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Ministry of Finance, Planning &  
Economic Development  
Plot 2-12, Apollo Kaggwa Road  
P.O. Box 8147  
Kampala  
Uganda

In any correspondence on  
this subject please quote No. **BPD 45/179/01**

23<sup>rd</sup> March, 2017

The Hon. Minister of Health,  
Ministry of Health,  
**KAMPALA**

Dear Colleague,

### **TRANSITIONAL DEVELOPMENT BUDGET TO HEALTH FACILITIES IN FINANCIAL YEAR 2017/18**

Reference is made to our telephone conversation held on 21<sup>st</sup> March 2017 and your letter Ref: FIN.340/08 dated 14<sup>th</sup> March, 2017 on the above subject in which you expressed concern over the changes in allocation of funds for the Health Sector Transitional Development grant to the districts of Apac, Kibaale and Pallisa contrary to the breakdown provided by your Ministry as per the letter Ref: Ref: FIN.45/01 dated 28<sup>th</sup> February, 2017 from your Permanent Secretary.

I would like to extend our apologies for not fully honouring the allocations for the Health Transitional Development grant funds to the districts referred to in your letter.

I have studied your letter and would like to respond as follows:

1. The original allocation for the Health Transitional Development Budget allocation for FY 2017/18 of **US\$ 9.5 billion** included US\$ 300m allocated to Vote 524 - Kibaale District (**see attached, our letter of even reference dated 28<sup>th</sup> December, 2016 under Para. 8 for your ease of reference**);
2. In a letter Ref: FIN/340/012 dated 12<sup>th</sup> December 2016 (**copy attached**), your Ministry acknowledged that the Transitional Development Health grant for FY 2017/18 was maintained at the level of FY 2016/17 of **US\$ 9.2 billion** in the MTEF excluding the US\$ 300million allocated to Kibaale District at the time of preparation of the Budget Framework Paper for FY 2017/18. The funds for Kibaale District (US\$ 300 million) was additional funding provided to the District for Construction of Maisuka HC III;
3. It is, however, noted that in the letter of 28<sup>th</sup> February 2017 already referred to above, your Ministry allocated the entire US\$ 9.5 billion including the funds earmarked for Maisuka HC III. In order to reinstate the funds for Kibaale District and also cater for Pallisa District, we have increased the grant by US\$ 122 million and also made an

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internal re-allocation of US\$ 100 million from Apac District which had the highest allocation; and

4. Regarding the increase in funding to Pallisa District, additional funding of US\$ 150 million was allocated to them to cater for the provision of solar power over and above what was indicated in your letter, thus bringing a total funding of US\$ 350 million to the district. The additional funding was premised on a request by the Accounting Officer as per the attached letter Ref: CR/219/1 dated 29<sup>th</sup> November 2016.

In view of the above, the total funding in the MTEF communicated in the Second Budget Call Circular FY 2017/18 for the Local Government Health Development grant is US\$ 9.622 billion, of which US\$ 9.2 billion is to cater for your sector allocation, US\$ 272 million for Construction of Maisuka HC III (Phase Two) in Kibaale District and US\$ 150 million for procurement of solar power in Pallisa General Hospital.

I have also noted that in the schedule provided by your Ministry, US\$ 300 million was allocated to Kabarole Hospital which is a Private Not for Profit (PNFP) facility that is affiliated to the Uganda Protestant Medical Bureau (UPMB) whose land is privately owned at the expense of other Government General Hospitals which are in a dilapidated state. It is understandable to supply medical sundries but not permanent assets. We propose that this development funding should be for only Government owned facilities and not for Private Not for Profit facilities.

The purpose of this letter, therefore, is to:

- i). Inform you that this Ministry has prepared the draft Indicative Planning Figures (IPFs) for the various grants using the OTIMS based on what was submitted in the letter of 28<sup>th</sup> February 2017 by your Ministry and disseminated to Local Governments under the Second Budget Call Circular FY 2017/18 but with adjustments to the budget allocations of Apac, Kibaale and Pallisa Districts as stated above;
- ii). Request you to provide the criteria used in the allocation of funds for the Health Transitional Development Grant FY 2017/18 to the respective General Hospitals and Health Centre IVs given the big spread between District allocations;
- iii). Request you to reconsider reinstating the US\$ 100 million to Apac General Hospital from the Kabarole Hospital provision of US\$ 300 million and re-allocate the balance to other deserving General Hospitals or Health Centre IVs with dilapidated structures and accommodation for Nurses and Midwives;
- iv). Inform you that the IPFs did not include the schedule of funds directly transferred to Health Facilities which is required by Parliament by the 31<sup>st</sup> of this month and discussed by the respective Local Government Councils. This is to request you to confirm the schedule of the IPFs (**a copy of which is attached as Table 1**) with the attendant sector grant guidelines and submit to this Ministry by **Wednesday 29<sup>th</sup> March, 2017 at the latest to enable the Local Governments finalize their detailed Budget Estimates and draft Budget Performance Contract for FY 2017/18;**

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- v). Request you as part of your sector submission, provide us with the updated list of the HC II, III and IV including General Hospitals and PNFP Hospitals whose names should be arranged in alphabetical order under each respective Vote and equal to the IPFs that were generated off OTIMS as disseminated to Local Governments under the Second Budget Call Circular FY 2017/18. **Please note that the validated list of Health Facilities and the Bank Account details submitted by your Ministry will form the basis of release of funds in FY 2017/18; and**
- vi). Further request that in order not to delay the release of funds for the fourth quarter (Q4) FY 2016/17, you confirm the list of Health Facilities in the schedule which we used to release the funds in the third quarter of this financial year to the Local Governments by 29<sup>th</sup> March 2017. **Note that if no confirmation is received, then we shall go ahead and effect the releases to these facilities based on the Quarter 3 expenditure limit levels.**

  
Matia Kasaija (MP)

**MINISTER OF FINANCE, PLANNING AND ECONOMIC DEVELOPMENT**

Copy to: The Hon. Minister of Local Government

All Hon. Ministers of State for Finance, Planning and Economic Development

All Hon. Ministers of State for Health

The Permanent Secretary/Secretary to the Treasury

The Permanent Secretary, Ministry of Health

The Permanent Secretary, Ministry of Local Government

The Secretary, Local Government Finance Commission

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IN ANY CORRESPONDENCE ON

THIS SUBJECT PLEASE QUOTE NO **FIN.45/01**

THE REPUBLIC OF UGANDA

Ministry of Health  
P. O. Box 7272  
Kampala  
Uganda

28<sup>th</sup> February, 2017

The Permanent Secretary/Secretary to Treasury  
Ministry of Finance Planning and Economic Development  
Kampala.



**RE: FINALISATION OF INDICATIVE PLANNING FIGURES FOR  
LOCAL GOVERNMENTS FOR FY 2017/18.**

The Senior Top Management of Ministry of Health has deliberated upon the District Local Government budgets for FY 2017/18 and wish to advise as follows:

1. The Ushs 6.7billion currently used for constituent assemblies under the non-wage recurrent budget of local governments be reallocated as follows;
  - i. Ushs 2 billion be added to the non-wage recurrent budget for Government owned general hospitals to cater for the ever increasing utility bills.
  - ii. Ushs 4.7 billion be added to Health Centre IVs and IIIs in the ratio of 3:7 respectively to enhance service delivery at those levels. This implies that HC IVs will share an additional Ushs1.41 billion while HC IIIs share an additional Ushs 3.29 billion.
2. The transitional development fund of Ushs 9.5 billion for FY 2017/18 be allocated according to the attached schedule. **Annex 1**

The purpose of this letter is to communicate to you the above Sector positions and request you to incorporate them in the Indicative Planning Figures for Local Governments for FY 2017/18.

Ssegawa Ronald Gyagenda  
**FOR: PERMANENT SECRETARY**

INDICATIVE ALLOCATION OF DEVELOPMENT BUDGET TO HEALTH FACILITIES IN FY 2017/18			
	FACILITY	Local GVT	Indicative allocation for FY B2017/18
1	Kiboga GH	Kiboga	400,000,000
2	Bundibugyo GH	Bundibugyo	300,000,000
3	Kabarole GH	Kabarole GH	300,000,000
4	Apac GH	Apac	1,000,000,000
5	Rukunyu HC IV	Kamwenge	200,000,000
6	Masindi GH	Masindi	200,000,000
7	Atutur GH	KUMI	200,000,000
8	Pallisa GH	PALLISA	200,000,000
9	Maracha HC IV	Maracha	200,000,000
10	Gombe	Gombe	300,000,000
11	Kagadi	Kagadi	300,000,000
12	Kambuga	Kambuga	300,000,000
13	Bududu	Bududu	300,000,000
14	Tororo	Tororo	500,000,000
15	Kibale HC IV	Kibale	200,000,000
16	Mpigi HCIV	Mpigi	500,000,000
17	Mukono HCIV	Mukono	300,000,000
18	Kasana HCIV	Luwero	300,000,000
19	Lyantonde Hospital	Lyantode	500,000,000
20	Katakwi Hospital	Katakwi	300,000,000
21	Zombo HC IV	Zombo	500,000,000
22	Kalisizo Hospital	Kyotera	300,000,000
23	Ishongorero HC <u>IV</u>	Ibanda	300,000,000
24	Anyeke HC IV	Oyam	300,000,000
25	Kibuku District Medicine store	Kibuku	300,000,000
26	Entebbe Grade A hospital	Wakiso	500,000,000
27	Kakomo HCIII	Kabale	200,000,000
28	Kyenjojo Hospital	Kyenjojo	300,000,000
			9,500,000,000



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28<sup>th</sup> December 2016

The Permanent Secretary,  
Ministry of Health,  
**KAMPALA**

**CONFIRMATION OF INDICATIVE PLANNING FIGURES (IPFs) FOR GRANT TRANSFERS TO LOCAL GOVERNMENTS - PREPARATION OF THE BUDGET FRAMEWORK PAPER (BFP) FOR FY 2017/18**

This is to acknowledge receipt of your letter Ref: FIN/340/012 dated 12<sup>th</sup> December 2016 confirming the Indicative Planning Figures for the Health Sector grant transfers to Local Governments for FY 2017/18 developed from the Online Transfer Information Management System (OTIMS).

Whereas this Ministry appreciates the concerns raised under your letter, there is need for further clarifications on the following to enable us conclude the process of issuing the IPFs for the grants under the Health Sector. These include the following:

**Health Sub-district (HSD) allocations**

1. You recommended that the allocation of US\$ 4.7Bn provided against the variable of the "number of Health Sub-districts" used in the allocation formulae for the Sector Conditional Non-Wage grant be re-allocated to all Health Centres III and IV proportionately to improve service delivery. You may recall that the rationale to include this variable was to cover the cost for running health sub-districts. We do not understand what proportionately implies and how it affects the formulae. We therefore, request you to submit a revised formulae with attendant variables and weights.
2. However, in case the proportionate allocation refers to equal allocation to all Health Centres III and HC IV, then it will require replacing the variable 'Number of Health sub-districts' with the variable 'Number of HC III and IV'. To implement this recommendation, we would need an updated list of the number of HC III and IV submitted by your Ministry to be captured in the cost-centre database in OTIMS.
3. We note that we are unable to implement your proposal to proportionately allocate the above funds to all Health Centres III and IV given that it is not feasible since HC IIIs refer patients to HC IVs who have a bigger population to serve and are at a higher level of operation compared to a HC III. Secondly, by providing proportionate funding to them, we are not sure whether it is promoting service delivery.
4. Whereas the allocation is provided at grant level, your submission does not provide the detailed allocation in terms of Direct Transfers to each General Hospital; PHC NGO

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Hospitals as well as the Lower Level Health Facilities under each Local Government. The allocation at facility level is important to guide the budgeting at Local Government levels in addition to forming a basis for budget execution in FY 2017/18.

#### **Health Sector Development Conditional Grant and Transitional Development Grant**

5. Regarding your request to re-centralize **UShs. 3bn** (that is **UShs. 1Bn** from the Transitional Development grant and **UShs. 2Bn** from PHC Non-Wage grant) to the National Medical Stores (NMS) for Procurement of Uniforms, we note that this issue requires a change in the MTEF and needed to have been discussed and agreed upon by your Ministry and Local Government representatives during the Sector Grant negotiations convened by the Local Government Finance Commission and held in the month of November 2016 which your Ministry is yet to honour.
6. We note that your proposal to re-centralize part of the development funds will leave most Health facilities in Local Governments with no funds to manage even the simplest rehabilitations. Effecting the change will require updating the MTEF by shifting the funds from the Local Governments to NMS. The adjustment in the MTEF will be done only after a clear justification is provided for re-centralizing part of the development funds. Already, **UShs. 12Bn** was recentralized by your Ministry from the PHC Development grant in FY 2015/16. This is also contrary to the principles of decentralization and will severely constrain operations of decentralized Health Facilities as on average they receive **UShs. 300,000** per quarter. We advise that you cut the **UShs. 3Bn** from those funds to National Medical Stores.
7. Regarding the allocation of the Transitional Development grant (**UShs. 9.2Bn**) which is currently being used to rehabilitate selected Hospitals based on a list provided by your Ministry in FY 2016/17, I would like to draw your attention to our letter Ref: BPD 86/107/01 dated 7<sup>th</sup> November 2016 and the Cabinet sub-committee meeting held on 15<sup>th</sup> December 2016 that discussed the National Budget Framework Paper for FY 2017/18 in which it was guided that all discretionary funding in the budget under any Ministry/Vote should first be used to clear Presidential Pledges.
8. In view of the above, this is to advise that the funds be maintained in the MTEF for Local Governments and the priority needs assessment to ascertain the level of projects under the Transitional Development grant should take into cognizance the list of Presidential pledges. In that regard, therefore, this is, to request you to attach all Presidential Pledges in your Ministry that are scheduled to be handled under this allocation and the list of beneficiary Health facilities under each Local Government with a clear criteria provided for selection and what the **UShs. 9.2Bn** will clear next financial year. This will enable Local Governments initiate early Procurements to avoid delays during budget implementation.

#### **Transitional Development -Sanitation (Health)**

9. Whereas you have allocated funds for the Health Sanitation grant to 38 districts, the eight proposed District Local Governments (**Namayingo, Mayuge, Sironko, Nakasongola, Hoima, Buliisa, Napak and Nakapiripirit**) have already been allocated funds under the Water Sanitation grant. For purposes of avoiding a double allocation, you should

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propose other Local Governments in consultation with the Ministry of Water and Environment. This is because, as a principle, the Local Governments supported under the Health Sanitation Grant should not be financed under the Water Sanitation grant.

10. In addition, we note that the breakdown of the funds provided to the beneficiary Local Governments would require adjusting the MTEF accordingly after ascertaining the source of funding as provided in your letter given that the total allocation to the beneficiary Local Governments is **US\$1,156,947,792** against no provision as per the MTEF attached to the First Budget Call Circular for FY 2017/18.

#### **Primary Health Care - Hospital Non-Wage Recurrent Grant**

11. In line with your guidance, we have adjusted in the allocation formula and correctly allocated funds to the General Hospitals of Kagadi, Kalisizo and Kanginima in the districts of Kagadi, Kyotera and Butebo as part of the IPFs for FY 2017/18;

#### **Changes in the IPFs for the Primary Health Care Wage Grant**

12. As indicated in our letter Ref: BPD 86/107/01 dated 7<sup>th</sup> November 2016, the budget for the PHC Wage grant was maintained at the level of FY 2016/17 budget save for the six new District Local Governments that will become operational in FY 2017/18 whose allocations were made based on the number of Health facilities and resultant population of the Lower Local Governments arising from the split between the 'Mother Districts' based on data from the Uganda Bureau of Statistics
13. In view of the above, we are unable to make the adjustment of the allocation to the PHC Wage grants to the Local Governments indicated in your letter. This is to request you to take up this matter with the Ministry of Public Service who have the oversight role of reviewing Wage budget estimates and Payroll Management.
14. The purpose of this letter, therefore, is to:
  - i). Inform you that we are unable to honour your request to implement your proposal to proportionately allocate the funds hitherto for Health Sub-districts (**US\$4.7Bn**) to all Health Centres III and IV;
  - ii). Inform you that the funds under the Transitional Development Grant (**US\$9.2Bn**) will be for Presidential Pledges and should be maintained as decentralised in the MTEF under Local Governments. We also request your Ministry to provide a list of all Presidential Pledges and the ones you want to clear by Health facility in FY 2017/18 by **close of business 29<sup>th</sup> December, 2016** so that Local Governments can adequately prepare for utilization of the funds;
  - iii). Request you to provide us with the updated list of the number of HC III and IV submitted by your Ministry clearly indicating the allocations to each facility to be captured in the cost-centre database in OTIMS. **Please note that the above issues have delayed the dissemination of IPFs to Local Governments to facilitate the preparation of their Budget Framework Papers;** and

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- iv). Request you to conduct negotiations on the above issues with Local Governments and Local Government Finance Commission including re-centralizing funds from Local Governments under the sector as a matter of urgency (**as per the attached letter**). The agreed positions in the negotiations will be communicated in the Second Budget Call Circular FY 2017/18.

By copy of this letter, the Permanent Secretary, Ministry of Water and Environment is particularly informed on the issue of resource allocation for the sanitation grant.



Keith Muhakanizi

**PERMANENT SECRETARY/SECRETARY TO THE TREASURY**

Copy to: The Hon. Minister of Finance, Planning and Economic Development  
The Hon. Minister of Health  
The Hon. Ministers of State for Finance, Planning and Economic Development  
The Hon. Ministers of State for Health  
The Head of Public Service and Secretary to Cabinet  
The Principal Private Secretary to the President, Office of the President  
The Permanent Secretary, Office of the Prime Minister  
The Permanent Secretary, Ministry of Public Service  
The Permanent Secretary, Ministry of Water and Environment  
The Permanent Secretary, Ministry of Local Government  
The Secretary, Local Government Finance Commission  
The Chairperson, Uganda Local Governments Association  
The Secretary General, Uganda Local Governments Association

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THE REPUBLIC OF UGANDA

**LOCAL GOVERNMENT FINANCE  
COMMISSION**  
10<sup>th</sup> Workers House  
Plot 1 Pilkington Road  
P.O Box 23143  
**KAMPALA**

IN ANY CORRESPONDENCE  
ON THIS SUBJECT PLEASE QUOTE NO. FIN/103/141/01

14<sup>th</sup> November 2016

The Permanent Secretary  
Ministry of Health  
KAMPALA

**SECTOR CONDITIONAL GRANTS NEGOTIATIC**

Reference is made to ours of even reference dated 17<sup>th</sup> October 2016 and 31<sup>st</sup> October 2016 on the subject matter which were convened and facilitated by the Local Government Finance Commission. As communicated to you, the exercise was conducted from 07<sup>th</sup> – 11<sup>th</sup> November 2016 and the Ministry of Health was scheduled for Wednesday 9<sup>th</sup> November 2016.

However, contrary to the requirements of the negotiating team from the Ministry of Health that the team leader should be the Permanent Secretary or a delegated officer not below the rank of a Director, the team from the Ministry of Health was not well prepared and therefore, the negotiations could not be held.

It was therefore decided that the Commission should organise another meeting to enable the negotiations between the Ministry of Health and the Local Governments take place in a period of two weeks with the Ministry of Health meeting the costs.

The Commission would like to restate that Negotiations between the sector ministry and the local governments is a Constitutional Requirement (Article 193 (3)) and also part of the budget formulation process.

The purpose of this letter is therefore, to bring this matter to your attention and request you to inform the Commission a particular date within the next two weeks when the exercise can be conducted to fulfil the legal requirement.

  
Lawrence Banyoya

**COMMISSION SECRETARY**

CC : THE Permanent Secretary, Office of the Prime Minister  
CC : The Permanent Secretary/Secretary to Treasury, Ministry of Finance,  
Planning and Economic Development.  
CC : The Permanent Secretary, Ministry of Public Service  
CC : the Permanent Secretary, Ministry of Local Government

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IN ANY CORRESPONDENCE ON



Ministry of Health  
P. O. Box 7272  
Kampala  
Uganda

THIS SUBJECT PLEASE QUOTE NO **FIN/340/012**

THE REPUBLIC OF UGANDA

12<sup>th</sup> December, 2016

The Permanent Secretary/ Secretary to treasury,  
Ministry of Finance, Planning and Economic Development,  
**KAMPALA.**

**CONFIRMATION OF INDICATIVE PLANNING FIGURES (IPFs) FOR GRANT TRANSFERS TO LOCAL GOVERNMENTS FOR THE PREPARATION OF THE BUDGET FRAMEWORK PAPER (BFP) FY 2017/18**

Reference is made to your letter dated 7<sup>th</sup> November, 2016 communicating the draft IPFs for FY2017/18 for the various grants to the LGs as well as requesting the line ministries to confirm the schedule of the IPFs generated by your Ministry.

The Ministry of Health reviewed the draft IPFs for FY2017/18 and has noted some critical issues that should be addressed before finalizing the IPFs.

The purpose of this letter is therefore to forward to you the issues noted and recommendations made by this Ministry for your consideration. It may also be important to have a meeting and agree on one common position by the two sectors before the IPFs are communicated to the Local Governments

Ssegawa Ronald Gyagenda  
**For: PERMANENT SECRETARY**

Cc: Hon. Minister of Health  
Cc: Director General Health Service  
Cc: Director Planning & Development

## ANNEX 1

### ISSUES NOTED AND RECOMMENDATIONS FROM THE MINISTRY OF HEALTH REGARDING THE DRAFT IPFs FY2017/18

#### 1) The Health Sub District (HSD) allocations

As you are aware, "number of HSDs per LG" is one of the variables used in the allocation formulae for FY2016/17. The HSD concept was introduced in FY2015/16 and an allocation of **UShs. 4.7 Billion** was provided. However, implementation of the concept has faced significant challenges when the facilities are grossly underfunded. Ministry of Health recommends that the **UShs. 4.7 Billion Should be re-allocated to all Health Centres III and IV proportionately to improve service delivery.**

#### 2) Development -Normal Grant

In FY2015/16, the PHC Development - Normal had a grant allocation of **UShs. 3 Billion** and during the consolidation of grants in FY2016/17, the grant was re-structured i.e. **UShs. 2 Billion** was re-allocated to PHC Non Wage Recurrent while **UShs. 1 Billion** was re-allocated to Transitional Development -Health Ad Hoc for the rehabilitation of General Hospitals.

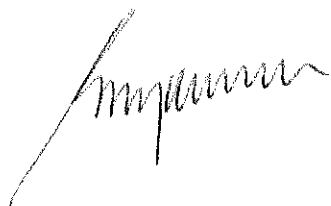
The Ministry is facing a challenge of staff uniforms and therefore recommends that the above funds totaling to **UShs. 3Billion be curved out and re-allocated to NMS for procurement of uniforms in FY2017/18.**

#### 3) IPFs for Transitional Development - Health Adhoc Grant

According to the draft IPFs for FY2017/18, the Transitional Development Health Adhoc Grant was maintained at the level of FY2016/17 i.e. **UShs. 9.2 Billion** (Excluding allocation to Kibaale DLG that was allocated shs. 300 million)

However, with the re-allocation of **UShs. 1 Billion** to NMS as per (2) above, this grant will reduce to **UShs. 8.2 Billion.**

The Ministry of Health is carrying out a priority needs assessment to ascertain the sector projects which should be funded under the transitional development grant - adhoc in FY2017/18. You are therefore requested not to communicate the draft IPFs under this grant until advised by the Ministry of Health.



#### 4) Transitional Development – Sanitation (Health)

Please find below schedule of the Sanitation Grant IPFs agreed upon between the Ministry of Health and the Donor. The financing agreement is attached for ease of reference

**Table 1: UGANDA SANITATION FUND GRANT DISTRICT INDICATIVE PLANNING FIGURES FY 2017/18**

SN	VOTE	LOCAL GOVERNMENT	IPFs	SOURCE OF FUNDING
1	506	Bushenyi District	35,024,000	These first 15 districts shall be financed by GoU Counterpart funding as per the USF Grant Support Agreement
2	514	Kaberamaido District	78,804,000	
3	522	Katakwi District	78,804,000	
4	529	Kumi District	78,804,000	
5	537	Mbarara District	35,024,000	
6	548	Pallisa District	78,804,000	
7	553	Soroti District	78,804,000	
8	564	Amolatar District	78,804,000	
9	565	Amuria District	78,804,000	
10	605	Kibuku	78,804,000	
11	575	Dokolo District	78,804,000	
12	578	Bukedea District	78,804,000	
13	596	Serere District	78,804,000	
14	603	Ngora District	78,804,000	
15	609	Sheema District	35,024,000	
16	502	Apac District	140,481,264	Donor funded
17	503	Arua District	140,481,264	
18	531	Lira District	140,481,264	
19	539	Moyo District	140,481,264	
20	545	Nebbi District	140,481,264	
21	556	Yumbe District	140,481,264	
22	557	Butaleja District	140,481,264	
23	563	Koboko District	140,481,264	
24	577	Maracha District	140,481,264	
25	586	Otuke District	140,481,264	
26	587	Zombo District	140,481,264	
27	588	Alebtong District	140,481,264	
28	589	Bulambuli District	140,481,264	
29	571	Budaka	140,481,264	
30	607	Kole District	140,481,264	
31	514	Namayingo	131,340,000	These 8 expansion districts shall be financed by GoU Counterpart funding as per the USF Grant Support Agreement
32	535	Mayuge	131,340,000	
33	552	Sironko	131,340,000	
34	544	Nakasongola	131,340,000	
35	509	Hoima	131,340,000	
36	576	Bulisa	131,340,000	
37	604	Napak	131,340,000	
38	543	Nakapiripit	131,340,000	



## **5) Primary Health Care – Hospital Non Wage Recurrent**

### **5.1 Kagadi General Hospital allocation**

The review of the draft IPFs FY2017/18 revealed that UGX 131,633,600 has been allocated to Kibaale District under the PHC Hospital NWR Grant. However, with the curving out of Kagadi District, Kagadi Hospital, formerly a General Hospital in Kibaale District, by location moved to Kagadi District.

This IPF should therefore be re-allocated to Kagadi District Vote for better management.

### **5.2 Kalisizo General Hospital**

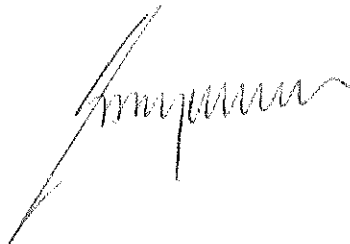
With the creation of Kyotera District Local Government which will become effective FY2017/18, Kalisizo General Hospital which was formerly under Rakai District will move to Kyotera District Local Government.

The Ministry of Health therefore recommends that the hospital should be considered under Kyotera District in the allocation formulae and not under Rakai District.

### **5.3 Kanginima Hospital**

With the creation of Butebo District Local Government, Kanginima Hospital which has been a PNFP hospital in Pallisa District Local Government will move to the new district of Butebo.

The Ministry of Health therefore recommends that the hospital should be considered under Butebo District in the allocation formulae and not under Pallisa District.

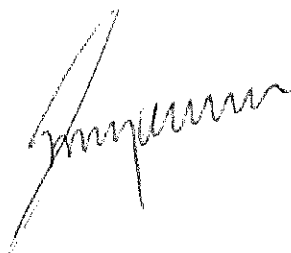


## 6.0 Changes in the IPFs for PHC Wage Recurrent

The following Wage Recurrent deductions are contained in the draft IPFs and there is no explanations provided. In addition some MC have no allocation for Wage. The Ministry of Health recommends a wage analysis for the affected DLG indicated in table 2 below:-

Table 2: PHC Wage Negative Movements

VOTE	LOCAL GOVERNMENT	Conditional wage grant FY16/17	Conditional wage grant FY17/18	Remarks
502	Apac DLG	4,082,041,613	4,022,086,419	Wage deduction of UGX 59,955,194 (1%).
526	Kisoro DLG	4,961,924,056	4,932,954,914	Wage deduction of UGX 28,969,142(1%)
541	Mubende DLG	2,507,122,413	2,459,833,772	Wage deduction of UGX 47,288,641(2%)
555	Wakiso DLG	4,436,331,607	3,430,288,722	Wage deduction of UGX 1,006,042,884 (23%).
558	Ibanda DLG	1,463,106,441	1,127,265,052	Wage deduction of UGX 335,841,389 (23%).
567	Bukwo DLG	2,153,739,047	1,814,075,133	Wage deduction of UGX 339,663,914 (16%).
781	Kira MC	313,186,092	259,719,300	Wage deduction of UGX 53,466,792 (17%).
782	Kisoro MC	398,761,932	28,969,140	Wage deduction of UGX 369,792,791 (93%).
784	Kitgum MC	108,916,176	0	Zero allocation for FY2017/18
788	Lugazi MC	259,719,300	24,840,532	Wage deduction of UGX 234,878,768 (90%).
789	Kamuli MC	582,941,744	0	Zero allocation for FY2017/18





TELEPHONE:



The Republic of Uganda

PALLISA DISTRICT LOCAL GOVERNMENT  
OFFICE OF THE CHIEF ADMIN. OFFICER  
P.O BOX 14,  
PALLISA- UGANDA

In any correspondence on  
this subject please quote CR/219/1

DATE: 29TH NOVEMBER, 2016

The Permanent Secretary/Secretary to the Treasury  
Ministry of Finance, Planning & Econ. Dev't  
**KAMPALA**

09 DEC 2016



**RE: FUNDING REQUEST FOR SOLAR PROVISION IN PALLISA HOSPITAL**

The Ministry of Finance, Planning and Economic Development through the Ministry of Health allocated Pallisa District funds to renovate the District Hospital and works have been concluded.

Notwithstanding the major intervention done on the infrastructure, Pallisa Hospital still requires a facelift in terms of solar power intervention because the District faces load shedding so often and this has acted as an impediment to effective service delivery.

The purpose of this communication is to request you to extend affirmative action so that the District Hospital can deliver on provision of the minimum health care package, and improve the capacity to save lives

Attached is the draft of costed Bills of Quantities.

  Chief Administrative Officer  
Pallisa

Kawooya David

**CHIEF ADMINISTRATIVE OFFICER**

Copy to     The District Chairperson, Pallisa  
Copy to:    The Resident District Commissioner, Pallisa

# **PALLISA DISTRICT LOCAL GOVERNMENT**



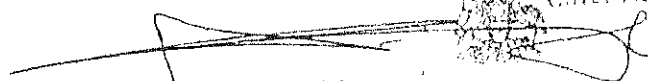
Republic of Uganda

## **PALLISA DISTRICT –PROPOSED PROJECT**

### **FOR PROVISION OF SOLAR POWER TO PALLISA**

### **REFERRAL HOSPITAL**

**2016**

  
Kawooya David  
CHIEF ADMINISTRATIVE OFFICER

Due to the inadequacy of the Grant to the Hospital, payment of power bills is also problematic, and power cuts are experienced in such cases, and you find the hospital under total darkness, hence handling of critical cases at night becomes impossible and many people who would survive, actually end up dying in the process of saving their lives.

Lack of efficient lighting systems normally leads to Mortality of mothers in the process of giving birth in darkness, where sometimes health workers try to innovate and use torches.

The Hospital is also finding it difficult to preserve vaccines needed for immunization because mothers deliver most of the time, and yet they are supposed to receive immunization for the infants, but this meets a challenge of inadequate power source and in the process some mothers have to the next visit after delivery for their babies to be immunized.

Considering the above mentioned handicaps in the Hospital, providing effective service delivery is a nightmare, and meeting the National and Global targets of reducing maternal mortality hits a snag, and at the same time it becomes increasingly impossible to expect child survival to improve in such circumstances.

Power shortage also increases the insecurity at the hospital and the health workers feel insecure, and therefore it is imperative that a reliable source of power be provided to ensure that service delivery becomes effective and improve performance of the sector

Conclusively, Pallisa Hospital has declined in respect to the league table, and such factors like inadequate power supply have hindered effective service delivery and hence failure to meet the Health standards in providing health services to the community.


Therefore a deliberate effort needs to be made to ensure that such constraints are minimized to ensure effective service provision to facilitate the achievement of the desired results.

#### **Expected benefits:**

- ☐ Maternal mortality will reduce and attainment of the National target of improved.
- ☐ The project when funded will improve immunization by preserving vaccines which could be utilized to save the lives of the under fives.
- ☐ Reduction in the cost of delivery of services will be achieved through provision of solar power and PHC funds will be saved, which have been utilized on the purchase of Diesel, paraffin and torches.

#### **Outputs**

- ☐ Maternal mortality during child birth reduced
- ☐ Referral Hospital provided with solar power
- ☐ Immunization coverage increased
- ☐ Quality of services delivered improved

 Chief Administrative Officer

**Outcomes**

- ☐ Mother and child survival enhanced
- ☐ Quality of services delivered improved

**Budget proposed**

- ☐ The proposed Budget for the above project is shs 200,000,000 Uganda Shillings.

  
Kawooya David  
**CHIEF ADMINISTRATIVE OFFICER**

12/01/2016

Appliances	Qty	Watts	Use Hrs	Total Wattage
Security Lights	30	7	12	2,520
Lighting Points	##	7	8	8,400
Fridge	2	150	18	5,400
Computers	5	150	12	9,000
Centrifuge	2	115	6	1,380
Microscope	2	65	6	780
X-Ray Machine	1	650	4	2,600
Total	Includes 10% Provision for loss			33,088

## SOLAR PANEL/ARRAY SIZING

Sun Hours	3
Watts Per Hour	11,029
Open Circuit Cur	14
Sum Voltage	17.2
Actual Power	240.8
No. Of 300W Panel	45.86

Inverter In Watts	3,320
12V Reg. in Amps	834

## BATTERY BANK SIZING

Watt Hrs	DOA	DOD	SumVotg	AH	No. of Batteries
33088	1.5	0.5	12	210	39.39

System Characteristics

Nominal Voltage: 12 VDC

Operating Voltage: 240VAC

System Type

No	Item	Specifications - Make	Qty	Rate	Amount
1	Solar Panels	Multi/MonoCrystalline, 300W/24V 25Yrs - US	48 Pc	1,400,000	67,200,000
2	Solar Batteries	Deka Sealed Gel 210Ah/12V - USA	32 Pc	2,100,000	67,200,000
3	C/Regulator	OutBack FM-80 80A -12-48V MPPT - USA	4 Pc	2,800,000	11,200,000
4	Inverter	Schneider Pure Sine 8,500W/48V - USA	1 Pc	28,500,000	28,500,000
5	Solar Lights	Phillips LED E27, 7W - Holland	150 Pc	25,000	3,750,000
6	Mounting Frame	Galvanised Steel Angles & Flats - Uganda	1 Set	2,850,000	2,850,000
7	Battery Box	Varnished HardWood, Lockable - Uganda	1 Pc	1,650,000	1,650,000
8	Wires & Cables	2.5-120mm Single & Twin, M/Strand - UK	1 Set	4,500,000	4,500,000
9	Accessories	Assorted Wiring Materials - UK/EU	1 Set	2,800,000	2,800,000
10	Earthing System	Pure/Coated 1.2m Earth Rod with Accessory	1 Set	650,000	650,000
11	Main Switch	Hagar 12Way with Breakers -France	1 Pc	350,000	350,000
12	Sockets	Hagar 13 Amp Stylish Double Pole - France	20 Pc	20,000	400,000
13	Light Switches	Hagar 6 Amp Stylish Single Pole - France	150 Pc	5,000	750,000
14	Lamp Holders	Porcelain Glazed Clay/Hard Plastic Model E27	150 Pc	5,000	750,000
	Subtotal - Equipment and Materials Only				192,550,000
	Installation fees for the System				5,500,000
	Transportation of Technicians and Equipment				1,500,000
	Grand Total				199,550,000

Chief Administrative Officer

C. Pallisa

**INTRODUCTION:**

Pallisa District is located in the Eastern part of the Uganda. It is bordering Budaka District on the East, Kumi and Soroti on the North, Namutumba in the South, and Kamuli to the West. The geographical area of the District is 1,095km<sup>2</sup>, of which 338 km<sup>2</sup> District land is covered by water and wetland, whereby 293.3 km<sup>2</sup> are seasonal and 109.7 km<sup>2</sup> are permanent. The total population of the District according to the 2014 census is 386,925, and a growth rate of 3.2per annum.

**Proposed project:**

**Provision of solar power to Pallisa Referral Hospital.**

☐ **Objectives of the project:**

1. To reduce maternal mortality in the District
2. To improve immunisation coverage of the under 5 children in the District in the next five years
3. To provide a secure working environment for health workers especially at night hours

☐ **Target beneficiaries of the project**

- Mothers of child bearing age - 18-49years
- Under 5year Children for immunization
- Other patients on admission

☐ **Background to the project**

Pallisa Hospital is the referral hospital in the District, serving a population of 386,925 as per the recent population and housing census in 2014. The Hospital serves as a referral to other 33 Health centers in the District, and it has been provided with a face lift during which the wards were rehabilitated, but power is still a challenge to improved service delivery as much of the time, the hospital faces power load shedding.


 Chief Administrative Officer  
 Pallisa  
 Kawooya David  
**CHIEF ADMINISTRATIVE OFFICER**

### Population by Sub County

Sn	S/county	Population 2014	Population of child bearing mothers by sub county	Under 1year children projected to 2016
1	Gogonyo	29,557	5970	1271
2	Puti-Puti	25,340	5119	1089
3	Kamuge	21,500	4343	925
6	Butebo	28,787	5815	1238
7	Petete	26,506	5354	1139
8	Opwateta	16,687	3371	717
9	Kakoro	17,588	3552	756
10	Kanginima	9963	2013	428
11	Kabwanga si	28,514	5759	1226
12	Pallisa	15,328	3096	659
13	Kasodo	14,353	2899	617
14	Olok	16224	3277	697
15	Kameke	17,189	3472	739
16	Apopong	27,307	5516	1174
17	Agule	18,254	3687	785
18	Chelekura	11737	2371	505
19	Kibale	16,369	3306	703
		<b>386,925</b>	<b>6,8920</b>	<b>14,668</b>

### Justification

For effective provision of Health services, the Hospital needs to be fully functional, and with a reliable power source to run all the equipments. Currently, Pallisa as a District faces intermittent power supplies,

Due to load shedding and this makes provision of Health services very ineffective most of the time. This therefore calls for provision of a reliable power source to achieve better service provision to the community.

It is apparent that the PHC Grant to the Hospital is increasingly inadequate to provide for alternative power supplies, through provision of fuel to run the generators, and where the generator is utilized, it becomes overloaded and requires regular servicing, and yet the PHC funds can not suffice to handle the increased cost of running the Generator.

In some cases, the Health workers are provided with lanterns, but they are inadequate in case where the hospital gets emergencies like accidents, mothers who may fail to deliver and require operation in the theatre, making service delivery very difficult, yet such cases could be handled, but end being referred to Mbale regional hospital, and increased risk to the people in need of the service.

*[Signature]* Chief Administrative Officer

**Table 1: Local Government Indicative Planning Figures for Health Grants FY 2017/18 generated off OTIMS**

Vöte	District	08 Health							
		Conditional wage grant Health	Conditional non-wage grant	Primary Health Care - Non Wage Recurrent	Primary Healthcare - Hospital Non Wage Recurrent	Development Grant Health	Transitional development grant	Transitional Development - Health Ad Hoc	Transitional Development - Sanitation (Health)
501	Adjumani District	4,517,655,759	524,273,682	344,379,998	179,893,684	0	0	0	0
502	Apac District	4,742,324,473	410,530,503	230,637,218	179,893,285	0	900,000,000	900,000,000	0
503	Arua District	4,263,719,946	983,250,867	525,707,949	457,542,918	0	0	0	0
504	Bugiri District	3,023,451,129	467,698,914	267,599,203	200,099,712	0	0	0	0
505	Bundibugyo District	3,933,776,169	382,310,860	191,422,904	190,887,956	0	300,000,000	300,000,000	0
506	Bushenyi District	1,825,980,447	868,626,424	358,404,504	510,221,920	0	0	0	0
507	Busia District	2,055,088,121	410,691,804	193,097,510	217,594,294	0	0	0	0
508	Gulu District	1,816,354,443	849,056,513	301,892,981	547,163,532	0	0	0	0
509	Hoima District	3,122,435,996	316,079,373	316,079,373	0	0	0	0	0
510	Iganga District	4,201,001,822	549,936,845	334,385,160	215,551,685	0	0	0	0
511	Jinja District	5,446,174,856	460,784,439	336,371,269	124,413,170	0	0	0	0
512	Kabale District	2,406,781,069	602,681,254	256,706,851	345,974,403	0	200,000,000	200,000,000	0
513	Kabarole District	2,293,617,553	534,734,018	220,321,023	314,412,995	0	300,000,000	300,000,000	0
514	Kaberamald District	1,690,948,548	360,783,180	211,723,594	149,059,587	0	0	0	0
515	Kalangala District	2,307,965,510	113,142,783	113,142,783	0	0	0	0	0
517	Kamuli District	2,791,228,915	979,320,387	392,148,286	587,172,101	0	0	0	0
518	Kanwenge District	2,862,862,744	288,722,358	288,722,358	0	0	200,000,000	200,000,000	0
519	Kanungu District	4,237,300,818	590,440,793	265,569,189	324,871,604	0	300,000,000	300,000,000	0
520	Kapchorwa District	2,465,973,301	251,444,529	65,608,180	185,836,349	0	0	0	0
521	Kasese District	6,459,425,201	1,391,558,744	636,757,734	754,801,010	0	0	0	0
522	Katakwi District	2,198,172,680	342,618,150	185,108,474	157,509,675	0	300,000,000	300,000,000	0
523	Kayunga District	3,142,077,016	450,962,146	271,068,861	179,893,285	0	0	0	0
524	Kibaale District	1,328,684,949	52,931,173	52,931,173	0	0	272,000,000	272,000,000	0
525	Kiboga District	2,607,411,874	308,711,589	128,818,307	179,893,282	0	400,000,000	400,000,000	0
526	Kisoro District	4,947,241,216	736,597,521	303,633,710	432,903,811	0	0	0	0
527	Kitgum District	3,634,441,023	870,226,445	160,910,669	709,315,776	0	0	0	0
528	Kotido District	995,432,955	258,206,598	258,206,598	0	0	0	0	0
529	Kumi District	1,748,825,232	581,587,530	90,704,902	490,882,629	0	200,000,000	200,000,000	0
530	Kyenjojo District	3,228,061,377	434,974,463	277,464,784	157,509,679	0	300,000,000	300,000,000	0
531	Lira District	1,787,467,986	243,611,877	243,611,877	0	0	0	0	0
532	Luwero District	4,626,282,815	468,875,585	468,875,585	0	0	300,000,000	300,000,000	0
533	Maaka District	1,648,810,000	581,715,389	246,571,773	335,143,616	0	0	0	0
534	Masindi District	3,193,497,621	332,998,766	137,511,193	195,487,573	0	200,000,000	200,000,000	0
535	Mayuge District	2,676,222,042	433,572,616	266,863,133	166,709,483	0	0	0	0
536	Mbale District	3,567,882,817	404,344,454	284,344,451	120,000,003	0	0	0	0
537	Mbarara District	2,128,821,178	548,317,504	278,527,233	269,790,271	0	0	0	0
538	Moroto District	1,125,901,459	124,606,519	124,606,519	0	0	0	0	0
539	Moyo District	3,928,339,155	454,435,420	275,004,765	179,430,655	0	0	0	0
540	Mpigi District	2,199,093,144	478,220,175	272,964,317	205,255,858	0	500,000,000	500,000,000	0
541	Mubende District	2,540,779,968	351,138,312	351,138,312	0	0	0	0	0
542	Mukono District	2,567,181,019	429,991,427	301,267,760	128,723,667	0	300,000,000	300,000,000	0
543	Nakapiripit District	1,334,490,272	163,027,681	163,027,681	0	0	0	0	0
544	Nakasongola District	2,589,800,448	174,682,399	174,682,399	0	0	0	0	0
545	Nebbi District	2,366,381,668	648,472,581	123,552,402	524,920,179	0	0	0	0
546	Ntungamo District	4,057,121,213	546,082,984	336,474,364	209,608,620	0	0	0	0
547	Pader District	2,491,254,370	153,682,716	153,682,716	0	0	0	0	0
548	Pallisa District	2,230,209,011	378,745,599	118,241,718	260,503,881	0	350,000,000	350,000,000	0
549	Rakai District	3,892,699,635	451,258,527	197,671,214	253,587,313	0	0	0	0
550	Rukungiri District	2,564,578,217	982,723,471	481,147,450	501,576,021	0	0	0	0
551	Sembabule District	1,235,823,822	206,018,037	206,018,037	0	0	0	0	0
552	Sironko District	2,446,959,052	216,320,750	216,320,750	0	0	0	0	0
553	Soroti District	1,227,125,532	174,805,354	174,805,354	0	0	0	0	0
554	Tororo District	4,989,205,961	977,198,335	399,427,746	577,770,589	0	500,000,000	500,000,000	0
555	Wakiso District	3,430,288,723	998,288,135	484,266,493	514,021,642	0	0	0	0
556	Yumbe District	3,155,964,551	426,627,105	246,790,750	179,836,355	0	0	0	0
557	Butaleja District	2,693,180,908	389,708,373	171,538,167	218,170,205	0	0	0	0
558	Ibanda District	1,127,265,052	401,532,456	201,552,747	199,979,709	0	300,000,000	300,000,000	0
559	Kaabong District	2,850,122,798	471,998,674	292,162,325	179,836,350	0	0	0	0
560	Isingiro District	2,842,470,451	338,736,214	338,736,214	0	0	0	0	0
561	Kaliro District	1,400,846,880	174,180,935	174,180,935	0	0	0	0	0
562	Kiruhura District	2,507,667,012	476,901,301	268,659,340	208,241,960	0	0	0	0
563	Koboko District	581,971,077	201,675,176	91,415,494	110,259,681	0	0	0	0
564	Amolatar District	1,035,244,584	281,687,725	129,133,486	152,554,239	0	0	0	0
565	Amuria District	2,249,293,534	293,589,950	293,589,950	0	0	0	0	0
566	Manafwa District	2,376,447,770	49,675,378	49,675,378	0	0	0	0	0
567	Bukwo District	1,814,075,134	259,070,553	101,310,878	157,759,675	0	0	0	0
568	Mityana District	3,848,121,562	538,968,480	343,274,464	195,694,016	0	0	0	0
569	Nakaseke District	3,795,026,600	479,127,311	152,020,536	327,106,775	0	0	0	0
570	Amuru District	1,361,510,508	202,708,985	202,708,985	0	0	0	0	0
571	Budaka District	1,311,502,048	213,940,462	146,809,060	67,131,402	0	0	0	0
572	Oyam District	1,668,204,663	573,679,858	226,637,858	347,042,000	0	300,000,000	300,000,000	0
573	Abim District	1,941,784,082	407,206,698	221,370,349	185,836,349	0	0	0	0
574	Namutumba District	1,198,615,844	245,661,993	245,661,993	0	0	0	0	0



**Table 1: Local Government Indicative Planning Figures for Health Grants FY 2017/18 generated off OTIMS**

Vöte	District	08 Health							
		Conditional wage grant Health	Conditional non-wage grant	Primary Health Care - Non Wage Recurrent	Primary Healthcare - Hospital Non Wage Recurrent	Development Grant Health	Transitional development grant	Transitional Development - Health Ad Hoc	Transitional Development - Sanitation (Health)
575	Dokolo District	1,394,432,804	179,574,706	179,574,706	0	0	0	0	0
576	Bullisa District	1,985,035,691	188,348,256	98,078,574	90,269,682	0	0	0	0
577	Maracha District	2,048,898,430	463,929,668	187,726,699	276,202,969	0	200,000,000	200,000,000	0
578	Bukedea District	1,091,244,660	167,204,454	167,204,454	0	0	0	0	0
579	Bududa District	2,118,631,699	318,322,171	137,428,889	180,893,283	0	300,000,000	300,000,000	0
580	Lyantonde District	2,464,116,590	291,160,861	113,644,806	177,516,055	0	500,000,000	500,000,000	0
581	Amudat District	484,766,478	269,539,240	67,856,073	201,683,167	0	0	0	0
582	Bulkwe District	2,267,369,363	618,456,079	114,050,050	504,406,029	0	0	0	0
583	Buyende District	1,088,475,741	233,497,640	233,497,640	0	0	0	0	0
584	Kyegegwa District	1,666,936,708	115,677,159	115,677,159	0	0	0	0	0
585	Lamwo District	1,646,489,378	137,038,370	137,038,370	0	0	0	0	0
586	Otuke District	868,965,769	90,585,177	90,585,177	0	0	0	0	0
587	Zombo District	1,429,667,880	476,454,276	240,729,513	235,724,763	0	500,000,000	500,000,000	0
588	Alebtong District	1,035,789,636	132,575,580	132,575,580	0	0	0	0	0
589	Bulambuli District	2,164,133,106	119,539,935	119,539,935	0	0	0	0	0
590	Buvuma District	940,589,640	67,204,417	67,204,417	0	0	0	0	0
591	Gomba District	1,010,732,239	130,888,566	130,888,566	0	0	0	0	0
592	Kiryandongo District	2,093,638,620	356,310,535	167,352,543	188,957,992	0	0	0	0
593	Luuka District	1,444,064,076	193,066,559	193,066,559	0	0	0	0	0
594	Namayingo District	1,381,822,052	139,181,458	139,181,458	0	0	0	0	0
595	Ntoroko District	701,496,893	78,111,308	78,111,308	0	0	0	0	0
596	Serere District	1,529,686,386	170,031,684	170,031,684	0	0	0	0	0
597	Kyankwanzi District	1,405,542,360	152,397,232	152,397,232	0	0	0	0	0
598	Kalungu District	1,383,833,782	397,557,933	210,571,140	186,986,793	0	0	0	0
599	Lwengo District	1,686,664,882	227,717,773	227,717,773	0	0	0	0	0
600	Bukomansimbi District	915,878,126	156,582,231	156,582,231	0	0	0	0	0
601	Mitooma District	1,085,741,353	134,942,016	134,942,016	0	0	0	0	0
602	Rubirizi District	825,141,588	91,623,235	91,623,235	0	0	0	0	0
603	Ngora District	1,174,974,657	560,175,753	110,443,461	449,732,292	0	0	0	0
604	Napak District	1,442,735,835	715,610,084	129,209,341	586,400,743	0	0	0	0
605	Kibuku District	1,498,771,752	143,378,316	143,378,316	0	0	300,000,000	300,000,000	0
606	Nwoya District	1,691,471,218	249,052,421	69,621,748	179,430,674	0	0	0	0
607	Kole District	1,270,350,851	137,365,042	137,365,042	0	0	0	0	0
608	Butambala District	1,820,249,464	260,656,763	80,763,481	179,893,282	0	300,000,000	300,000,000	0
609	Sheema District	2,101,506,748	296,850,398	116,956,724	179,893,674	0	0	0	0
610	Buhweju District	630,493,631	86,047,953	86,047,953	0	0	0	0	0
611	Agago District	1,806,201,288	699,978,683	149,129,617	550,849,066	0	0	0	0
612	Kween District	1,660,027,141	101,129,763	101,129,763	0	0	0	0	0
613	Kagadi District	2,980,546,628	218,998,317	39,105,035	179,893,282	0	300,000,000	300,000,000	0
614	Kakumiro District	1,027,403,928	38,088,120	38,088,120	0	0	0	0	0
615	Omoro District	1,220,667,324	21,909,913	21,909,913	0	0	0	0	0
616	Rubanda District	1,658,005,800	29,490,559	29,490,559	0	0	0	0	0
617	Namishindwa District	1,427,805,972	192,155,550	192,155,550	0	0	0	0	0
618	Pakwach District	1,214,425,593	156,113,253	156,113,253	0	0	0	0	0
619	Butebo District	1,332,389,066	124,830,495	124,830,495	0	0	0	0	0
620	Rukiga District	1,343,259,677	136,633,028	136,633,028	0	0	0	0	0
621	Kyotera District	3,347,397,782	347,780,875	299,521,195	48,259,680	0	300,000,000	300,000,000	0
622	Bunyangabu District	1,194,397,937	191,758,398	191,758,398	0	0	0	0	0
751	Arua Municipal Council	519,839,250	52,789,130	52,789,130	0	0	0	0	0
752	Entebbe Municipal Council	1,436,554,876	49,862,819	49,862,819	0	0	500,000,000	500,000,000	0
753	Fort-Portal Municipal Council	619,670,432	56,377,435	56,377,435	0	0	0	0	0
754	Gulu Municipal Council	484,716,295	65,099,673	65,099,673	0	0	0	0	0
755	Jinja Municipal Council	1,159,664,129	73,962,906	73,962,906	0	0	0	0	0
757	Kabale Municipal Council	394,957,449	59,659,937	59,659,937	0	0	0	0	0
758	Lira Municipal Council	332,917,924	41,949,222	41,949,222	0	0	0	0	0
759	Masaka Municipal Council	225,913,763	50,114,576	50,114,576	0	0	0	0	0
760	Mbale Municipal Council	891,810,357	66,919,088	66,919,088	0	0	0	0	0
761	Mbarara Municipal Council	873,582,552	70,994,644	70,994,644	0	0	0	0	0
762	Moroto Municipal Council	186,205,146	25,937,291	25,937,291	0	0	0	0	0
763	Soroti Municipal Council	757,919,329	56,221,114	56,221,114	0	0	0	0	0
764	Tororo Municipal Council	420,684,118	57,670,131	57,670,131	0	0	0	0	0
770	Kasese Municipal Council	1,992,948,036	43,433,789	43,433,789	0	0	0	0	0
771	Hoima Municipal Council	312,528,997	26,131,882	26,131,882	0	0	0	0	0
772	Mukono Municipal Council	851,839,347	34,030,652	34,030,652	0	0	0	0	0
773	Iganga Municipal Council	235,844,601	24,518,724	24,518,724	0	0	0	0	0
774	Masindi Municipal Council	343,656,480	23,026,673	23,026,673	0	0	0	0	0
775	Ntungamo Municipal Council	293,343,924	36,507,918	36,507,918	0	0	0	0	0
776	Busia Municipal Council	287,319,144	35,011,914	35,011,914	0	0	0	0	0
777	Bushenyi- Ishaka Municipality	367,936,837	16,242,111	16,242,111	0	0	0	0	0
778	Rukungiri Municipal Council	455,762,528	19,958,742	19,958,742	0	0	0	0	0
779	Nansana Municipal Council	1,006,042,884	223,725,400	223,725,400	0	0	0	0	0
780	Makindye-Ssabagabo Municipality	407,932,992	178,036,365	178,036,365	0	0	0	0	0
781	Kira Municipal Council	259,719,300	183,537,924	183,537,924	0	0	0	0	0
782	Kisoro Municipal Council	28,969,140	54,530,859	54,530,859	0	0	0	0	0

**Table 1: Local Government Indicative Planning Figures for Health Grants FY 2017/18 generated off OTIMS**

Vote	District	08 Health							
		Conditional wage grant Health	Conditional non-wage grant	Primary Health Care - Non Wage Recurrent	Primary Healthcare - Hospital Non Wage Recurrent	Development Grant Health	Transitional development grant	Transitional Development - Health Ad Hoc	Transitional Development - Sanitation (Health)
783	Mityana Municipal Council	422,511,400	67,397,739	67,397,739	0	0	0	0	0
784	Kitgum Municipal Council	59,480,590	29,796,092	29,796,092	0	0	0	0	0
785	Koboko Municipal Council	398,761,932	88,389,772	88,389,772	0	0	0	0	0
786	Mubende Municipal Council	156,204,816	29,801,072	29,801,072	0	0	0	0	0
787	Kumi Municipal Council	582,941,744	57,794,309	57,794,309	0	0	0	0	0
788	Lugazi Municipal Council	258,333,268	67,466,233	67,466,233	0	0	0	0	0
789	Kamuli Municipal Council	163,471,668	41,107,867	41,107,867	0	0	0	0	0
790	Kapchorwa Municipal Council	313,186,092	34,129,243	34,129,243	0	0	0	0	0
791	Ibanda Municipal Council	880,589,707	64,816,019	64,816,019	0	0	0	0	0
792	Njeru Municipal Council	444,448,428	57,253,198	57,253,198	0	0	0	0	0
793	Apac Municipal Council	141,732,048	13,586,672	13,586,672	0	0	0	0	0
794	Nebbi Municipal Council	958,825,328	25,736,123	25,736,123	0	0	0	0	0
795	Bugiri Municipal Council	39,415,188	21,410,273	21,410,273	0	0	0	0	0
796	Sheema Municipal Council	689,008,656	61,442,776	61,442,776	0	0	0	0	0
797	Kotido Municipal Council	400,882,687	36,532,227	36,532,227	0	0	0	0	0
	<b>Total</b>	<b>289,961,888,930</b>	<b>45,851,068,861</b>	<b>26,688,799,007</b>	<b>19,162,269,854</b>	<b>0</b>	<b>9,622,000,000</b>	<b>9,622,000,000</b>	<b>0</b>