## **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

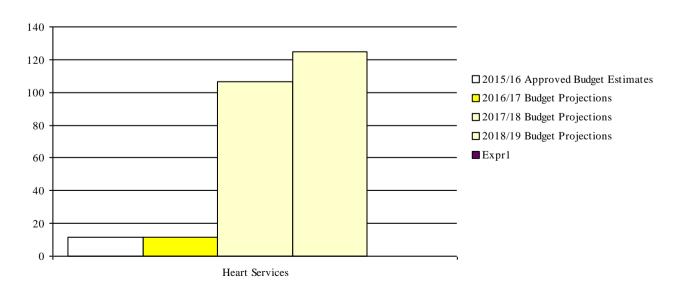
Table V1 below summarises the Medium Term Budget allocations for the Vote:

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

		2014/15	2015	/16 Spent by	MTEF I	Budget Proje	ctions
(i) Excluding	Arrears, Taxes	2014/15 Outturn	Approved Budget	End Sept	2016/17	2017/18	2018/19
	Wage	0.963	2.289	0.399	2.289	2.403	2.523
Recurrent	Non Wage	1.446	4.703	0.845	4.476	75.297	88.850
Davidonma	GoU	2.500	4.500	0.264	4.500	29.010	33.362
Developme	Ext.Fin	0.000	0.000	0.000	0.000	0.000	0.000
	GoU Total	4.909	11.491	1.508	11.265	106.710	124.735
Total GoU+D	onor (MTEF)	4.909	11.491	1.508	11.265	106.710	124.735
(ii) Arrears	Arrears	0.000	0.135	0.000	0.000	N/A	N/A
and Taxes	Taxes**	0.000	0.063	0.000	0.000	N/A	N/A
	<b>Total Budget</b>	4.909	11.689	1.508	11.265	N/A	N/A
(iii) Non Tax	Revenue	0.000	3.000	0.553	6.000	6.600	7.260
	<b>Grand Total</b>	4.909	14.689	2.061	17.265	N/A	N/A
Excluding	Taxes, Arrears	4.909	14.491	2.061	17.265	113.310	131.995

<sup>\*</sup> Donor expenditure data unavailable

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



<sup>\*\*</sup> Non VAT taxes on capital expenditure

## **Vote Summary**

#### (ii) Vote Mission Statement

The Vote's Mission Statement is:

The Uganda Heart Institute exists to serve as a center of excellence for the provision of comprehensive medical services to patients with cardiovascular and thoracic diseases and to offer opportunity for research and training in cardiovascular and thoracic medicine at an affordable cost so as to facilitate service delivery and enable continuous development of the institute

#### (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.

Table V1.2: Sector Outcomes, Vote Functions and Key Outputs

,	v 1	
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 stocks of essential medicines and health supplies (EMHS)
Vote Function: 08 58 Heart Services		
Outputs Contributing to Outcome 1:	Outputs Contributing to Outcome 2:	Outputs Contributing to Outcome 3:
None	Outputs Provided	None
	085803 Heart Outreach Services	

### 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

2014/15 Performance

The Cardiac Catheterization facility and the dedicated operating theatre for heart surgery equiped with specialised machinery and equipment. Cath-lab consumables procured. CCTV cameras installed. Specialised equipment and machinery procured

### Preliminary 2015/16 Performance

The plan for FY 2014/15 is to fully operationalise the cardiac catheterization facility and the heart surgery theatre. The Institute will carry out 100 Open Heart surgeries, 250 Closed Heart surgeries, 12,000 Echos, 11,000 ECG's, 260 Stress tests, 500 ICU/CCU contacts, 400 Cath-lab contacts, 100 Pacemakers, 200 Holter monitoring, 15,000 Lab tests, 1,200 X-rays. The institute will also undertake outreach and support supervision visits to 14 Regional Referral Hospitals and one general hospital (Kiwoko) and 120 to specialised groups. Transport will be procured to support this programme. It will collect data on hear related cases, prepare 4 proposals and 2 publications. Besides conducting research the UHI will continue training of super specialists at fellowship level with the goal of eventually averting the high expense of sending them abroad where hands on is not guaranteed as compared to when they are trained locally with full access to patients.

Table V2.1: Past and 2016/17 Key Vote Outputs\*

Vote, Vote Function Key Output	Approved Budget and Planned outputs	2015/16 Spending and Outputs Achieved by End Sept	2016/17 Proposed Budget and Planned Outputs						
Vote: 115 Uganda Heart Institute  Vote Function: 0858 Heart Services									
Output: 085801	Heart Research								
Description of Outputs:	5. 4 proposals done	1. 2 proposals done	Prepare 4 proposals on rheumatic heart disease. Publish						

## **Vote Summary**

Vote, Vote Function Key Output	Approved Budget a	2015 and		Outputs	2016/17 Proposed Budget on	
	Planned outputs		Spending and Outputs Achieved by End Sept		Proposed Budget and Planned Outputs	1
	6. 2 publications do	ne	2. 2 publications	done	4 reports on rheumatidisease	e heart
Output Cost:	UShs Bn:	1.122	UShs Bn:	0.287	UShs Bn:	0.926
Output: 085802	<b>Ieart Care Services</b>					
Description of Outputs:	1. 100 Open heart superformed 2. 250 Closed heart surgeries performed 3.12,000 Echos don 4. 11,000 ECGs pe 5. 260 Stress tests C 6. 500 CCU /ICU Adone 7. 400 Cath-lab com 8- 100 pacemaker pridone 9. 200 Holter monitoring to local cardiologist surgeons for heart strained in cardiologicardiothoracic surge 14. Gas Infrustructur maintenance, Cath-lab	and thoracic  e - erformed Conducted Admissions tacts done rogramming oring ory  ne expatriates er of skills s and urgeries. urgical staff y and ery. re ab, ICU and	3. 2594 Echos do 4. 2,614 ECGs 5. 43 Stress tests 6. 258 CCU /ICl done 7. 95 Cath-lab co 8- 16 pacemaker done 9. 36 Holter mon conducted 10. 7,680 Labora investigations do 11.368 X-rays do 12. Facilitation of for short term tra to local cardiolog surgeons for hear 13. 2 Cath-lab ar trained in cardiol cardiothoracic su 14. Gas Infrustru	rt and thoracic ned one - performed Conducted U Admissions ontacts done programming nitoring nitoring netory one of expatriates unsfer of skills gists and rt surgeries. nd surgical staff logy and urgery. Incture th-lab, ICU and ery and	1. 100 Open heart surperformed 2. 500 Closed heart as surgeries and cath-lab procedures performed 3.12,000 Echos done 4. 11,000 ECGs perf 5. 260 Stress tests Co 6. 500 CCU /ICU Addone 7. 100 pacemaker prodone 8. 200 Holter monitor conducted 9. 21,000 Laboratory investigations done 10.1,200 X-rays done. 1 out patients attended 11. Facilitation of thr (3)expatriates for shot transfer of skills to locardiologists and surgheart surgeries. 12. 2 Cath-lab and surtained in cardiology cardiothoracic surger 13. Gas Infrastructure maintenance, Cath-lal surgical implants, dev consumables procured	ond thoracic of the control of the c
	surgical implants, de consumables procur					
Performance Indicators:						
No. of Thoracic and Closed Heart Operations	250		31		500	
No. of Open heart operations			28		100	
No. of Outpatients	15000	6.556	4241	0.772	16500	
Output Cost:		6.776	UShs Bn:	0.772	UShs Bn:	6.060
•	Ieart Outreach Serv					
Description of Outputs:	Support supervissio to: referral hospitals - Heart care support	14 regional	Support supervisto:- referral hospitals - Heart care supp	-14 regional	Support supervision p to:- -14 regional referral h - Heart care support a	ospitals

## **Vote Summary**

Vote, Vote Function Key Output	Approved Budget Planned outputs	2015 and	/16 Spending and O Achieved by End	-	2016/1 Proposed Budge Planned Output	et and
	education provided specialised groups		education provide		education provid	
Performance Indicators:	specialised groups	( e.g benoois)	specialised group	s (e.g benoois)	specialised group	ps ( c.g belloois)
No. of outreach visits	134		34		134	
Output Cost:	UShs Bn:	0.048	UShs Bn:	0.011	UShs Bn:	0.198
Vote Function Cost	UShs Bn:	14.689	UShs Bn:	1.508	UShs Bn:	17.265
Cost of Vote Services:	UShs Bn:	14.491	UShs Bn:	1.508	UShs Bn:	17.265

<sup>\*</sup> Excluding Taxes and Arrears

#### 2016/17 Planned Outputs

- 1. 100 Open heart surgeries performed
- 2. 500 Closed heart and thoracic surgeries and cath-lab procedures performed
- 3.12,000 Echos done -
- 4. 11,000 ECGs performed
- 5. 260 Stress tests Conducted
- 6. 500 CCU /ICU Admissions done
- 7. 100 pacemaker programming done
- 8. 200 Holter monitoring conducted
- 9. 21,000 Laboratory investigations done
- 10.1,200 X-rays done
- 11. Facilitation of three (3)expatriates for short term transfer of skills to local cardiologists and surgeons for heart surgeries.
- 12. 2 Cath-lab and surgical staff trained in cardiology and cardiothoracic surgery.
- 13. Gas Infrastructure maintenance, Cath-lab, ICU and surgical implants, devices and consumables procured.

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

Vote Function Key Output		2015/		MTEF P	Projections	
Indicators and Costs:	2014/15 Outturn	Approved Plan	Outturn by End Sept	2016/17	2017/18	2018/19
Vote: 115 Uganda Heart Institute			•			
Vote Function:0858 Heart Services						
No. of Open heart operations		100	28	100	150	150
No. of Outpatients		15000	4241	16500	16500	16500
No. of Thoracic and Closed Heart		250	31	500	600	600
Operations						
No. of outreach visits		134	34	134	134	134
Vote Function Cost (UShs bn)	4.909	14.491	1.508	17.265	113.310	131.995
Cost of Vote Services (UShs Bn)	4.909	14.491	1.508	17.265	113.310	131.995

#### Medium Term Plans

Recruitment of medical and non-medical staff, acquiring a new home to solve the acute space shortage. Perform 1000 heart surgeries, Perform 20,000 Echos done, Perform 20,000 ECGs, Conduct 500 Strees tests, 360 ICU admissions, 500 CCU admissions, Perform 400 Holter analysis. 20,000 OPD attended, perform 2,000 X-rays, perform 10,000 laboratory investigations. Train superspecialised personnel and facilitate regional support supervision.

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

Timely procurements, executing the budget in line with the Public Finance Management Act (2015),

### **Vote Summary**

strengthening the internal control mechanisms.

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

	(i) Allocation (Shs Bn)			(ii) % Vote Budget				
Billion Uganda Shillings	2015/16	2016/17	2017/18	2018/19	2015/16	2016/17	2017/18	2018/19
Key Sector	0.0	0.2	0.1	0.1	0.3%	1.1%	0.1%	0.1%
Service Delivery	7.9	7.2	10.4	11.4	54.8%	41.6%	9.2%	8.6%

The provision of super specialist cardiac services like open heart surgery and cath-lab interventions is very expensive due to The very wide range of highly specific inputs in the cath-lab, operating theatre, ICC/CCU and the diagnostic units. These include anaesthetic machine, echo machine, Intriotic machine, Invasive cardiac monitor, Syringe pumps, Ventilators, Cardiac beds, Infusion pumps and others. The cath-lab costs UDS 2M. The compound unit cost per open heart surgery is USD 7,500 while closed hear surgery is USD 1,000. N.B This is three times lower than the cost of USD 20,000 spent per open heart surgery abroad. Other benefits of performing surgeries locally besides cost saving and national pride include; promotion teaching/training/mentoring, promotion of research and capacity development for sustainability.

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

Unit Cost Description	Actual 2014/15	Planned 2015/16	Actual by Sept	Proposed 2016/17	Costing Assumptions and Reasons for any Changes and Variations from Plan
Vote Function:0858 Heart So Open Heart surgery cost	ervices 2,000	2,000	2,071	2,000	Provisional estimate per inpatient operation
Closed Heart Surgery cost	2,060	2,060	2,060	2,060	Infationery tendencies were factored in the cost

#### (iii) Vote Investment Plans

The funding allocated to capital purchases over the medium term is targeted for the re-equipping of the ICU/CCU units for post-operation care with specialised machinary and equipment (2.550b) and purchase ICT equipment and office furn. (800m), Motor vehicle equipment (450m).and 400M for Engineering and design.

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

	(i) Allocation (Shs Bn)			(ii) % Vote Budget				
Billion Uganda Shillings	2015/16	2016/17	2017/18	2018/19	2015/16	2016/17	2017/18	2018/19
Consumption Expendture(Outputs Provided)	10.0	12.8	13.5	15.5	68.9%	73.9%	11.9%	11.7%
Investment (Capital Purchases)	4.5	4.5	99.9	116.5	31.1%	26.1%	88.1%	88.3%
Grand Total	14.5	17.3	113.3	132.0	100.0%	100.0%	100.0%	100.0%

The Institute will continue to equip, wards units, ICU/CCU CatheterisationLaboratory, Theatre and other core units with Assorted specialised machinery and equipment (UGX 2,550M), Motor vehicle, Computers and other ICT equipment and the UHI Strategic plan (UGX 2,450)

Table V2.6: Major Capital Investments

Project, Programme	2015/16		2016/17					
Vote Function Output  UShs Thousand	Approved Budget, Planned Outputs (Quantity and Location)	Actual Expenditure and Outputs by September (Quantity and Location)	Proposed Budget, Planned Outputs (Quantity and Location)					
Project 1121 Uganda Heart Institute Project								
085876 Purchase of Office and ICT Equipment,	2 Computers and 2 laptops procured	Documentation of procurement process started	10 Computers and 5 laptops procured					
including Software	10 UPS procured.		10 UPS procured.					
	2 Scanners and 2 printers		5 Scanners and printers					

## **Vote Summary**

Project, Programme	2015/16		2016/17
Vote Function Output  UShs Thousand	Approved Budget, Planned Outputs (Quantity and Location)	Actual Expenditure and Outputs by September (Quantity and Location)	Proposed Budget, Planned Outputs (Quantity and Location)
	Other ICT Equipment. Security gadgets and CCTV upgrade procured		Soft ware for Records Television, decorder, paediatric mats with cartoons and other accesories for Paed cardiology procured. Other ICT Equipment.
			Security gadgets and CCTV upgrade procured
Total	200,000	4,830	800,000
GoU Development	200,000	4,830	800,000
External Financing	0	0	0
085877 Purchase of Specialised Machinery & Equipment	Assorted specialised surgical instruments, procedural instruments, machinery and equipment procured  -Cath-lab specialised equipment and machinery procured.  -Ventilator Machine  -Infusion pumps procured.  -Blood gas analyser procured.  -Vital sign machine procured.  -Stress test machine procured.	1 Blood Analyser Machine procured.  - Three Infusion pumps Procured  - Three Syringe pumps procured  -1 Ventilator Machine procured  - Cathlab equipment and Machinery procured  - Specialised surgical equipment procured	Assorted specialised surgical instruments, procedural instruments, machinery and equipment procured  -Cath-lab, adult and Paed cardiology, laboratoty, Perfusion, Phisiotherapy and Anaesthesia deparments assorted specialised equipment and machinery procured.  -Ventilator Machine  -Infusion pumps procured.  -Blood gas analyser procured.  -Vital sign machine procured.
			-Stress test machine procuredHeart Lung machine procured
Total	3,500,000	214,357	2,550,000
GoU Development	3,500,000	214,357	2,550,000
External Financing	0	0	0

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

The strategy is to increase our capacity to operate on the patients requiring heart surgery/cath-lab interventions at the Institute and reduce/ remove the need to reffer them abroad. Scalling up of training programme for super specialised skills, improving on the terms of service for super specialist staff to ensure their retainance. Preventive maintenance of the equipments, seeking accreditation of procurement of super specialist sundries, equipment, drugs and reagents from the PPDA. The future UHI project has been presented to IDB by Ministry of Finance, Planning and Economic Development.

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

2015/16 Planned Action	s: 2015/16 Actions by Sept:	2016/17 Planned Actions:	MT Strategy:						
Sector Outcome 1: Increased deliveries in health facilities									
Vote Function: 08 58 He	Vote Function: 08 58 Heart Services								
VF Performance Issue: Timely delivery and regular provision of specialised drugs and medical sundries									

## **Vote Summary**

cardiologists.

•	v ote Summer y						
2015/16 Planned Actions:	2015/16 Actions by Sept:	2016/17 Planned Actions:	MT Strategy:				
Procurement plan in place to ensure timely availability of quality specialised drugs, chemicals, devices, pacemaker implants and sundries in quantities that are in tandem with the demand.	Procurement plan in place to ensure timely availability of quality specialised drugs, chemicals, devices, pacemaker implants and sundries in quantities that are in tandem with the demand.	Continue with ensuring timely availability of quality specialised drugs, chemicals, devices, pacemaker implants and sundries in quantities that are in tandem with the demand.	Procurement of specialised drugs, chemicals, sundries, devices and implants (Pacemakers). Fully equiping, procurement of specialised sundries and maintenance of equipment, conducting of research and outreach programmes to the regional hospitals				
VF Performance Issue: Unde	rstaffing						
43 positions for critical staff cleared by Ministry of Public Service, and recruitment in progress by the Health Service Commission.	The Institute has subimitted recruitment plans to the relevant authorities in order to fill the gap of 44%	Submit recruitment plan for approval and filling of vacant posts at the UHI through relevant offices (HSC, PSC, MoPS, MoH)	Adequate recruitment of a full structure that provides for the right skill mix of staff, motivating the available staff and ensure retainance.				
Sector Outcome 2: Children u	nder one year old protected agai	nst life threatening diseases					
Vote Function: 08 58 Heart Serv	vices						
VF Performance Issue: Train	ing of staff						
More technical staff will be trained to ensure efficient and effective running of the cathlab and the dedicated theatre. This will include 2 cath-lab tecchnicians and 2	The Institute has continued to train more technical staff to ensure efficient and effective running of the cath-lab and the dedicated theatre. This will include 2 cath-lab tecchnicians	More technical staff will be trained to ensure efficient and effective running of the cathlab and the dedicated theatre. This will include 2 cath-lab nurses and 2 cardiologists.	Involving of releant stakeholders/Authorities in the staff needs for UHI				

## V3 Proposed Budget Allocations for 2016/17 and the Medium Term

This section sets out the proposed vote budget allocations for 2016/17 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\*

and 2 cardiologists.

		2015/16		MTEF Budget Projections		
	2014/15 Outturn	Appr. Budget	Spent by End Sept	2016/17	2017/18	2018/19
Vote: 115 Uganda Heart Institute						
0858 Heart Services	4.909	14.491	1.508	17.265	113.310	131.995
Total for Vote:	4.909	14.491	1.508	17.265	113.310	131.995

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

2012/13 - 2.434b, 2013/14 - 7.961b, 2014/15 - 11.240b, 2015/16 - 13.923b, 2016/17 -94.600b, the increase in resource allocation is to improve the infrastructure and services of the Institute to provide convenient and affordable heart treatment to the local population and the region, and undertake necessary capital expenditures in order to transform the Institute into a Centre of Excellence

### (ii) The major expenditure allocations in the Vote for 2016/17

There is no change in the expenditure allocation. These are on specialised equipment and consumables 2.5billion, other expenditures are on procurement of furniture and fittings. 4.0 billion. Set side speifically to boost heart surgeries by providing specialised catheterisation consumable and sundries, maintaintenance of the specialised machinery and equipment, utilities and training of highy skilled labour, telemedicine and teleconfrencing costs.

#### (iii) The major planned changes in resource allocations within the Vote for 2016/17

## **Vote Summary**

The patient load is on the increase and we have taken on more complex treatment to reduce on the needs to refer patients abroad. Heart services are among the goals of the NDP specifically strategy 2 which is in line with controlling mortality arising from non-communicable diseases ad thus UHI improved medical expenses through complex drugs enhance control and overall management of heart diseases and referrals abroad

Table V3.2: Key Changes in Vote Resource Allocation

Changes in Budget Allocation 2016/17	<del>-</del>	15/16 Planned Lev 17/18	vels: 2018/19	Justification for proposed Changes in Expenditure and Outputs
Vote Function:0802 Heart Se	rvices			
Output: 0858 02 Heart (	Care Services			
Funding to boost more open heart surgery	The patient load is on the increase and we have taken on more complex treatment to reduce on the needs to	on more comp to reduce on th	e have taken lex treatment e needs to	
	refer patients abroad	refer patients a	broad	
	nstitute Support Services			
	There is need for more staffing at all cadres to enhance service delivery and thus with increased stalevels needs for support inputs like operational coswill increase	levels needs for inputs like ope will increase	for more adres to e delivery ncreased staff r support rational costs	The increase is to carter for the operational costs for the wide range of the super specialised nature of the working environment especially maintenance of equipment. A motivated staff will lead to quality services and thus the quality of disease management at the UHI will go high
Output: 0858 72 Govern	ment Buildings and Admini	strative Infrastruct	ure	
There is need to reserve funds for developing plans for a six level block in an event the planned IDB loan for a stand alone fails. Secondly, there is need to develop a strategic plan for the Institute.	Initial construction works for the UHI Home started. (Plan A IDB loan USD 65M). Plan B is construction of a six (6) level block in a phased manner for both construction and equipping	B is USD 5M transport for an and support se departments; F specialised equ machinery for units; Procure equipment and fittings.	vorks se 2 of plan Procure Iministration rvice Procure hipment and the wards and ICT furniture and	The Institute has a plan of constructing a stand alone Home to cater for patient care, teaching, training, research and accommodation for critical staff, fellows and visiting faculty (USD 65M). This project is under consideration by IDB. However in an event where the above option fails, there is need to construct a six (6) level block as an option.
	se of Office and ICT Equip			
Considering the increase in patient load, there is need to install soft ware that will be used in the records	No much anticipated purchase of these equipme since the Institute is currenty in space limitation due to construction/civi	since the Instit	ipated ese equipment ute is ce limitations etion/civi	The increament is a one off specifically for the procurement of records soft ware
services provides and overall outputs.				
	se of Specialised Machinery	& Equipment		
UShs Bn: -0.950 No much anticipated purchase of these equipment	UShs Bn: 2.0 Due the increased patient load there is need for more specialized medical	Due the increa load there is no specialized me	sed patient eed for more dical	The better the quality of diagnosis and care the more lives saved and hence reduced referrals abroad which thus necessitates state of the art equipment

## **Vote Summary** Changes in Budget Allocations and Outputs from 2015/16 Planned Levels: Justification for proposed Changes in 2018/19 **Expenditure and Outputs** works in Mulago thereby reducing referals thereby reducing referals abroad abroa V4: Vote Challenges for 2016/17 and the Medium Term This section sets out the major challenges the vote faces in 2016/17 and the medium term which the vote has been unable to address in its spending plans. 1.UNFUNDED PRIORITIES FOR F/Y 2016/17 □ Construction and equipping a six level block to solve the very bad congestion and space shortage at the Uganda Heart Institute (USD 15M) □ Funds to facilitate 3 expatriate staff to support the coronary bypass and valve surgery plus the Cardiac Catheterisation Interventions at the Uganda Heart Institute so as to fully operationalise the present capacity in order to remove the need to refer patients abroad. With this team in place, the number of operations done per year can increase from 300 to 400 which if done abroad would cost USD 8M yet there is the benefit of building our capacity, ensuring training for the local team, stimulating high level research in the field of heart disease, attracting of income from the neighbouring countries besides the national pride. The unit cost is USD 200,000 per expatriate per year catering for air tickets, accommodation, upkeep, transportation and insurance. The total for the three expatriates is USD 600,000. This arrangement will run for three years. □ A second Ambulance for transportation of patients from the operating theatre and Catheterisation Laboratory to the ICU/CCU in the Uganda Cancer Institute during the relocation period. All post operative patients will be managed within for 24 hours within the present location and thereafter they will be transferred to a new ICU arranged in the Uganda Cancer Institute for the rest of the care. The Institute has one ambulance and therefore needs a back-up. (UGX 600M) □ A stand alone Home to cater for patient care, teaching, training, research and accommodation for critical staff, fellows and visiting faculty (USD 65M). This project is under consideration by IDB. 2.BOTTLENECKS/CHALLENGES HINDERING SERVICE DELIVERY □ Funding gap for operationalisation of the Catheterisation laboratory and operating theatre. The high costs of the super specialised sundries which are all imported, making service delivery expensive. The deficit is USD 1M. Costs of hiring 3 expatriates as agreed in the presidential initiative of USD 600,000 per year. This was and is intended to build the Uganda Heart Institute's capacity so as to reduce referrals abroad which are far more costly.

## **Vote Summary**

 $\Box$  Space challenges for clinical, teaching, research and operational purposes. The Institute is grossly overcrowded to the extent that even stores are kept in the open.

□ Low attraction of super specialists especially Intensivists for critical care management.

□ Limited wage bill to recruit critical staff like the nurses. The nursing staffing level is inadequate to guarantee quality care across the 24 hours. Staffing level is at 51%

☐ The inadequate non-wage bill to cover the utilities and other appropriation costs

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

Additional Requirements for Funding and Outputs in 2016/17:	Justification of Requirement for Additional Outputs and Funding				
Vote Function:0802 Heart Services Output: 0858 02 Heart Care Services					
UShs Bn: The number of heart patients operated on both in the theatre and the cath-lab will increase. The same will happen to the ICU/CCU, general wards and the investigative areas.	Treatment of heart patients is a costly procedure. Enhancing this service will reduce costly referrals abroad.UHI has capacity to operate a minimum of 300 children having heart problems and over 500 cardiac catherisation procedures. The cost of each				
	procedure is US dollars 5,000 at the Institute compared to US dollars 20,000 if the patients were to be referred abroad. There is therefore a lot of cost saving of capital flight by funding procedures at UHI.				

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:** Heart services are offered to all people regardless of age or gender to all patients in need.

Issue of Concern: 1. Maternity leave which affects mostly the nursing division. When many young nurses deliver at the same time and get maternity and annual leave combined.

Proposed Intervensions

Encouraging recruitment of some male nurses to fill the gap and creating room for breastfeeding mothers (staff).

Budget Allocations UGX billion 0.02

Performance Indicators 1. Number of male nurses recruited. 2. Room available

Issue of Concern:

**Proposed Intervensions** 

**Budget Allocations UGX billion** 

Performance Indicators

**Objective:** Heart services are offered to all people regardless of age or gender to all patients in need.

## Vote Summary

Issue of Concern: 1. Maternity leave which affects mostly the nursing division. When many young nurses deliver at the same time and get maternity and annual leave combined.

**Proposed Intervensions** 

Encouraging recruitment of some male nurses to fill the gap and creating room for breastfeeding mothers (staff).

Budget Allocations UGX billion 0.02

Performance Indicators 1. Number of male nurses recruited. 2. Room available

Issue of Concern:

**Proposed Intervensions** 

**Budget Allocations UGX billion** 

Performance Indicators

#### (ii) HIV/AIDS

**Objective:** Advocating for Male Circumcision, ensuring constant supply of laboratory and medicines and medical supplies for HIV/AIDS

Issue of Concern:

Proposed Intervensions

**Budget Allocations UGX billion** 

Performance Indicators

**Objective:** HIV/AIDS prevention will be enhanced through the elimination of Mother to Child Transmission

Issue of Concern: Accidental injuries (needle or instrument pricks)

**Proposed Intervensions** 

1. To be able to give staff protective gear. 2. To be able to screen and establish the status of those injured at work. 3. Provide prophylactic treatment for the sero-negative and full treatment for the positive.

Budget Allocations UGX billion 0.03

Performance Indicators Performance Indicator: Availability of protective gear, testing kits

and arrangements with Mulago Hospital and related partners for

HIV/AIDS care

#### (iii) Environment

**Objective:** Uganda Heart Institute ensures that medical waste is disposed off in an environmentaly friendly manner and in line with the guidelines.

### **Vote Summary**

Issue of Concern: Disposal of medical waste to be done in an environmentally friendly manner

Proposed Intervensions

1. Segregation of medical waste generated in the Uganda Heart Institute (sharps, dangerous, recyclable and non-recyclable waste. 2. Procurement of appropriate disposal collection bags for each of the categories and ensure they are used appropriately. 3. Introduction of I.T recording to replace paper work

Budget Allocations UGX billion 0.5

Performance Indicators 1. Availability of the various different colour of the collection

bins 2. Availability of computers with appropriate software.

### (ii) Payment Arrears

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

#### (ii) Non Tax Revenue Collections

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

Source of NTR	UShs Bn	2014/15 Actual	2015/16 Budget	2015/16 Actual by Sept	2016/17 Projected
Sale of drugs		2.460	3.000		6.000
	Total:	2.460	3.000		6.000

The NTR funds collected will supplement and top up the funds received from Government of Uganda. Shs 6.0m will be used to top up NWR for welfareof staff, paying contract staff, servicing and maintainance of the superspecialised equipment and procuring drugs and sundries. The bulk of the revenue collected will be used to supplement medical consumables for the cath-lab, laboratory, operating theatre and the general wards.