

# Vote: 163 Arua Referral Hospital

## Vote Summary

### VI: Vote Overview

This section sets out the Vote Mission, Strategic Objectives, and provides a description of the vote's services

#### (i) Snapshot of Medium Term Budget Allocations

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

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

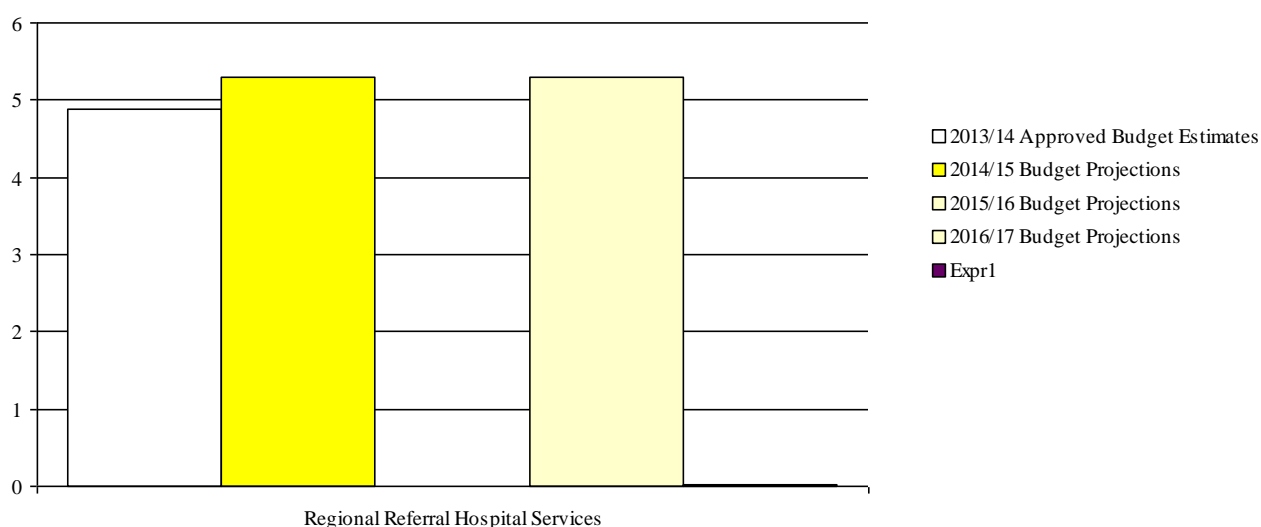
	2012/13 Outturn	2013/14		MTEF Budget Projections		
		Approved Budget	Spent by End Dec	2014/15	2015/16	2016/17
<i>(i) Excluding Arrears, Taxes</i>						
Recurrent						
Wage	2.067	2.910	1.368	2.910	2.910	2.285
Non Wage	0.762	1.206	0.671	1.382	1.010	1.010
Development						
GoU	1.295	0.796	0.308	1.000	2.000	2.000
Ext.Fin	0.000	0.000	0.000	0.000	0.000	0.000
<b>GoU Total</b>	<b>4.118</b>	<b>4.913</b>	<b>2.346</b>	<b>5.293</b>	<b>5.920</b>	<b>5.295</b>
<b>Total GoU+Donor (MTEF)</b>	<b>4.118</b>	<b>4.913</b>	<b>2.346</b>	<b>5.293</b>	<b>5.920</b>	<b>5.295</b>
<i>(ii) Arrears and Taxes</i>						
Arrears	0.003	0.000	0.000	0.000	N/A	N/A
Taxes**	0.006	0.025	0.000	0.025	N/A	N/A
<b>Total Budget</b>	<b>4.127</b>	<b>4.938</b>	<b>2.346</b>	<b>5.318</b>	<b>N/A</b>	<b>N/A</b>
<i>(iii) Non Tax Revenue</i>						
Grand Total	0.000	0.070	0.015	0.070	0.000	0.000
<b>Excluding Taxes, Arrears</b>	<b>4.118</b>	<b>4.983</b>	<b>2.361</b>	<b>5.363</b>	<b>5.920</b>	<b>5.295</b>

\* Donor expenditure data unavailable

\*\* Non VAT taxes on capital expenditure

The chart below shows total funding allocations to the Vote by Vote Function over the medium term:

**Chart V1.1: Medium Term Budget Projections by Vote Function (UShs Bn, Excluding Taxes, Arrears)**



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### (ii) Vote Mission Statement

The Vote's Mission Statement is:

*To provide to the people of North Western region of Uganda quality general and specialised health services in a client centered manner while underscoring the virtuous principles and values of equity, non-discrimination and transparency that will transform the people into a productive population.*

### (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**

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

## V2: Past Vote Performance and Medium Term Plans

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

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

#### 2012/13 Performance

Medical ward complex completed and handed over. The lagoon works halted by court injunction.

#### Preliminary 2013/14 Performance

1. Court still to prevail over the process of lagoon construction.
2. The construction of the fence at bid evaluation stage.
3. Procurement of consultancy for design of maternity and sewerage works.

**Table V2.1: Past and 201/12 Key Vote Outputs\***

<i>Vote, Vote Function Key Output</i>	<b>Approved Budget and Planned outputs</b>	<b>2013/14 Spending and Outputs Achieved by End Dec</b>	<b>2014/15 Proposed Budget and Planned Outputs</b>
<b>Vote: 163 Arua Referral Hospital</b>			
<b>Vote Function: 0856 Regional Referral Hospital Services</b>			
<b>Output: 085601</b>	<b>Inpatient services</b>		
<i>Description of Outputs:</i>	21,500 Admissions.	5,498 Admissions	21,500 Admissions.
	2,600 Major Surgeries.		2,600 Major Surgeries.
	5,200 deliveries.	5 days ALOS	5,200 deliveries.
	85% Bed Occupancy rate.	72 BOR	85% Bed Occupancy rate.
	4 days Average length of stay.		4 days Average length of stay.
<i>Performance Indicators:</i>			

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<i>Vote, Vote Function Key Output</i>	<b>Approved Budget and Planned outputs</b>	<b>2013/14 Spending and Outputs Achieved by End Dec</b>	<b>2014/15 Proposed Budget and Planned Outputs</b>
No. of in patients admitted	21,500	5,498	21,500
Bed occupancy rate (inpatients)	85	72	85
Average rate of stay for inpatients (no. days)	4	5	4
<i>Output Cost: US\$ Bn:</i>	<i>0.340</i>	<i>US\$ Bn: 0.085</i>	<i>US\$ Bn: 0.348</i>
<b>Output: 085602</b>	<b>Outpatient services</b>		
<i>Description of Outputs:</i>	92,000 outpatient's attendance, 86,000 specialized clinic attendance,	17,218 General OPD attendance 28,012 specialised OPD attendance	92,000 outpatient's attendance, 86,000 specialized clinic attendance,
<i>Performance Indicators:</i>			
No. of specialised outpatients attended to	86,000	28,012	86,000
No. of general outpatients attended to	92,000	17,218	92,000
<i>Output Cost: US\$ Bn:</i>	<i>0.175</i>	<i>US\$ Bn: 0.048</i>	<i>US\$ Bn: 0.175</i>
<b>Output: 085603</b>	<b>Medicines and health supplies procured and dispensed</b>		
<i>Description of Outputs:</i>	Value of medicines by end of FY 1.10bn	Value of medicines by end of FY 0.275	Value of medicines by end of FY 1.10bn
<i>Performance Indicators:</i>			
Value of medicines received/dispensed (Ush bn)	1.1	.0275	1.1
<i>Output Cost: US\$ Bn:</i>	<i>0.075</i>	<i>US\$ Bn: 0.013</i>	<i>US\$ Bn: 0.075</i>
<b>Output: 085604</b>	<b>Diagnostic services</b>		
<i>Description of Outputs:</i>	100,000 lab tests done, 12,500 imagings done, 80 postmortems done	2,014 Imagings done 18,868 Lab examinations done 25 Postmortem done	100,000 lab tests done, 12,500 imagings done, 80 postmortems done
<i>Performance Indicators:</i>			
Patient xrays (imaging)	12500	2014	12500
No. of labs/tests	100000	18868	100000
<i>Output Cost: US\$ Bn:</i>	<i>0.076</i>	<i>US\$ Bn: 0.018</i>	<i>US\$ Bn: 0.076</i>
<b>Output: 085606</b>	<b>Prevention and rehabilitation services</b>		
<i>Description of Outputs:</i>	40,500 children immunized, 4,500 women immunized, 20,500 mothers for ANC, 5,600 Family planning contacts,	4,236 ANC attendance 909 FP attendance 7,959 Children immunised 867 women immunized	40,500 children immunized, 4,500 women immunized, 20,500 mothers for ANC, 5,600 Family planning contacts,
<i>Performance Indicators:</i>			
No. of people receiving family planning services	5,600	909	5,600
No. of people immunised	45,000	8,826	40,500
No. of antenatal cases	20,500	4,236	20,500
<i>Output Cost: US\$ Bn:</i>	<i>0.121</i>	<i>US\$ Bn: 0.041</i>	<i>US\$ Bn: 0.121</i>
<b>Output: 085680</b>	<b>Hospital Construction/rehabilitation</b>		
<i>Description of Outputs:</i>	1. Fencing of the Hospital.	construction on going	Hospital lagoon completed
<i>Performance Indicators:</i>			
No. reconstructed/rehabilitated	0	0	0

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<i>Vote, Vote Function Key Output</i>	<b>Approved Budget and Planned outputs</b>	<b>2013/14 Spending and Outputs Achieved by End Dec</b>	<b>2014/15 Proposed Budget and Planned Outputs</b>
general wards			
No. of hospitals benefiting from the renovation of existing facilities.	1	1	1
<i>Output Cost: US\$ Bn:</i>	0.396	<i>US\$ Bn:</i> 0.110	<i>US\$ Bn:</i> 0.475
<b>Output: 085681</b>	<b>Staff houses construction and rehabilitation</b>		
<i>Description of Outputs:</i>	Staff houses constructed	staff house construction on going.	Staff houses constructed (Nurses hostel)
<i>Performance Indicators:</i>			
No. of staff houses constructed/rehabilitated	6	6	6
<i>Output Cost: US\$ Bn:</i>	0.400	<i>US\$ Bn:</i> 0.198	<i>US\$ Bn:</i> 0.525
<b>Vote Function Cost</b>	<b><i>US\$ Bn:</i> 5.008</b>	<b><i>US\$ Bn:</i> 2.346</b>	<b><i>US\$ Bn:</i> 5.363</b>
<b>Cost of Vote Services:</b>	<b><i>US\$ Bn:</i> 4.983</b>	<b><i>US\$ Bn:</i> 2.346</b>	<b><i>US\$ Bn:</i> 5.363</b>

\* Excluding Taxes and Arrears

### 2014/15 Planned Outputs

1. 21,500 Admissions, 2,600 Major Surgeries, 5,200 deliveries, 85% Bed Occupancy rate, 4 days Average length of stay, 178,000 outpatient attendances, medicines and supplies worth 1.2 bn procured, 100,000 laboratory tests done, 12,100 imaging done and 80 postmortems done, hospital management and preventive services. 2. Completion of Fencing of the hospital phase I, Construction of staff houses phase II.

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

<i>Vote Function Key Output Indicators and Costs:</i>	<b>2012/13 Outturn</b>	<b>2013/14 Approved Plan</b>	<b>Outturn by End Dec</b>	<b>MTEF Projections</b>		
				<b>2014/15</b>	<b>2015/16</b>	<b>2016/17</b>
<b>Vote: 163 Arua Referral Hospital</b>						
<b>Vote Function: 0856 Regional Referral Hospital Services</b>						
Average rate of stay for inpatients (no. days)	5	4	5	4	4	4
Bed occupancy rate (inpatients)	63	85	72	85	85	85
No. of in patients admitted	20692	21,500	5,498	21,500	22000	22500
No. of general outpatients attended to	90178	92,000	17,218	92,000	92500	93000
No. of specialised outpatients attended to	83000	86,000	28,012	86,000	88000	90000
Value of medicines received/dispensed (Ush bn)	0.833	1.1	.0275	1.1	1.2	1.5
No. of labs/tests	58948	100000	18868	100000	102000	103000
Patient xrays (imaging)	12116	12500	2014	12500	13000	14000
No. of antenatal cases	19626	20,500	4,236	20,500	21500	22000
No. of people immunised	44980	45,000	8,826	40,500	45000	45000
No. of people receiving family planning services	5498	5,600	909	5,600	5600	5600
No. of hospitals benefiting from the renovation of existing facilities.	0	1	1	1	1	1
No. reconstructed/rehabilitated general wards	0	0	0	0	0	0
No. of staff houses constructed/rehabilitated	0	6	6	6	6	6

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Vote Function Key Output Indicators and Costs:	2012/13 Outturn	2013/14 Approved Plan	2013/14 Outturn by End Dec	MTEF Projections		
				2014/15	2015/16	2016/17
No. of maternity wards constructed		0	0	0	0	0
No. of maternity wards rehabilitated		0	0	0	0	0
No. of OPD wards constructed		0	0	0	0	0
No. of OPD wards rehabilitated		0	0	0	0	0
No. of other wards constructed			0			
No. of other wards rehabilitated			0			
No. of theatres constructed		0	0	0	0	0
No. of theatres rehabilitated		0	0	0	0	0
Value of medical equipment procured (Ush Bn)		0	0	0	0	0
<b>Vote Function Cost (UShs bn)</b>	<b>4.127</b>	<b>4.983</b>	<b>2.346</b>	<b>5.363</b>		<b>5.295</b>
<b>Cost of Vote Services (UShs Bn)</b>	<b>4.127</b>	<b>4.983</b>	<b>2.346</b>	<b>5.363</b>		<b>5.295</b>

### Medium Term Plans

1. Continuation of provision of general hospital services including cancer treatment. 2. continuation of medical equipment maintenance in the region. 3. construction of staff houses. 3. rehabilitation of delapidated wards. 4. construction of a casualty department, 5. purchase of medical and office equipment, 6. construct an Administration block. 7. Installation of intercom and 8. construction of intensive care unit 9. expansion of laundry 10. expansion of the main store.

### (ii) Efficiency of Vote Budget Allocations

1) Improvement of quality of patient care . 2) Drawing of the strategic investment and master plan. 3) Adherence to procurement and other hospital plans. 4). Performance agreement with implementing health workers. 5) Close supervision of works by project managers and contract managers.

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

Billion Uganda Shillings	(i) Allocation (Shs Bn)				(ii) % Vote Budget			
	2013/14	2014/15	2015/16	2016/17	2013/14	2014/15	2015/16	2016/17
Key Sector	1.4	1.6	4.0	4.0	28.7%	30.6%	74.7%	75.3%
Service Delivery	1.6	1.8	4.8	4.4	31.8%	33.5%	89.0%	81.6%

1) Funds are availed in time and without cuts. 2) Inflation does not erode significantly on money value. 3) Increase in staffing levels both in professional quantity and quality.

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

Unit Cost Description	Actual 2012/13	Planned 2013/14	Actual by Sept	Proposed 2014/15	Costing Assumptions and Reasons for any Changes and Variations from Plan
<i>Vote Function: 0856 Regional Referral Hospital Services</i>					
Average Patient's Meal cost per day per inpatient (2 meals)	5	5	5	5	the cost of food increases
Average cost per outpatient	3	3	3	3	The OPD attendance remains same as the lower units become more functional, the cost of goods and commodities keeps at a higher figure
Average cost of investigation	3	3	3	3	1. Continuous availability of reagents. 2. Improvement on quality of care.

### (iii) Vote Investment Plans

The amounts are unfair and would not meet the planned investments over the medium term. This will not be

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able to complete the construction of staff house even if taken as a single capital project.

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

Billion Uganda Shillings	(i) Allocation (Shs Bn)				(ii) % Vote Budget			
	2013/14	2014/15	2015/16	2016/17	2013/14	2014/15	2015/16	2016/17
Consumption Expenditure(Outputs Provided)	4.2	4.4	3.0	3.3	84.0%	81.4%	56.5%	60.5%
Investment (Capital Purchases)	0.8	1.0	2.3	2.1	16.0%	18.6%	43.5%	39.5%
<b>Grand Total</b>	<b>5.0</b>	<b>5.4</b>	<b>5.4</b>	<b>5.4</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

Construction of staff(nurses) houses.

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

Project, Programme Vote Function Output <i>UShs Thousand</i>	2013/14		2014/15	
	Approved Budget, Planned Outputs (Quantity and Location)	Actual Expenditure and Outputs by September (Quantity and Location)	Proposed Budget, Planned Outputs (Quantity and Location)	
<b>Project 1004 Arua Rehabilitation Referral Hospital</b>				
<b>085681 Staff houses construction and rehabilitation</b>	Construction of Nurses' houses phase one completed	construction on going and interim certificate paid	Construction of Nurses' houses phase one completed	
<b>Total</b>	<b>400,000</b>	197,656	<b>525,000</b>	
<i>GoU Development</i>	400,000	197,656	525,000	
<i>External Financing</i>	0	0	0	

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

(1). The hospital provides updated monthly staffing positions to ensure optimal staffing levels by the recruiting and posting authorities. (2) The hospital runs maternal and child health clinics in which mothers and children under five seek interventions to reduce maternal and child mortalities. This is also in line with gender policy issues.(3) Staff are encouraged to undergo further training for which the hospital has developed a hospital-customised training policy which includes Continuous Professional development. (4) Updated medical equipment inventory ensures that proper maintenance and replacement of equipment is carried out. (5) Complete purchase of HIV care being provided. (6) Proper budgeting and financial management ensures proper allocation and use of resources for carrying out hospital functions.

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

## V3 Proposed Budget Allocations for 2014/15 and the Medium Term

This section sets out the proposed vote budget allocations for 2014/15 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\***

	2012/13 Outturn	2013/14		MTEF Budget Projections		
		Appr. Budget	Spent by End Sept	2014/15	2015/16	2016/17
<b>Vote: 163 Arua Referral Hospital</b>						
0856 Regional Referral Hospital Services	4.127	4.983	1.327	5.363	5.920	5.295
<b>Total for Vote:</b>	<b>4.127</b>	<b>4.983</b>	<b>1.327</b>	<b>5.363</b>	<b>5.920</b>	<b>5.295</b>

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

In 2013/14 the resource allocation shall be as follows; Wage recurrent 2.655bn, Non wage recurrent 1.419bn, Development 0.795bn and NTR 50million. In 2014/15 the projection is as follows; Wage recurrent 2.655bn, Non wage recurrent 1.419bn, Development 2.9bn and NTR 55million. In 2015/16 the

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projection is as follows; Wage recurrent 2.655bn, Non wage recurrent 1.419bn, Development 1.9bn and NTR 75million. Expenditure trend are on the increase due to an increasing need to improve on infrastructure, equip them appropriately and replace obsolete equipment and transport.

### (ii) The major expenditure allocations in the Vote for 2014/15

Prog 01. Hospital services: 1.339 bn, Prog 02. Internal audit: 17.0m; Prog 3. Medical equipment maintenance- 70.0 m. Wage recurrent: 2.655 bn. Development: 0.796 bn. This gives a total of 4.886 bn for the FY 2013/2014.

### (iii) The major planned changes in resource allocations within the Vote for 2014/15

1.) Increment in non wage recurrent. Reason: as more infrastructure has been erected, this introduces need for maintenance and functionalisation. 2) Payment of utility bills in order to eliminate areas. 3) Rising inflation.

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

Changes in Budget Allocations and Outputs from 2013/14 Planned Levels:			Justification for proposed Changes in Expenditure and Outputs
2014/15	2015/16	2016/17	
<i>Vote Function:0803 Regional Referral Hospital Services</i>			
<b>Output: 0856 03 Medicines and health supplies procured and dispensed</b>			
<i>US\$ Bn:</i> -0.040	<i>US\$ Bn:</i> 0.042	<i>US\$ Bn:</i> 0.042	
<b>Output: 0856 80 Hospital Construction/rehabilitation</b>			
<i>US\$ Bn:</i> 0.079	<i>US\$ Bn:</i> 0.304	<i>US\$ Bn:</i> -0.396	<i>No other structures other than a fence - phase I and II, are being handled during medium term to cater for non residential and residential area respectively.</i>
There has been a decrease. As no other structures other than a fence -phase I is being handled during the year. This involves only the non residential area.	There has been a decrease, as no other structures other than a fence -phase II is being handled during the year to cater for the residential area.	No allocation.	
<b>Output: 0856 81 Staff houses construction and rehabilitation</b>			
<i>US\$ Bn:</i> 0.125	<i>US\$ Bn:</i> 0.800	<i>US\$ Bn:</i> 1.319	
rehabilitation of existing delapidated staff houses and continuation of house construction.	continue construction of staff houses especially completing thos started earlier.		

## V4: Vote Challenges for 2014/15 and the Medium Term

*This section sets out the major challenges the vote faces in 2014/15 and the medium term which the vote has been unable to address in its spending plans.*

(1) Challenges of low staffing levels in most cadres, few medical officer and lack of other ENT, Anaesthesiologist, Radiologist specialists; This will affect the admission rate, and general and specialised patient attendance. (2) Lack of accomodation for 90% of staff will affect quality attendance to OPD patients and those admitted. (3) Missing specialist equipment will affect on the bed occupancy rate as patients take long to recover. (4) Dilapidated and limiting admission space in the childrens' ward and surgical ward will affect admissions to the hospital. (6) Lack of space for pathology laboratory and cancer treatment centre will affect both inpatient and outpatient performance and this are newly created and performing units.

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

Additional Requirements for Funding and Outputs in 2014/15:	Justification of Requirement for Additional Outputs and Funding
<i>Vote Function:0877 Regional Referral Hospital Services</i>	
<b>Output: 0856 77 Purchase of Specialised Machinery &amp; Equipment</b>	
<i>US\$ Bn:</i> 0.274	<i>This infrastructure and equipment will ensure improved access of the population to quality health services and also improved</i>
1. Replacement of obsolete equipment and Mobile workshop	

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Additional Requirements for Funding and Outputs in 2014/15:	Justification of Requirement for Additional Outputs and Funding
vehicle. 2. Intercom system.	service delivery hence improving economic productivity of the population.
<b>Output: 0856 80 Hospital Construction/rehabilitation</b> <b>US\$ Bn: 3.150</b> 1. Construction of the remaining 12 units of the 18- unit nurses' house. 2. Rehabilitation of delapidated non residential houses (the childrens ward).	This infrastructure will ensure improved access of the population to quality health services and also improved service delivery hence improving economic productivity of the population.

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

These issues will be addressed by the following outputs: Inpatient, outpatient, Diagnostics, Prevention and rehabilitation, and Medicines and supplies. The activities will include: proper patient care, early diagnosis, management of women related conditions, Cancer screening and treatment, management of victims of sexual violence and other forms of violence against women, immunization of mothers and girl children

#### (ii) HIV/AIDS

These issues will be addressed by the following outputs: Inpatient, outpatient, Diagnostics, Prevention and rehabilitation, and Medicines and supplies. The activities will include: proper patient care of opportunistic infections, early diagnosis, HIV counseling and testing, antiretroviral treatment, eMTCT, post-exposure prophylaxis.

#### (iii) Environment

Output to address this is mainly Hospital Management and support services. Activities include: occupational health and safety related activities, tree planting on the compound, sewerage management and good waste disposal.

### (ii) Payment Arrears

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

Payee	Payment Due Date	Amount (US\$ Bn)
JMS		0.01
Delmaw		0.01
Abacus pharma		0.02
	<b>Total:</b>	<b>0.029</b>

The output to handle this will be Hospital Management and support services. The activities will include power conservation measures, payment of utility bills, water harvesting to reduce on consumption, adherence to commitment control, good accounting practices and minimization of all risks. All these will ensure minimal accrual of domestic arrears. Adequate allocations will be made to payment of arrears and payment of all bills which would further discourage arrears generation.

### (ii) Non Tax Revenue Collections

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

Source of NTR	US\$ Bn	2012/13 Actual	2013/14 Budget	2013/14 Actual by Sept	2014/15 Projected
Educational/Instruction related levies				0.000	0.002



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Other Fees and Charges	0.000	0.046
Registration (e.g. Births, Deaths, Marriages, etc.) fees	0.000	0.005
Sale of drugs	0.000	0.002
Sale of non-produced Government Properties/assets	0.000	0.015
<b>Total:</b>	<b>0.000</b>	<b>0.070</b>

This is expected to keep rising slowly. The NTR will be utilized for motivation of staff, particularly those collecting it, procurement of medicines and supplies for the private wing services, procurement of stationery and emergency procurement s of the same to support the general wing at times of stock-outs.