	Planned 2014/15	Actual by Sept	Proposed 2015/16	Costing Assumptions and Reasons for any Changes and Variations from Plan
Vete Francisco 0056 Design	1 D . C				
Vote Function:0856 Regiona Oupatient services(Cost Per Outpatient)	u kejerrai nos	pital Services			Total Outpatients = General and specialized patients. Total Cost includes NWR and WR. (Includes allocated cost of management services)
Medicine cost Per standard output(SUO)					All outputs changed to an OPD Equivalance(Standard unit of Output) 1 Inpatient =15 Outpatients. Total Cost includes NWR and WR. Includes cost of ARVS and Antimalarials. (Includes allocated cost of management services)
Inpatient services( Cost per Inpatient Day)					Total Inpatient Days =ALOS X No. of patients admitted. Total Cost includes NWR and WR( Includes allocated cost of management services)
Cost Per Preventive Intervention					Total Preventive intervention = Total No. Immunization + FP+ANC Attendence. Total Cost includes NWR and WR ( Includes allocated cost of management services)

#### Health

## Vote: 164 Fort Portal Referral Hospital

### **Vote Summary**

Unit Cost	Actual	Planned	Actual	Proposed	Costing Assumptions and Reasons for
Description	2013/14	2014/15	by Sept	2015/16	any Changes and Variations from Plan
Cost per investigation					Total number of investigatins includes Lab, Xray and Ultrasound. Total Cost includes NWR and WR(Includes allocated cost of management services)

#### (iii) Vote Investment Plans

Purchase of machinery, equipment and furniture Shs.100,000,000/=, Construction of 12 double room staff houses mult- financial year project using Shs. 462,000.000/= in this financial year.

#### Table V2.5: Allocations to Capital Investment over the Medium Term

	(i) Allocat	ion (Shs B	n)		(ii) % Vote	e Budget		
Billion Uganda Shillings	2014/15	2015/16	2016/17	2017/18	2014/15	2015/16	2016/17	2017/18
Consumption Expendture(Outputs Provided)	4.9	5.0	3.3	1.9	87.6%	<mark>89.2%</mark>	57.4%	44.9%
Investment (Capital Purchases)	0.7	0.6	2.5	2.3	12.4%	10.8%	42.6%	<u>55.1%</u>
Grand Total	5.6	5.6	5.8	4.2	100.0%	<u>100.0%</u>	100.0%	100.0%

N/A

#### Table V2.6: Major Capital Investments

#### (iv) Vote Actions to improve Priority Sector Outomes

1-Increased deliveries in health facilities

2-Children under one year old protected against life threatening diseases

3- Health facilities receive adequate stocks of Essential Medicines and Health Supplies (EMHS)

#### Table V2.7: Priority Vote Actions to Improve Sector Performance

2014/15 Planned Action	s: 2014/15 Actions by Sept:	2015/16 Planned Actions:	MT Strategy:				
Sector Outcome 3: Health facilities receive adequate stocks of essential medicines and health supplies (EMHS)							
Vote Function: 08 56 Reg	gional Referral Hospital Services						
VF Performance Issue:	Under staffed structures						
Reports on staffing and recruitment requests submitted to MoH/HSC	Authority has been given by MPS to recruit 41 additional staff	Reports on staffing and recruitment requests submitted to MoH/HSC	Improve staff accomodation to attract and retain staff				

### V3 Proposed Budget Allocations for 2015/16 and the Medium Term

This section sets out the proposed vote budget allocations for 2015/16 and the medium term, including major areas of expenditures and any notable changes in allocations.

#### Table V3.1: Past Outturns and Medium Term Projections by Vote Function\*

		2014/15		MTEF Budget Projections		
	2013/14 Outturn	Appr. Budget	Spent by End Sept	2015/16	2016/17	2017/18
Vote: 164 Fort Portal Referral Hospital						
0856 Regional Referral Hospital Services	4.545	5.638	1.225	5.578	5.822	4.216
Total for Vote:	4.545	5.638	1.225	5.578	5.822	4.216

#### (i) The Total Budget over the Medium Term

Mid-term Budget 2015-2016 to 2015-2016TOTAL Wage Recurrent Shs.3,432,215,000/=3,432,215,000/=3,532,215,000/=10,396,645,000/=

## **Vote Summary**

Non Wage Recurrent1,066,000,000/=1,860,000,000/=1,860,000,000/=4,786,000,000/= Development600,000,000/=2,050,000,000/=3,050,000,000/= Shs. 5,836,000,000/= TOTAL21,018,645,000/=

#### (ii) The major expenditure allocations in the Vote for 2015/16

-In the medium term the Hospital requires

- Wage Budget of Shs. 10,396,645,000/= to cater for the wages of 350 Hospital Staff

- Non Wage Recurrent Budget of Shs. 4,786,000,000/= to cater for the operations of the Hospital -Development Budget of Shs. 5,836,000,000/= to Construct staff quarters to Accommodate the critical cadres of staff

TOTAL Shs. 21,018,645,000/=

The biggest problem of the hospital is Staff accommodation. In the medium term we expect to construct about 30 units to accommodate 30 members of staff.

- Budget Allocation to the Hospital has been reduced, some Projects are being completed and start of new ones is underway e.g construction of staff quarters which requires different levels of funding. There will be increases to services area, to cater for the increasing number of patients leading to increased operational costs

-1.Wage shortfall of 818,000,0000

2.Construction of staff accommodation ( 25 double roomed at Unit cost of Ush 231,000,000/= Adjusted with 10% for earthquake prone areas

3.Construction of sewerage plant

4. Construction Of Accident and Emergency Unit with ICU

5.Construction of EYE/ENT Unit

6. Construction of Surgical and Orthopedic Ward with its own Theatre

7. There is need, to provide additional funds to the hospital for production of the appliances and to NMS to purchase the workshop consumables which the hospital can order as and when is required. The hospital requires an additional UGX. 294,000,000/= in the medium term.

8.UGX. 192 million per year is required for hospital staff duty facilitation, this adds up to UGX. 576 million, in the medium term.

9.Solid Waste Management: The hospital is not connected to the sewerage line of NWSC which results in added costs of cesspool emptying. The hospital needs an average of UGX. 2,400,000 per month which translates to UGX. 28,800,000 per annum. The amount is bound to increase when the new constructed units become operational. This translates to UGX.

### (iii) The major planned changes in resource allocations within the Vote for 2015/16

- Budget Allocation to the Hospital has been reduced, some Projects are being completed and start of new ones is underway e.g construction of staff quarters which requires different levels of funding. There will be increases to services area, to cater for the increasing number of patients leading to increased operational costs

-1.Wage shortfall of 818,000,0000

2.Construction of staff accommodation (25 double roomed at Unit cost of Ush 231,000,000/= Adjusted with 10% for earthquake prone areas

3.Construction of sewerage plant

4. Construction Of Accident and Emergency Unit with ICU

5.Construction of EYE/ENT Unit

6. Construction of Surgical and Orthopedic Ward with its own Theatre

7. There is need, to provide additional funds to the hospital for production of the appliances and to NMS to

## **Vote Summary**

purchase the workshop consumables which the hospital can order as and when is required. The hospital requires an additional UGX. 294,000,000/= in the medium term.

8.UGX. 192 million per year is required for hospital staff duty facilitation, this adds up to UGX. 576 million, in the medium term.

9.Solid Waste Management: The hospital is not connected to the sewerage line of NWSC which results in added costs of cesspool emptying. The hospital needs an average of UGX. 2,400,000 per month which translates to UGX. 28,800,000 per annum. The amount is bound to increase when the new constructed units become operational. This translates to UGX.

#### Table V3.2: Key Changes in Vote Resource Allocation

Changes in Budget Allocations and Outputs from 2015/16			2014/15 Planned Levels: 2016/17 2017/18		Justification for proposed Changes in Expenditure and Outputs			
		l Referral Hospital	Services					
Output:	0856 01 Inpatie							
UShs Bn:		UShs Bn:		UShs Bn:		Increasing population and cost of		
	ojections are	The increment in t		The incremen		medical goods		
likely affect		number of patients		number of pat				
	e Planners need	recruitment of Sta		recruitment of				
to consider j		workers) means that we		workers) means that we				
growth trends.		have to give Employees Financial motivation to		have to give Employees Financial motivation to				
		convince them to						
		longer hours per day.		convince				
Output:	0856 02 Outpat							
UShs Bn:	-	UShs Bn:	-0.154	UShs Bn:	-0.454			
		With improved pe		OSIIS DII.	-0.454			
of the lower		of the lower Healt						
		Facilities, We expe						
patients to g		patients to go to h						
centre iii &		centre iii & iv,the						
		leading to reduced						
	general cases	in OPD for genera						
	e attending the	and see more atter						
specialised of	clinics which are	specialised clinics	which are					
more expense	sive	more expensive						
Output:	0856 05 Hospit	al Management and	l support se	rvices				
UShs Bn:	-1.304	UShs Bn:	-1.352	UShs Bn:	-1.652	The funds for wage which were allocated under this output were re-distributed		
						under the other hospital outputs hence the reduction.		
Output:	0856 06 Preven	tion and rehabilitat	ion services	5				
UShs Bn:	0.143	UShs Bn:	0.112	UShs Bn:	-0.088			
Output:	0856 07 Immur	isation Services						
UShs Bn:	0.115	UShs Bn:	-0.037	UShs Bn:	0.115			

### V4: Vote Challenges for 2015/16 and the Medium Term

This section sets out the major challenges the vote faces in 2015/16 and the medium term which the vote has been unable to address in its spending plans.

1.Wage shortfall of 818,000,0000

2.Construction of staff accommodation (25 double roomed at Unit cost of Ush 187,000,000.00 Adjusted with 10% for earthquake prone areas

3.Construction of sewerage plant

## Vote Summary

Health

4. Construction Of Accident and Emergency Unit with ICU

5. Construction of EYE/ENT Unit

6.Construction of Surgical and Orthopedic Ward with its own Theatre

7. There is need, to provide additional funds to the hospital for production of the appliances and to NMS to purchase the workshop consumables which the hospital can order as and when is required. The hospital requires an additional UGX. 294,000,000/= in the medium term.

8.UGX. 192 million per year is required for hospital staff duty facilitation, this adds up to UGX. 576 million, in the medium term.

9.Solid Waste Management: The hospital is not connected to the sewerage line of NWSC which results in added costs of cesspool emptying. The hospital needs an average of UGX. 2,400,000 per month which translates to UGX. 28,800,000 per annum. The amount is bound to increase when the new constructed units become operational.

#### **Table V4.1: Additional Output Funding Requests**

Additional Requirements for Funding and Outputs in 2015/16:	Justification of Requirement for Additional Outputs and Funding				
Vote Function:0881 Regional Referral Hospital Services         Output:       0856 81 Staff houses construction and rehabilitation					
UShs Bn: Funding for orthopedic workshops and staff facilitated to come to place of work. Staff accommodation constructed. This will improve staff motivation, hence efficiency.	In order to address Staff attraction and retention Strategy over a 3 year period there is need to provide additional funding for construction of staff accommodation for at least 200 units at unit cost of Ushs. 110, 000,000, in the medium this will require 22 billion, in the medium term.				

This section discusses how the vote's plans will address and respond to the cross-cutting policy, issues of gender and equity; HIV/AIDS; and the Environment, and other budgetary issues such as Arrears and NTR..

#### (i) Cross-cutting Policy Issues

(i) Gender and Equity

**Objective:** Reduction of maternal and neonatal mortality

*Issue of Concern* : High maternal and neonatal mortality rates.

#### Proposed Intervensions

Under reproductive health, emphasis will be on rolling out of the road map for reduction of maternal and neonatal mortality. This will be done through; procuring and distributing EMoC medicines, supplies, and equipment, supporting the mobilization of blood for emergency obstetric and new born care and conducting maternal and perinatal death audits to address gaps and improve quality of care.

Budget Allocations UGX billion 0.345

Performance Indicators Reduced maternal and neonatal mortality rates.

#### **Objective:** To address the environmental issues

Issue of Concern : Solid Waste Management

#### Proposed Intervensions

The hospital is not connected to the sewerage line of NWSC which results in added costs of cesspool emptying. The hospital needs an average of UGX. 2,400,000 per month which translates to UGX. 28,800,000 per annum. The amount is bound to increase when the new constructed units become operational.

## Health

## Vote: 164 Fort Portal Referral Hospital

### **Vote Summary**

Budget Allocations UGX billion 0.028

*Performance Indicators* A clean environment and quality service deliverly, efficiency and effectiveness of activities.

#### **Objective:** HIV/AIDS prevention will be enhanced

*Issue of Concern* : HIV/AIDS preverance has increased.

#### Proposed Intervensions

-HIV/AIDS prevention will be enhanced through rolling out Village health teams to more districts, carrying out radio spot messages and distribution of IEC materials. The funding is expected to come from Government of Uganda and the Global fund for AIDS, TB and Malaria.

- Village health teams, the ministry will roll out Village Health Teams and construct incinerators in health facilities.

*Budget Allocations* UGX billion 0.068

Performance Indicators	Number of Safe male circumcision conducted, number of HPV			
	Vaccination and provision of Tetanus Toxoid vaccine to women			
	in reproductive age, number of HIV tests and persons in on care			
	and introduced to ARV.			

#### (ii) HIV/AIDS

#### **Objective:** TB prevention

Issue of Concern : The desease is air born and contegious

Proposed Intervensions

MDR activities

Budget Allocations UGX billion 0.345

*Performance Indicators* Number of patients on medication and care.

#### (iii) Environment

**Objective:** Solid Waste Management

Issue of Concern : A lot of sold waste is generates which need to be Managed

#### Proposed Intervensions

The hospital is not connected to the sewerage line of NWSC which results in added costs of cesspool emptying. The hospital needs an average of UGX. 2,400,000 per month which translates to UGX. 28,800,000 per annum. The amount is bound to increase when the new constructed units become operational.

Budget Allocations UGX billion 0.028

Performance Indicators Clean environment and efficiency

### (ii) Payment Arrears

The table below shows all the payment arrears outstanding for the Vote:

Payee

Payment Due Date Amount (UShs Bn)

Vote Summary		
UMEME UGANDA LIMITED	30/06/2013	0.01
National Water and Sewarage Cooperation	30/06/2013	0.00
	Total:	0.011

They were incurred over several years due to under budgeting. We are installing rain water harvesting tanks, and relaying new water piping systems to avoid loss of water in leakages due to old pipes.

#### (ii) Non Tax Revenue Collections

The table below shows Non-Tax Revenues that will be collected under the Vote:

Source of NTR	UShs Bn	2013/15 Actual	2014/15 Budget	2014/15 Actual by Sept	2015/16 Projected
Other Fees and Charges		0.000	0.200		0.300
	Total:	0.000	0.200		0.300