

Vote: 164 Fort Portal 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)

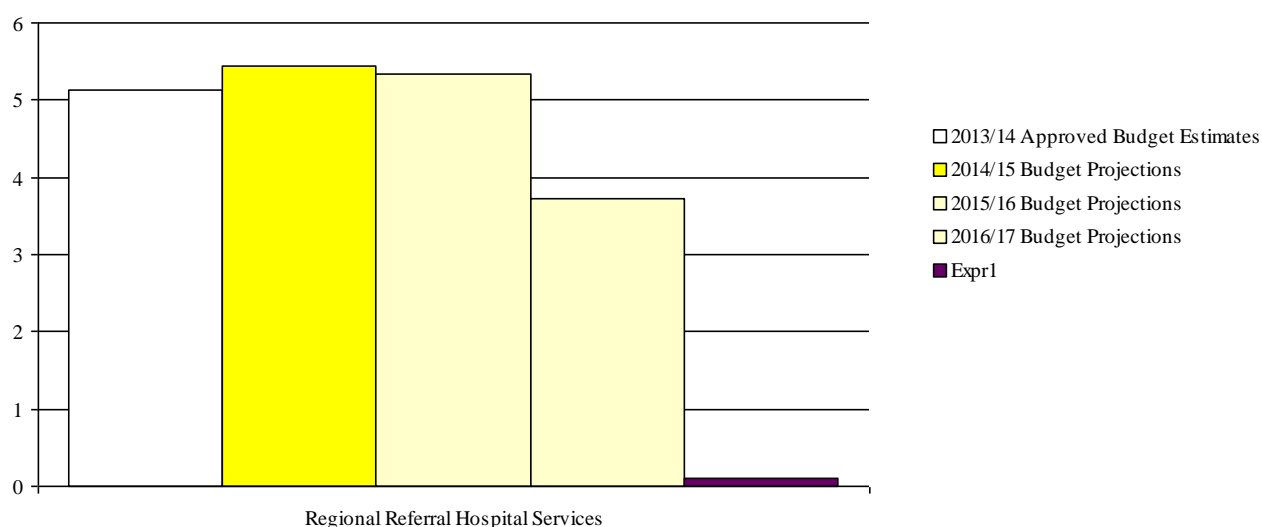
(i) Excluding Arrears, Taxes	2012/13 Outturn	2013/14		MTEF Budget Projections		
		Approved Budget	Spent by End Dec	2014/15	2015/16	2016/17
Recurrent						
Wage	2.524	3.432	1.325	3.432	3.432	1.806
Non Wage	0.836	1.066	0.532	1.306	0.860	0.860
Development						
GoU	0.430	0.736	0.050	0.700	1.050	1.050
Ext.Fin	0.000	0.000	0.000	0.000	0.000	0.000
GoU Total	3.774	5.234	1.907	5.438	5.342	3.716
Total GoU+Donor (MTEF)	3.774	5.234	1.907	5.438	5.342	3.716
(ii) Arrears and Taxes						
Arrears	0.340	0.000	0.000	0.000	N/A	N/A
Taxes**	0.016	0.100	0.000	0.000	N/A	N/A
Total Budget	4.130	5.334	1.907	5.438	N/A	N/A
(iii) Non Tax Revenue	0.000	0.180	0.000	0.180	0.240	0.240
Grand Total	4.130	5.514	1.907	5.618	N/A	N/A
Excluding Taxes, Arrears	3.774	5.414	1.907	5.618	5.582	3.956

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

(iii) Vote Outputs which Contribute to Priority Sector Outcomes

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

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>
Vote Function: 08 56 Regional Referral Hospital Services		
Outputs Contributing to Outcome 1:	Outputs Contributing to Outcome 2:	Outputs Contributing to Outcome 3:
<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

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

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

Preliminary 2013/14 Performance

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

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

Vote, Vote Function Key Output	Approved Budget and Planned outputs	2013/14 Spending and Outputs Achieved by End Dec	2014/15 Proposed Budget and Planned Outputs
Vote: 164 Fort Portal Referral Hospital			
<i>Vote Function: 0856 Regional Referral Hospital Services</i>			
Output: 085601	Inpatient services		
<i>Description of Outputs:</i>	25,000 inpatients admissions; 95% bed occupancy rate and 6 day average stay for inpatients.	Total No. of Patients admitted: 6,009	25,200 inpatients admissions; 85% bed occupancy rate and 5 day average stay for inpatients.

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<i>Vote, Vote Function Key Output</i>	Approved Budget and Planned outputs	2013/14 Spending and Outputs Achieved by End Dec	2014/15 Proposed Budget and Planned Outputs
		Total maternal deliveries 1,512	The increase in allocation is on account of the rising cost of inputs for hospital operations
		Major surgeries 183	
		Blood transfusions	
		BOR 86%	
		ALOS 5	
<i>Performance Indicators:</i>			
No. of in patients admitted	25000	6,009	25,200
Bed occupancy rate (inpatients)	95	86	85
Average rate of stay for inpatients (no. days)	5	5	5
<i>Output Cost: UShs Bn:</i>	<i>1.245</i>	<i>UShs Bn: 0.228</i>	<i>UShs Bn: 1.379</i>
Output: 085602	Outpatient services		
<i>Description of Outputs:</i>	170,000 outpatient's attendance, 50,000 specialized clinic attendance	No. of General outpatients - 39,866	120,000 outpatient's attendance, 50,000 specialized clinic attendance. The increase is on account of the complexity of patients seen
		No. of Specialized outpatients - 17,728	
<i>Performance Indicators:</i>			
No. of specialised outpatients attended to	50000	17,728	50,000
No. of general outpatients attended to	150000	39,866	120,000
<i>Output Cost: UShs Bn:</i>	<i>0.841</i>	<i>UShs Bn: 0.162</i>	<i>UShs Bn: 0.841</i>
Output: 085603	Medicines and health supplies procured and dispensed		
<i>Description of Outputs:</i>	Medicines delivered by NMS dispensed Shs. 1,112,801,318	Value of Medicines and Medical supplies received worth is as follows: Malaria -UGX. 14,859,495/= Lab-UGX. 1,989,682/= ARV UGX. 148,435,801/= TB UGX. 1,542,976/= CRL UGX. 197,372,077/= NCD UGX. 17,777,001/= Morphine UGX. 454,533/= CRH UGX. 286,353,613/= CDC UGX. 2,416,672/=	Medicines delivered by NMS and dispensed Shs. 1,428,801,318
<i>Performance Indicators:</i>			
Value of medicines received/dispensed (Ush bn)	1.1128318	0.671201850	1.428801318
<i>Output Cost: UShs Bn:</i>	<i>0.190</i>	<i>UShs Bn: 0.029</i>	<i>UShs Bn: 0.190</i>
Output: 085604	Diagnostic services		
<i>Description of Outputs:</i>	75,000 lab test 5,000 xray imagings 6,000 Ultrasound	No. of Lab tests 41,647	100,000 lab test 5,000 xray imagings 6,000 Ultrasound
		Tests ; No of X- rays 1,726	
		No of Ultra sounds 1,678 ;	

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<i>Vote, Vote Function Key Output</i>	Approved Budget and Planned outputs	2013/14 Spending and Outputs Achieved by End Dec	2014/15 Proposed Budget and Planned Outputs
Patient xrays (imaging)	6000	1726	11000
No. of labs/tests	75000	41647	100000
<i>Output Cost: US\$ Bn:</i>	<i>0.279</i>	<i>US\$ Bn: 0.053</i>	<i>US\$ Bn: 0.279</i>
Output:085606	Prevention and rehabilitation services		
<i>Description of Outputs:</i>	3,000 family planning contacts, 30,000 immunisations, 12,500 ANC visits,	No. of immunised persons – 4,600 Ante-Natal cases – 2,348 Family Planning contacts- 555 PMTCT cases - 737 VCT/RCT persons – 15,175	3,000 family planning contacts, 30,000 immunisations, 12,500 ANC visits,
<i>Performance Indicators:</i>			
No. of people receiving family planning services		555	3,000
No. of people immunised	20000	4,600	30,000
No. of antenatal cases	12500	2,348	12,500
<i>Output Cost: US\$ Bn:</i>	<i>0.249</i>	<i>US\$ Bn: 0.037</i>	<i>US\$ Bn: 0.249</i>
Output:085681	Staff houses construction and rehabilitation		
<i>Description of Outputs:</i>	Construction of two double roomed staff houses	Procurement process is ongoing.	Construction of 4 two double roomed staff houses
<i>Performance Indicators:</i>			
No. of staff houses constructed/rehabilitated	10	0	4
<i>Output Cost: US\$ Bn:</i>	<i>0.362</i>	<i>US\$ Bn: 0.002</i>	<i>US\$ Bn: 0.562</i>
Vote Function Cost	US\$ Bn: 5.514	US\$ Bn: 1.907	US\$ Bn: 5.618
Cost of Vote Services:	US\$ Bn: 5.414	US\$ Bn: 1.907	US\$ Bn: 5.618

* Excluding Taxes and Arrears

2014/15 Planned Outputs

- 1- Procure Equipment, Delivery beds and other assorted equipment and furniture to improve the hospital work environment
- 2- Construct double roomed staff accommodation
- 3- Monitoring, Evaluation and Appraisal of Capital Development

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

<i>Vote Function Key Output Indicators and Costs:</i>	2012/13 Outturn	2013/14 Approved Plan	Outturn by End Dec	MTEF Projections		
				2014/15	2015/16	2016/17
Vote: 164 Fort Portal Referral Hospital						
Vote Function:0856 Regional Referral Hospital Services						
Average rate of stay for inpatients (no. days)		5	5	5	5	5
Bed occupancy rate (inpatients)		95	86	85	95	95
No. of in patients admitted		25000	6,009	25,200	25000	25000
No. of general outpatients attended to		150000	39,866	120,000	150000	150000
No. of specialised outpatients attended to		50000	17,728	50,000	70000	70000

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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
Value of medicines received/dispensed (Ush bn)		1.1128318	0.671201850	1.428801318	1,628,801,318	1,828,801,318
No. of labs/tests		75000	41647	100000	109000	110000
Patient xrays (imaging)		6000	1726	11000	10000	13000
No. of antenatal cases		12500	2,348	12,500	12500	22500
No. of people immunised		20000	4,600	30,000	24000	34000
No. of people receiving family planning services			555	3,000	3000	3000
No. of hospitals benefiting from the rennovation of existing facilities.			0	0	0	0
No. reconstructed/rehabilitated general wards			0	0	0	0
No. of staff houses constructed/rehabilitated		10	0	4	10	10
No. of maternity wards constructed			0	0	0	0
No. of maternity wards rehabilitated			0	0	0	0
No. of OPD wards constructed		1	0	0	1	1
No. of OPD wards rehabilitated			0	0	0	0
No. of other wards constructed			0	0	0	0
No. of other wards rehabilitated			0	0	0	1
No. of theatres constructed			0	0	0	1
No. of theatres rehabilitated			0	0	0	0
Value of medical equipment procured (Ush Bn)		.102	0	0.100	0.200	0.200
Vote Function Cost (UShs bn)	4.130	5.414	1.907	5.618	5.582	3.956
Cost of Vote Services (UShs Bn)	4.130	5.414	1.907	5.618	5.582	3.956

Medium Term Plans

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

(ii) Efficiency of Vote Budget Allocations

Recruitment of more medical workers, Improved procurement management.

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	2.7	3.0	2.0	4.3	49.8%	54.0%	49.5%	52.7%
Service Delivery	3.2	3.5	2.7	6.7	58.5%	62.3%	67.8%	81.6%

Staff costs allocated to respective outputs, Management cost allocated to the the other 5 outputs, costs of medicines includes ARVs cost

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>					
Outpatient services(Cost Per Outpatient)	2	2	5		Total Outpatients = General and specialized patients. Total Cost includes NWR and WR. (Includes allocated cost of management services)

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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
Medicine cost Per standard output(SUO)	1	2	5		All outputs changed to an OPD Equivalence(Standard unit of Output) 1 Inpatient =15 Outpatients. Total Cost includes NWR and WR. Includes cost of ARVS and Antimalarials. (Includes allocated cost of management services)
Inpatient services(Cost per Inpatient Day)	7	10	13		Total Inpatient Days =ALOS X No. of patients admitted. Total Cost includes NWR and WR(Includes allocated cost of management services)
Cost Per Preventive Intervention	4	2	3		Total Preventive intervention = Total No. Immunization + FP+ANC Attendance. Total Cost includes NWR and WR (Includes allocated cost of management services)
Cost per investigation	2	2	2		Total number of investigatins includes Lab, Xray and Ultrasound. Total Cost includes NWR and WR(Includes allocated cost of management services)

(iii) Vote Investment Plans

Purchase of machinery, equipment and furniture Shs.273,000,000/=, Construction of 25 double room staff houses Shs. 5,536,000.000/=

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)	4.7	4.9	2.7	3.2	86.4%	87.5%	67.7%	38.7%
Investment (Capital Purchases)	0.7	0.7	1.3	5.0	13.6%	12.5%	32.3%	61.3%
Grand Total	5.4	5.6	4.0	8.2	100.0%	100.0%	100.0%	100.0%

Construction of staff Houses for accommodation

Table V2.6: Major Capital Investments

Project, Programme Vote Function Output <i>US\$ 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)
Project 1004 Fort Portal Rehabilitation Referral Hospital			
085681 Staff houses construction and rehabilitation	Construction of three double roomed staff houses	Procurement process is on going.	Continuation of Construction of storied double roomed staff houses
Total	362,000	2,120	561,895
<i>GoU Development</i>	<i>362,000</i>	<i>2,120</i>	<i>561,895</i>
<i>External Financing</i>	<i>0</i>	<i>0</i>	<i>0</i>

(iv) Vote Actions to improve Priority Sector Outomes

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

2013/14 Planned Actions:	2013/14 Actions by Sept:	2014/15 Planned Actions:	MT Strategy:
Sector Outcome 3: Health facilities receive adequate stocks of essential medicines and health supplies (EMHS)			

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2013/14 Planned Actions:	2013/14 Actions by Sept:	2014/15 Planned Actions:	MT Strategy:
Vote Function: 08 56 Regional Referral Hospital Services			
<i>VF Performance Issue: Under staffed structures</i>			
Advocacy for the restructuring of the Hospital and replacing staff leaving due to attrition and recruitment for the support staff	Advocacy for the restructuring of the Hospital and replacing, staff leaving due to attrition and recruitment for the support staff	Reports on staffing and recruitment requests submitted to MoH/HSC	Improve staff accommodation to attract and retain staff

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
Vote: 164 Fort Portal Referral Hospital						
0856 Regional Referral Hospital Services	4.130	5.414	0.871	5.618	5.582	3.956
Total for Vote:	4.130	5.414	0.871	5.618	5.582	3.956

(i) The Total Budget over the Medium Term

In the medium term the Hospital requires

- Wage Budget of Shs. 3,432,215,000/= to cater for the wages of 350 Hospital Staff
 - Non Wage Recurrent Budget of Shs. 1,065,625,000/= to cater for the operations of the Hospital
 - Development Budget of Shs. 736,360,000/= to Construct staff quarters to Accommodate the critical cadres of staff
- TOTAL Shs. 5,334,000,000/=

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

In the medium term the Hospital requires

- Wage Budget of Shs. 7,764,000,000/= to cater for the wages of 350 Hospital Staff
 - Non Wage Recurrent Budget of Shs. 4,786,000,000/= to cater for the operations of the Hospital
 - Development Budget of Shs. 5,836,000,000/= to Construct staff quarters to Accommodate the critical cadres of staff
- TOTAL Shs. 18,386,000,000/=

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

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

Improved Wage bill from UGX.1,806,000,000/= to UGX. 3,432,215,000/=. This will enable recruitment and improvement of service delivery.

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:0801 Regional Referral Hospital Services</i>			
Output: 0856 01 Inpatient services			
US\$ Bn: 0.134	US\$ Bn: -0.713	US\$ Bn: -0.613	Owing to improved quality of service, resulting from operationalising
The few existing staff work	The poor projections are	The increment in the	

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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	
extra hours due to motivation.	likely affect quality of services. The Planners need to consider population growth trends.	number of patients without recruitment of Staff (Health workers) means that we have to give Employees Financial motivation to convince them to work longer hours per day.	<i>the new private wing. Improved sanitation, the public has developed confidence, that the hospital can do much better.</i>
Output: 0856 02 Outpatient services			
<i>US\$ Bn: -0.244</i> With improved performance of the lower Health Facilities, We expect more patients to go to health centre iii & iv, therefore leading to reduced workload in OPD for general cases and see more attending the specialised clinics which are more expensive	<i>US\$ Bn: -0.254</i> With improved performance of the lower Health Facilities, We expect more patients to go to health centre iii & iv, therefore leading to reduced workload in OPD for general cases and see more attending the specialised clinics which are more expensive	<i>US\$ Bn: -0.154</i> With improved performance of the lower Health Facilities, We expect more patients to go to health centre iii & iv, therefore leading to reduced workload in OPD for general cases and see more attending the specialised clinics which are more expensive	<i>With improved performance of the lower Health Facilities, We expect more patients to go to health centre iii & iv, therefore leading to reduced workload in OPD for general cases and see more attending the specialised clinics which are more expensive, and require specialists.</i>
Output: 0856 04 Diagnostic services			
<i>US\$ Bn: -0.086</i> Reduced Budget Allocation, which will negatively impact on the service delivery	<i>US\$ Bn: -0.057</i> Increase in patients coming to the Hospital requiring Diagnostic services	<i>US\$ Bn: 0.013</i> Increase in patients coming to the Hospital requiring Diagnostic services	<i>Increase in patients coming to the Hospital requiring Diagnostic services. The consumables are expected to be provided by NMS in reasonable quantities.</i>
Output: 0856 77 Purchase of Specialised Machinery & Equipment			
<i>US\$ Bn: -0.236</i> 1- Procurement of theatre and assorted medical equipments 2- Procurement of Hospital beds and other items required in the wards	<i>US\$ Bn: -0.073</i> With Reduced Budget allocation, the Hospital can only procure limited assorted equipments for use	<i>US\$ Bn: 0.020</i> 1- Procurement of theatre and assorted medical equipments 2- Procurement of Hospital beds and other items required in the wards	<i>With Reduced Budget allocation, the Hospital can only procure limited assorted equipments for use.</i>
Output: 0856 81 Staff houses construction and rehabilitation			
<i>US\$ Bn: 0.200</i> Staff houses construction will Continue, since Plans, Technical designs and foundation will be in place.	<i>US\$ Bn: 0.246</i> continued construction of the staff Houses, to accommodate more staff,	<i>US\$ Bn: 2.316</i> Continued construction of the staff Houses, to accommodate more staff,	<i>Continued construction of the staff Houses, to accommodate more staff, will save time lost to long distances, and risk of staff moving for night shifts, and emergency response time.</i>

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

2- In order to address Staff attraction and retention Strategy over a 3 year period there is need to provide additional funding for construction of staff accommodation for at least 200 units at unit cost of Ushs. 110,000,000, in the medium this will require 22 billion, in the medium term.

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

4- Solid Waste Management: The hospital is not connected to the sewerage line of NWSC which results in added costs of cesspool emptying. The hospital needs an average of UGX. 2,400,000 per month which

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translates to UGX. 28,800,000 per annum. The amount is bound to increase when the new constructed units become operational. This translates to UGX. 86,400,000

The total requirement is UGX. 1,042,800,000/=.

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:0881 Regional Referral Hospital Services</i>	
Output: 0856 81 Staff houses construction and rehabilitation	
UShs Bn: 22.000	<i>In order to address Staff attraction and retention Strategy over a 3 year period there is need to provide additional funding for construction of staff accommodation for at least 200 units at unit cost of Ushs.110, 000,000, in the medium this will require 22 billion, in the medium term.</i>

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

The following will be undertaken to address gender and equity issues;

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

Other strategies geared towards addressing gender and equity issues include; Elimination of Mother to Child Transmission of HIV, Safe male circumcision, HPV Vaccination and provision of Tetanus Toxoid vaccine to women in reproductive age.

(ii) HIV/AIDS

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

(iii) Environment

To address the environmental issues, the ministry will roll out Village Health Teams and construct incinerators in health facilities.

(ii) Payment Arrears

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

Payee	Payment Due Date	Amount (UShs Bn)
UMEME UGANDA LIMITED	6/30/2013	0.01
National Water and Sewarage Cooperation	6/30/2013	0.00
	Total:	0.011

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

(ii) Non Tax Revenue Collections

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

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Source of NTR	UShs Bn	2012/13 Actual	2013/14 Budget	2013/14 Actual by Sept	2014/15 Projected
Other Fees and Charges			0.045	0.022	0.180
	Total:		0.045	0.022	0.180

We have completed a new private ward and if it is factionalized fully the hospital is expected to substantially generate more NTR. Non Tax Revenue is expected to raise from Shs. 44 million to Shs. 180 million in its first year of operation.