I. VOTE MISSION STATEMENT

To provide Comprehensive highly Specialized Health Care Services, Conduct Tertiary Health Training, Research and Contribute to National Health Policy.

II. STRATEGIC OBJECTIVE

To contribute to improved Human Capital Development through specialist support supervision, digitalization, human resource planning, collaborations and partnerships, research and innovations for improved quality of life among people in Ankole Sub Region.

III. MAJOR ACHIEVEMENTS IN 2022/23

The hospital received 1,550,000,000/- for construction and was able to.

1. Continue with the multi-year project of constructing 32 staff housing units. These are two blocks each having sixteen housing units. Percentage completion of civil works is at 60.

2. Regarding the retooling funds which amounted to 0.120/-, a 150kva generator was procured specifically for the Magnetic Resonance Imaging (MRI) machine.

However, there were other achievements courtesy of donors and MoH.

- 1. Received and functionalized a new back up oxygen plant
- 2. Laboratories were completed and are now functional
- 3. Oxygen plant and a Generator at the isolation unit

5. New CT scan and MRI

Clinical performance as per Q2.

Budget Output: 320009 Diagnostic Services

- 1). 69,848 Laboratory and pathological tests were done.
- 2). 509 x-ray examinations done.
- 3). 489 Ultrasound scans were done.
- 4). 537 CT scans were done.
- 5). 3,732 Blood transfusions were done.
- 6). 184 patients Renal Dialyses were carried out.
- 7). 20 ECHOs were carried out.
- 8). 150 ECGs were done.

Budget Output: 320020 HIV/AIDs Research, Healthcare & Outreach Services

- 1). 1,982 Clients were counselled and tested for HIV against a quarterly target of
- 2). 100% were initiated and were on care.
- 3). 95% Viral Load Suppression was achieved.
- 4). 88% exposed children received PCR test.
- 5). No home visit was done.
- 6). 2 Capacity Building trainings were done.
- 7). 3 Data Validations were done.

Budget Output: 320022 Immunization Services

- 1). 5,092 Immunization Contacts were done
- 2). 3,921 Children were immunized.
- 3). 78 Persons were vaccinated against COVID-19

Budget Output: 320023 Inpatient Services

1). 8,229 Patients were admitted during the quarter.

2). Average Length of Stav was 4.

3). Bed Occupancy Rate was 78%

4). 1,362 Major operations were done.

5). 944 Minor operations were done.

Budget Output: 320027 Medical and Health Supplies

1). 61.3% Medicines were in stock

2). There was no reduction in stock outs

3). Drug expiries were managed to 0.0018%

Budget Output: 320033 Outpatient Services

284 General OPD attendances were registered

136 patients were handled in the Specialized clinics

Operations were carried out in OPD

Referrals in were registered

There were no referrals out

Budget Output: 320034 Prevention and Rehabilitation services

1). 1,361 ANC attendances were registered during the quarter

- 2). 2,484 HCT clients were seen
- 3). 1,916 Postnatal mothers were handled
- 4). 601 Family Planning seekers were attended to

5). 1,779 Deliveries were conducted.

6). 647 EMTCT clients were attended to.

Medical Equipment Maintenance Workshop has three (3) staff who carry out routine maintenance of equipment, trainings, inventory and calibration. Inventory was done and updated in the NOMAD. The workshop needs specific funding in order for it to attain full functionalization, which will include support to the lower health facilities.

Activities conducted by Internal Audit in Q2 of FY 22/23 include 1). Audit of COAG-Labs support activities conducted in the various health facilities.

2). Audit of GAVI-Immunization and vaccines activities.

3) Internal Audit prepared a quarterly report on execution of the work plan. A Top Management meeting was held to discuss issues raised in the report. A copy of the report was submitted to the Office of the Internal Auditor General.

Budget Output: 320002 Administrative and Support Services

- 1). 1 Hospital Management Board meeting was held during the quarter.
- 2). 3 Top Management meetings were held.
- 3). Different Departments and units held meetings.
- 4). Support Supervision was conducted both internally and externally.
- 5). A number of PDU activities were carried out including procurement meetings and procurement of assorted goods and services.

6). The hospital prepared the Budget Framework Paper and submitted it.

Budget Output:000005 Human Resource Management

- 1). Submitted ten vacant positions to Secretary, HSC to be filled on replacement basis.
- 2). Submitted to Accountant General the Master Data verification for the hospital.
- 3). Computed and submitted a projected shortfall of 876, 181,916 to PS, MoPS.

4). Salary and pension paid

- 5). Computed and submitted the wage, pension and gratuity estimates for FY 2023-2024 to PS, MoPS.
- 6). Computed and submitted quarter two wage bill performance report to PS, MoPS and PSST, MoFPED.
- 7). Enlisted all the G2G staff on the new biometric machine in order to monitor attendance to duty.
- 8). Disciplinary action taken and enforced (3). Warning letters issued and some two staff deleted from the payroll for abandonment of duty.

9). Submitted 38 staff to HSC for confirmation on due date.

10). Initiated the printing of copies of the Hospital Client Charter for the hospital and was approved by the Board. 11). Submitted quarterly staff appraisal performance analysis to Public Service

IV. MEDIUM TERM BUDGET ALLOCATIONS

Table 4.1: Overview of Vote Expenditure (Ushs Billion)

		2022	2/23	2023/24		MTEF Budge	et Projections	
		Approved Budget	Spent by End Dec	Budget Estimates	2024/25	2025/26	2026/27	2027/28
D	Wage	8.848	4.198	9.425	9.896	10.886	11.974	13.172
Recurrent	Non-Wage	9.382	3.491	9.235	15.967	19.161	22.993	27.362
Dent	GoU	1.670	0.322	0.120	0.120	0.144	0.166	0.182
Devt.	Ext Fin.	0.000	0.000	0.000	0.000	0.000	0.000	0.000
	GoU Total	19.900	8.011	18.780	25.983	30.190	35.133	40.715
Total GoU+E	xt Fin (MTEF)	19.900	8.011	18.780	25.983	30.190	35.133	40.715
	Arrears	0.053	0.018	0.033	0.000	0.000	0.000	0.000
	Total Budget	19.952	8.029	18.813	25.983	30.190	35.133	40.715
Total Vote Bud	lget Excluding Arrears	19.900	8.011	18.780	25.983	30.190	35.133	40.715

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

	Draft Budget Esti	mates FY 2023/24	
Billion Uganda Shillings	Recurrent	Development	
Programme:12 Human Capital Development	18.660	0.120	
SubProgramme:02 Population Health, Safety and Management	18.660	0.120	
Sub SubProgramme:01 Regional Referral Hospital Services	18.660	0.120	
001 Hospital Services	6.495	0.000	
002 Support Services	12.165	0.120	
Total for the Vote	18.660	0.120	

V. PERFORMANCE INDICATORS AND PLANNED OUTPUTS

Table 5.1: Performance Indicators

Programme: 12 Human Capital Development

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: Laboratory quality management system in place

Programme Intervention: 12030105 Improve the functionality of the health system to deliver quality and affordable preventive, promotive, curative and palliative health care services focusing on:

Indicator Name	Indicator Measure	Base Year	Base Level	2022/23		Performance Targets
				0	Q2 Performance	2023/24
Percentage of targeted laboratories accredited	Percentage	2020/2021	60%	85%	50%	80%

PIAP Output: Laboratory quality management system in place

Programme Intervention: 12030105 Improve the functionality of the health system to deliver quality and affordable preventive, promotive, curative and palliative health care services focusing on:

Indicator Name	Indicator Measure	Base Year	Base Level	2022/23		Performance Targets
				0	Q2 Performance	2023/24
Percentage of targeted laboratories accredited	Percentage	2020/2021	60%	75%	50%	80%

Budget Output: 320020 HIV/AIDs Research, Healthcare & Outreach 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	2022/23		Performance Targets	
				Target	Q2 Performance	2023/24	
ART Coverage (%)	Percentage	2020/2021	95%			97%	
HIV incidence rate	Rate	2020/2021	438			341	
HIV prevalence Rate (%)	Percentage	2020/2021	5.4%			4.2%	
Malaria incidence rate (cases	Rate	2020/2021	1,440			1,300	
Malaria prevalence rate (%)	Percentage	2020/2021	5.8%			90%	
TB incidence rate per 1,000	Rate	2020/2021	20			358	

Sub SubProgramme: 01 Regional Referral Hospital Services

Department: 001 Hospital Services

Budget Output: 320020 HIV/AIDs Research, Healthcare & Outreach 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	2022/23		Performance Targets
				0	Q2 Performance	2023/24
Viral Load suppression (%)	Percentage	2020/2021	97%			98%

Budget Output: 320022 Immunisation Services

PIAP Output: Target population fully immunized

Programme Intervention: 12020106 Increase access to immunization against childhood diseases

Indicator Name	Indicator Measure	Base Year	Base Level	2022/23		Performance Targets
				0	Q2 Performance	2023/24
% Availability of vaccines (zero stock outs)	Percentage	2020/2021	85%	85%	95%	90%
% of Children Under One Year Fully Immunized	Percentage	2020/2021	90%	90%	100%	95%
% of functional EPI fridges	Percentage	2020/2021	85%	90%	97%	90%
% of health facilities providing immunization services by level	Percentage	2020/2021	80%	90%	90%	85%

Budget Output: 320023 Inpatient 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	2022/23		Performance Targets
				Target	Q2 Performance	2023/24
ART Coverage (%)	Percentage	2020/2021	95%			97%
HIV incidence rate	Rate	2020/2021	438			341
HIV prevalence Rate (%)	Percentage	2020/2021	5.4			4.2%
Malaria incidence rate (cases	Rate	2020/2021	1,440			1,300
Malaria prevalence rate (%)	Percentage	2020/2021	5.8%			90%
TB incidence rate per 1,000	Rate	2020/2021	20			358
Viral Load suppression (%)	Percentage	2020/2021	97%			98%

Sub SubProgramme: 01 Regional Referral Hospital Services

Department: 001 Hospital Services

Budget Output: 320033 Outpatient Services

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

Programme Intervention: 12030105 Improve the functionality of the health system to deliver quality and affordable preventive, promotive, curative and palliative health care services focusing on:

Indicator Name	Indicator Measure	Base Year	Base Level	2022/23		Performance Targets
				0	Q2 Performance	2023/24
% of HIV positive pregnant women initiated on ARVs for EMTCT	Percentage	2020/2021	100%			95%

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

Programme Intervention: 12030114 Reduce the burden of communicable diseases with focus on high burden diseases (Malaria, HIV/AIDS, TB, Neglected Tropical Diseases, Hepatitis), epidemic prone diseases and malnutrition across all age groups emphasizing Primary Health Care Approach

Indicator Name	Indicator Measure	Base Year	Base Level	2022/23		Performance Targets
				Target	Q2 Performance	2023/24
ART Coverage (%)	Percentage	2020/2021	95%			97%
HIV incidence rate	Rate	2020/2021	438			341
HIV prevalence Rate (%)	Percentage	2020/2021	5.4%			4.2%
Malaria incidence rate (cases	Rate	2020/2021	1,440			1,300
Malaria prevalence rate (%)	Percentage	2020/2021	5.8%			90%
TB incidence rate per 1,000	Rate	2020/2021	20			358
Viral Load suppression (%)	Percentage	2020/2021	97%			98%

Budget Output: 320034 Prevention and Rehabilitaion services

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

Programme Intervention: 12030114 Reduce the burden of communicable diseases with focus on high burden diseases (Malaria, HIV/AIDS, TB, Neglected Tropical Diseases, Hepatitis), epidemic prone diseases and malnutrition across all age groups emphasizing Primary Health Care Approach

Indicator Name	Indicator Measure	Base Year	Base Level	2022/23		Performance Targets
				Target	Q2 Performance	2023/24
ART Coverage (%)	Percentage	2020/2021	95%			97%
HIV incidence rate	Rate	2020/2021	438			341
HIV prevalence Rate (%)	Percentage	2020/2021	5.4%			4.2%
Malaria incidence rate (cases	Rate	2020/2021	1,440			1,300

Sub SubProgramme: 01 Regional Referral Hospital Services

Department: 001 Hospital Services

Budget Output: 320034 Prevention and Rehabilitaion 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	2022/23		Performance Targets
					Q2 Performance	2023/24
Malaria prevalence rate (%)	Percentage	2020/2021	5.8%			90%
TB incidence rate per 1,000	Rate	2020/2021	20			358
Viral Load suppression (%)	Percentage	2020/2021	97%			98%

Department: 002 Support Services

Budget Output: 000001 Audit and Risk Management

PIAP Output: Service delivery monitored

Programme Intervention: 12030102 Establish and operationalize mechanisms for effective collaboration and partnership for UHC at all levels

Indicator Name	Indicator Measure	Base Year	Base Level	202	2/23	Performance Targets
				Target	Q2 Performance	2023/24
Approved Hospital Strategic Plan in place	Yes/No	2020/2021	Yes	1	1 Strategic Plan is in place	Yes, it's in place
Audit workplan in place	Yes/No	2020/2021	1	4	Yes. There is a workplan in place	1
No. of performance reviews conducted	Number	2020/2021	4			4
Number of technical support supervisions conducted	Number	2020/2021	33			33
Number of audit reports produced	Number	2020/2021	4	4	1	4
Number of audits conducted	Number	2020/2021	4			4
Number of Health Facilities Monitored	Number	2020/2021	33	1	1	33
Number of monitoring and evaluation visits conducted	Number	2020/2021	7			13
Number of quarterly Audit reports submitted	Number	2020/2021	1	4	1	4
Proportion of clients who are satisfied with services	Proportion	2020/2021	65%	75%	69%	70%
Proportion of patients who are appropriately referred in	Proportion	2020/2021	1200	Above 80%	75%	1288
Proportion of quarterly facility supervisions conducted	Proportion	2020/2021	33	100%	80%	33

Sub SubProgramme: 01 Regional Referral Hospital Services

Department: 002 Support Services

Budget Output: 000001 Audit and Risk Management

PIAP Output: Service delivery monitored

Indicator Name	Indicator Measure	Base Year	Base Level	202	2/23	Performance Targets
				Target	Q2 Performance	2023/24
Risk mitigation plan in place	Yes/No	2020/2021	1	1	Yes	1

Budget Output: 000005 Human Resource Management

PIAP Output: Human resources recruited to fill vacant posts

Programme Intervention: 12030105 Improve the functionality of the health system to deliver quality and affordable preventive, promotive, curative and palliative health care services focusing on:

Indicator Name	Indicator Measure	Base Year	Base Level	2022	2/23	Performance Targets
					Q2 Performance	2023/24
Staffing levels, %	Percentage	2020/2021	82%	94%	85%	84%

Budget Output: 000008 Records Management

PIAP Output: Comprehensive Electronic Medical Record System scaled up

Programme Intervention: 12030105 Improve the functionality of the health system to deliver quality and affordable preventive, promotive, curative and palliative health care services focusing on:

Indicator Name	Indicator Measure	Base Year	Base Level	202	2/23	Performance Targets
				0	Q2 Performance	2023/24
% of hospitals and HC IVs with a functional EMRS	Percentage	2020/2021	90%	90%	90%	95%

Budget Output: 320002 Administrative and Support Services

PIAP Output: Governance and management structures reformed and functional

Indicator Name	Indicator Measure	Base Year	Base Level	202	2/23	Performance Targets
				Target	Q2 Performance	2023/24
Approved strategic plan in place	Number	2020/2021	1	1	1	1
Hospital Board in place and functional	Number	2020/2021	1	1	1	1
No. of functional Quality Improvement committees	Number	2020/2021	1			1
Risk mitigation plan in place	Number	2020/2021	1	1	1	1

Sub SubProgramme: 01 Regional Referral Hospital Services

Department: 002 Support Services

Budget Output: 320011 Equipment maintenance

PIAP Output: Health facilities at all levels equipped with appropriate and modern medical and diagnostic equipment.

Programme Intervention: 12030105 Improve the functionality of the health system to deliver quality and affordable preventive, promotive, curative and palliative health care services focusing on:

Indicator Name	Indicator Measure	Base Year	Base Level	202	2/23	Performance Targets
				Target	Q2 Performance	2023/24
% functional key specialized equipment in place	Percentage	2020/2021	80%	80%	85%	85%
% recommended medical and diagnostic equipment available and functional by level	Percentage	2020/2021	80%	85%	87%	85%
A functional incinerator	Status	2020/2021	1	1	It is functional	1
Medical equipment inventory maintained and updated	Text	2020/2021	Yes	Inventory updated 95%	Inventory was updated	Inventory to be updated in the NOMAD system
Medical Equipment list and specifications reviewed	Text	2020/2021	1	Review to be done 90%	· ·	1
Medical Equipment Policy developed	Text	2020/2021	1	Policy fully reviewed and disseminated	of the hospital	1
No. of fully equipped and adequately funded equipment maintenance workshops	Number	2020/2021	1	1	1	1
No. of health workers trained	Number	2020/2021	4	300	10	5
Proportion of departments implementing infection control guidelines	Proportion	2020/2021	90%	90%	96%	100%

Budget Output: 320021 Hospital management and support services

PIAP Output: Governance and management structures (Support for health service delivery) strengthened, improved and functionalised.

Indicator Name	Indicator Measure	Base Year	Base Level	202	2/23	Performance Targets
				0	Q2 Performance	2023/24
proportion of patients who are satisfied with the services	Proportion	2020/2021	65%	80%	69%	70%

Sub SubProgramme: 01 Regional Referral Hospital Services

Project: 1578 Retooling of Mbarara Regional Referral Hospital

Budget Output: 000003 Facilities and Equipment Management

PIAP Output: Health facilities at all levels equipped with appropriate and modern medical and diagnostic equipment.

Indicator Name	Indicator Measure			202	2022/23	
				Target	Q2 Performance	2023/24
% functional key specialized equipment in place	Percentage	2020/2021	80%	85%	85%	85%
% recommended medical and diagnostic equipment available and functional by level	Percentage	2020/2021	80%	85%	87%	85%
A functional incinerator	Text	2020/2021	1	1	It is functional	1
Medical equipment inventory maintained and updated	Text	2020/2021	Yes	90% of all inventory up dated, reviewed and maintained.	updated	Inventory to be updated in the NOMAD system
Medical Equipment list and specifications reviewed	Text	2020/2021	1	90% review and update of the list	,	1
Medical Equipment Policy developed	Text	2020/2021	1	Policy reviewed and fully disseminated	of the hospital	1
No. of fully equipped and adequately funded equipment maintenance workshops	Number	2020/2021	1	1	1	1
No. of health workers trained	Number	2020/2021	4	300	10	5
Proportion of departments implementing infection control guidelines	Number	2020/2021	70%	85%	96%	100%

VI. VOTE NARRATIVE

Vote Challenges

- 1. Inadequate non-wage budget. Need additional wage of 2.0bn.
- 2. Lack of land for hospital expansion, growth and development. Need 1.2bn to secure land.
- 3. There is need to expand the hospital to meet the growing population needs. Phase two hospital expansion is needed.
- 4. Continuous stock out of medicines and sundries.

5. Lack of a fully functional Medical Equipment Maintenance Workshop associated with frequent equipment breakdowns and poor equipment functionality. Need 0.400bn for full functionalization.

6. Lack of a neonatal ward. Need 2.5bn to construct, which is aimed at offering better services for neonatal health to help reduce neonatal mortality rate.

- 7. Limited staff accommodation affecting staff retention, attraction, duty coverage and attendance to emergencies especially at night.
- 8. Old and dilapidated infrastructure with limited space causing overcrowding.
- 9. Power black outs associated with high dependence on generators leading to high fuel consumption.

10. Restrictive staff establishment structure associated with few staff and heavy workload.

Plans to improve Vote Performance

- 1. Work within the provisions of the approved budget to achieve service delivery targets and plans.
- 2. Quality improvement activities implementation aimed at improving patient outcomes.
- 3. Continue with construction of the 32 out of the 56-unit staff house project already at slab level, renovations and civil works.
- 4. Submit the recruitment plan and fill vacant critical staff positions.
- 5. Strengthening diagnostic services to improve prescription, minimize medicine wastage and improve patient treatment outcomes.
- 6. Strengthen support supervision to the lower facilities and community interventions for social mobilization and sensitization.
- 7. Strengthen Performance Management activities that include existing staff attendance to duty to ensure maximum output.

8. Strengthen Stakeholder engagements that include Must, Implementing Partners and other healthcare service providers, teaching institutions, districts in Ankole region and others outside the region, among others.

VII. Off Budget Support and NTR Projections

Table 7.1: Off Budget Support by Project and Department

N/A

Revenue Code	Revenue Name	FY2022/23	Projection FY2023/24
142122	Sale of Medical Services-From Private Entities	0.000	0.000
142153	Utilities-From Government Units	0.350	0.000
142155	Sale of drugs-From Government Units	0.300	0.000
142162	Sale of Medical Services-From Government Units	0.750	1.400
Total	·	1.400	1.400

Table 7.2: NTR Collections (Uganda Shillings Billions)

VIII. VOTE CROSS CUTTING POLICY AND OTHER BUDGETARY ISSUES

Table 8.1: Cross- Cutting Policy Issues

i) Gender and Equity

OBJECTIVE	To provide inclusive, equal and accessible healthcare services to all deserving and critically ill patients despite of their gender, age, sex and sexual orientation, socio economic status of otherwise.
Issue of Concern	Inadequate equal, inclusive and accessible healthcare to all deserving and critically ill patients despite their gender and its other traits
Planned Interventions	 Gender-based Violence (GBV) Prevention GBV Case Identification and First-line Support GBV Clinical Response by implementing post-violence clinical care services Work with Civil Society organs
Budget Allocation (Billion)	0.004
Performance Indicators	1. Number of people receiving post-gender-based violence (GBV) clinical care based on the minimum package. (600)

ii) HIV/AIDS

Maintain viral load suppression among all HIV positive individuals initiated on ART above 95%.
Reduction in Viral Load suppression to below 95%.
 Client-centered interventions to ensure all clients receive all essential care and continuous antiretroviral treatment "First 180 Days" Package: Durable and continuous treatment of New Clients DSD models of family-based care Tracking results
0.003
No. of adults and children currently receiving ART (10,655) Adults and children newly enrolled on ART (398) No. of ART patients with suppressed VL results (<1,000 copies/ml) documented in the medical or laboratory records/LIS in the past 12 months(9684)
To ensure total elimination of mother to child transmission / infections by implementing E-MTCT
Existence of cases of mother to child transmissions.
 Implement prevention and testing activities in MNCH setting Sustain family planning/HIV Integration to prevent unintended pregnancies Optimize ARV formulations and viral suppression for pregnant and breastfeeding women Provide HIV testing
0.004
No of pregnant women with known HIV status at ANC1 (2000) No of HIV + pregnant women who receiving ART to reduce risk of MTCT during pregnancy (395) No of infants born to HIV + women to receive a first virologic HIV test by 12 mths of age (395)
To reduce incidence of HIV infections by implementing various HIV prevention and HIV testing strategies at facility and community level.

Issue of Concern	Increasing incidences of HIV infections.
Planned Interventions	 Other sexual prevention like adapt HIV prevention programming focusing on increased interpersonal communication Improve Key populations' access to condoms and lubricants Refer KP clients to STI screening, prevention, treatment, family planning
Budget Allocation (Billion)	0.008
Performance Indicators	No. of people who received HIV testing services and received their results (5,000) % HIV positive individuals identified and initiated on ART (95%) No. of individuals who were newly enrolled on (oral) antiretroviral pre-exposure prophylaxis (PrEP) (393)

iii) Environment

OBJECTIVE	To provide a beautiful environment to aid not only in patient healing but in providing a conducive work					
	environment for health workers and visitors.					
Issue of Concern	Landscape the hospital to improve the compound					
Planned Interventions	1. Do landscaping the hospital compound to make it beautiful					
	2. Plant more trees and shrubs					
	3. Trim existing plants					
	4. Plant trees below the cliff to stop soil erosion					
Budget Allocation (Billion)	0.020					
Performance Indicators	1. Landscaped compound					
	2. Fruit trees and shrubs planted					
	3. Existing plants and flower plants well-trimmed.					
	4. Existing cliff expansion stopped by planting trees to stop soil erosion					
OBJECTIVE	To provide environmentally friendly health services					
Issue of Concern	Inadequate waste management right from the source of generation to the disposal point.					
Planned Interventions	1. Avail color coded waste bins					
	2. Carry out waste management assessments					
	3. Train health workers on waste management especially segregation					
	4. Maintenance and functionality of the incinerator					
	5. Work with the City Council to take domestic waste					
Budget Allocation (Billion)	0.006					
Performance Indicators	1. No of color-coded waste bins and liners availed in different sizes (100)					
	2. No of trainings conducted for health workers and waste handlers on segregation					
	3. Functional and well-maintained incinerator					
	4. No of waste assessments carried out (12)					

iv) Covid

OBJECTIVE	To continue screening for COVID-19 and avoid a surge in infections
Issue of Concern	Laxity in screening for COVID-19 due to a belief that it was eradicated.

Planned Interventions	1. Strengthen infection control (IPC) measures in the hospital.					
	2. Follow up observation of standard operating procedures in the hospital					
	3. Disease surveillance continuity					
	4. 6. Test through lab to screen for signs					
	5. Continue vaccinating activities					
Budget Allocation (Billion)	0.005					
Performance Indicators	1. No of IPC inspections done by the IPC team (12)					
	2. Isolate, test suspected cases, routine test exposed staff.					
	3. No of patients, staff swabbed for COVID-19. (5,000)					
	4. No. vaccinated against COVID-19 (1,000)					
	5. Surveillance reports submitted (4)					
OBJECTIVE	To ensure constant functioning of the Isolation Unit in readiness to handle any emerging infectious cases					
Issue of Concern	Closure of the unit due to near eradication of COVID-19					
Planned Interventions	1. Functional Isolation Unit with permanent staff posted.					
	2. Refresher trainings for staff					
	3. Ensure availability of personal protective equipment					
	4. Ensure availability of Infection Prevention and Control supplies.					
Budget Allocation (Billion)	0.005					
Performance Indicators	1. Open and functioning Isolation Unit					
	2. No of refresher trainings conducted (4)					
	3. Percentage availability of personal protective gears (100%)					
	4. Percentage availability of Infection Prevention and Control supplies (100%)					

IX. PERSONNEL INFORMATION

Table 9.1: Staff Establishment Analysis

Title	Salary Scale	Number of Approved Positions	Number of filled Positions	
ASKARI	U8L	16	15	
ASSISTANT ACCOUNTANT	U6U	1	0	
DHOBI	U8L	6	5	
EENROLLED NURSE	U7U	55	48	
ENROLLED MIDWIFE	U7(Med)	24	23	
LABARATORY TECHNICIAN	U5(SC)	7	6	
NURSING OFFICER	U5U	26	23	
PHYSIOTHERAPIST	U5(SC)	2	1	
Principal Anaesthetic Officer	U3(Med-2)	1	0	
PRINCIPAL ORTHOPAEDIC OFFICER	U3(Med-2)	1	0	
SEN PRINCIPAL NURSING OFFICER	U2(Med-2)	1	0	
SENIOR ENROLLED MIDWIFE	U5U	6	5	
SENIOR NURSING OFFICER	U4(Med-2)	8	6	
Senior Pharmacist	U3SC	1	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 FY2023/24	Gross Salary Per Month (UGX)	Total Annual Salary (UGX)
ASKARI	U8L	16	15	1	1	213,832	2,565,984
ASSISTANT ACCOUNTANT	U6U	1	0	1	1	436,677	5,240,124
DHOBI	U8L	6	5	1	1	213,832	2,565,984
EENROLLED NURSE	U7U	55	48	7	7	4,905,264	412,042,176
ENROLLED MIDWIFE	U7(Med)	24	23	1	1	613,158	7,357,896
LABARATORY TECHNICIAN	U5(SC)	7	6	1	1	1,200,000	14,400,000
NURSING OFFICER	U5U	26	23	3	3	810,943	29,193,948
PHYSIOTHERAPIST	U5(SC)	2	1	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 ORTHOPAEDIC 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 ENROLLED MIDWIFE	U5U	6	5	1	1	880,616	10,567,392
SENIOR NURSING OFFICER	U4(Med-2)	8	6	2	2	2,200,000	52,800,000
Senior Pharmacist	U3SC	1	0	1	1	0	0
Total					23	22,374,322	667,533,504