Vote Summary

V1: Vote Overview

This section sets out the Vote Mission, Strategic Objectives, and provides a description of the vote's services (i) Snapshot of Medium Term Budget Allocations

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

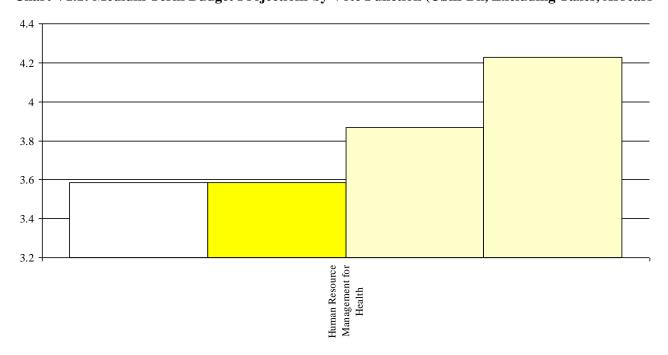
Table V1.1: Overview of Vote Expenditures (UShs Billion)

		2012/12	2013/14			MTEF Budget Projections			
(i) Excluding	Arrears, Taxes	2012/13 Outturn	Approved Budget	Spent by End Dec	2014/15	2015/16	2016/17		
	Wage	0.674	0.869	0.354	0.869	0.869	1.110		
Recurrent	Non Wage	2.265	2.367	1.136	2.367	2.592	2.696		
Danilanna	GoU	0.345	0.347	0.002	0.347	0.406	0.422		
Developmen	Ext. Fin	0.000	0.000	0.000	0.000	0.000	0.000		
	GoU Total	3.284	3.583	1.493	3.583	3.867	4.228		
otal GoU + Ex	t Fin. (MTEF)	3.284	3.583	1.493	3.583	3.867	4.228		
(ii) Arrears	Arrears	0.000	0.000	0.000	0.000	N/A	N/A		
and Taxes	Taxes	0.080	0.300	0.000	0.086	N/A	N/A		
	Total Budget	3.364	3.883	1.493	3.670	N/A	N/A		

^{**} 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



□ 2013/14 Approved Budget Estimates □ 2014/15 Budget Projections □ 2015/16 Budget Projections □ 2016/17 Budget Projections

Vote Summary

(ii) Vote Mission Statement

The Vote's Mission Statement is:

To build a fundamentally strong and competent human resource base for efficient and effective health services delivery.

(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:					
Increased deliveries in health facilities	Children under one year old protected against life threatening diseases	Health facilities receive adequate stocks of essential medicines and health supplies (EMHS)					
Vote Function: 08 52 Human Resource Management for Health							
Outputs Contributing to Outcome 1:	Outputs Contributing to Outcome 2:	Outputs Contributing to Outcome 3:					
Outputs Provided	None	None					
085201 Health Workers Recruitment services							

V2: Past Vote Performance and Medium Term Plans

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

(i) Past and Future Planned Vote Outputs

2012/13 Performance

During the financial year, the Commission achieved a number of key outputs using the appropriated resources. These were:

Recommended three (3) Health Managers and Seventeen (17) Medical Consultants to H.E the President for appointment.

Appointed into Health Service Six Hundred Thirty Six (636) Health Workers of various categories for the different Health Institutions under its jurisdiction including 352 Health Workers recruited to fill vacancies in Health Centres III & IV under KCCA)

Processed one thousand one hundred and eight (1,108) other Human Resource for Health cases majority of which were on confirmations in appointment. This was done through regular submissions processed at the Commission and those processed at all the RRHs during the hands on support supervision.

Launched the Revised Code of Conduct and Ethics and Key Terms and Conditions of Service for the Health Workers, the Health Service Commission Regulations 2013 and the Health Service Commission Client Charter.

Printed and distributed;

- •3,000 copies of the Revised Code of Conduct and Ethics and Key Terms and Conditions of Service for the Health Workers.
- 1700 copies of the Health Service Commission Regulations
- □,000 copies of the Health Service Commission Client Charter

Provided Technical Support to five (5) District Service Commissions of Alebtong, Abim, Jinja, Mityana

Vote Summary

and Kaberamaido.

Carried out support supervision in forty nine (49) Districts and thirteen (13) Regional Referral Hospitals.

Carried out support supervision in seven (7) Central Government Health Institutions i.e. Mulago and Butabika National Referral Hospitals, China Uganda Friendship Hospital – Naguru (CUFH- Naguru), Uganda Cancer Institute, Uganda Heart Institute, Uganda Blood Transfusion Services, National Chemotherapeutic Research Laboratories, Kawempe HC IV and Kiruddu HC III.

Held Technical meetings with KCCA, CUFH- Naguru and Ministry of Health where a number of Human Resource for Health issues were handled.

Sponsored a number of staff for different training programmes, seminars and workshops to enhance their capacity.

Achieved the following project related activities:

- a)Configured the e-short listing tool and the Human Resources Information System (HRIS) on the Commission server and trained Staff on the application of the system.
- b)Produced a draft profile for the posts of the Director General for Health Services, Director Health Services (Community and Clinical Health Services).
- c)Produced the first draft of the revised HSC Guidelines for the Recruitment of Health Workers in Districts and Urban Authorities.

Procured two (2) Motor Vehicles for Members, fourteen (14) UPSs, two (2) Desktop Computers and two (2) Printers.

Issued guidelines to 111 DSCs as well as participating in the training of Staff on the shortlisting tool during the nationwide recruitment of Health Workers for Health Centres III & IV.

Participated in the review of;

- •Scheme of Service for Nursing Cadre,
- •Schemes of Service for Laboratory and Radiography Professionals
- •Job Descriptions (JDs) for KCCA oversight jobs.

Preliminary 2013/14 Performance

With the allocated financial resources, the Commission achieved the following key outputs during the first quarter of FY 2013/14;

The Commission appointed twenty five (25) Health Workers into health service (KCCA 15, UBTS 3, and RRHs 7).

The Commission handled 578 other human resource for health decisions mainly involving confirmations in appointment, redesignations, trainings etc

The Commission conducted validation for 163 Health Workers of former Naguru HC IV at China Uganda Friendship Hospital – Naguru.

The Commission also carried out shortlisting for 87 vacancies advertised by MoH funded by Center for Disease Control (CDC).(Unplanned but critical partnership activity)

Vote Summary

Table	V2.1:	Past and	2014/15	Kev	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: 134 Health Service Co	mmission				
Vote Function: 0852 Human	Resource Management for I	Health			
Output: 085201	lealth Workers Recruitment	services			
Description of Outputs:	800 Health Workers recruited All regular submissions processed within one month reciept. Selection Exams Division and E-recruitment System rolled out.	Health Workers into healt	th S 3, 1 nons ations ations, u u guru sies d by bl	800 Health Workers of categories recruited for Hqrs, Mulago and But NRHs, KCCA, CUFH RRHs, UBTS, Prisons Service, NCRL and RI All regular submission received for confirmat corrigenda, redesignatileave, interdictions, abscondments, retirem processed	r MoH abika - Naguru, Health RHs. s ion,
Performance Indicators:					
No. of Health Workers recruited in Central Government Health Institutions	800	25		800	
Output Cost:	UShs Bn: 0.432	UShs Bn: 0.0)8 <i>3</i>	UShs Bn:	0.432
Vote Function Cost		.883 UShs Bn:	1 403	UShs Bn:	3.583
Cost of Vote Services:		.583 UShs Bn:		UShs Bn:	3.583

^{*} Excluding Taxes and Arrears

2014/15 Planned Outputs

800 Health Workers of all categories recruited for MoH Hqrs, Mulago and Butabika NRHs, KCCA, China - Uganda Friendship Hospital, RRHs, UBTS, Prisons Health Service, NCTL and RRHs.

All regular submissions received for confirmation, corrigenda, redesignation, study leave, interdictions, abscondments, retirement on medical ground etc processed within one month of receipt.

Support Supervision carried out in 35 Districts, 13 Regional Referral Hospitals and 5 National Health Institutions including mentoring/coaching of DSCs and HR Officers, sharing best HRH Management practices and increasing capacity of DSCs to mentor managers within their jurisdiction

Specialized Support and Technical meetings with five (5) key PNFP Hospitals and five (5) Health Training Universities and Institutions carried out.

Vote Summary

Technical Support to 8 DSCs rendered.

Performance and career enhancement training for Members and Staff of the Health Service Commission in accordance with the Training Plan carried out.

Two (2) Regional Workshops held for DSCs, DHOs, CAOs and Hospital Managers for implementation of HSC Regulations, Revised Code of Conduct & Ethics, Terms & Conditions of Service and sensitization on HSC Client Charter.

HSC eRecruitment Information System & Selection Exams Division operationalised

Competency profiles for other senior health managerial and clinical posts in MoH Hqtrs, National and Regional Referral Hospitals developed

HSC Recruitment Guidelines for Health Workers in Districts and Urban Authorities finalized.

The Health Service Commission Third 5-Year Strategic Plan FY 2015/16 to FY 2019/20 developed

Recruitment Plan for the Institutions under the jurisdiction of the Commission developed

Standing Orders for Human Resource for Health developed

Printing and dissemination of the following documents carried out;

i.3,000 copies of the Revised Code of Conduct and Ethics and Key Terms and Conditions of Service for the Health Workers.

ii.500 copies of the Health Service Commission Regulations

iii.500 copies of the Health Service Commission Client Charter

iv.2,000 copies of the Health Service commission flyers

Two (2) Motor Vehicles, One (1) Heavy Duty Shredder, One (1) Registry Counter/Barrier, Four (4) Filing Cabinets and a Briefcase for carrying mails procured

HSC HIV/AIDS policy implemented

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

Vote Function Key Output	2012/13	2013/ Approved	14 Outturn by	MTEF F	Projections	
Indicators and Costs:	Outturn	Plan	End Dec	2014/15	2015/16	2016/17
Vote: 134 Health Service Commission						
Vote Function:0852 Human Resource	e Management _s	for Health				
No. of Health Workers recruited in Central Government Health Institutions		800	25	800	1000	1000
Vote Function Cost (UShs bn)	3.364	3.583	1.493	3.583	3.867	4.228
Cost of Vote Services (UShs Bn)	3.364	3.583	1.493	3.583	3.867	4.228

Medium Term Plans

In the medium term, the Commission will advocate for better Terms and Conditions of Service for Health Workers. The HSC will advocate training in rare disciplines such as ENT, Pathology, Dental and Laboratory Technologists etc, and other Super specialties, some of which training is not conducted in Uganda. In order to ensure and enforce Health Workers' adherence to the Code of Conduct and Ethics, the

Vote Summary

Health Service Commission will cary ouy hands-on support supervision in RRHs during which sensitization and dissemination of the Health Workers Code of Conduct and Ethics will be conducted.

(ii) Efficiency of Vote Budget Allocations

The Commission has allocated funds for the functionality of its Internal Audit Unit which will provide advice to management in ensuring efficiency and value for money. Funds have also been allocated to performance enhancement trainings for Members and staff to ensure increased performance efficiency.

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

	(i) Allocation (Shs Bn)				(ii) % Vote			
Billion Uganda Shillings	2013/14	2014/15	2015/16	2016/17	2013/14	2014/15	2015/16	2016/17
Key Sector	0.4	0.4	0.4	0.7	12.1%	12.1%	11.6%	15.8%
Service Delivery	0.4	0.4	0.4	0.7	12.1%	12.1%	11.6%	15.8%

The table above depicts medium term allocations to the Commission key service delivery outputs i.e. recruitment services. As seen from the table, the recruitment budget allocation is only 12.1% of the total Commission budget although is expected to rise marginally in the medium term. This low budget allocation is however due to the partial embargo on recruitment over the medium term.

The table below shows the per capita recruitment for FY 2014/15 projected at UGX. 490,000. This includes expenses on preparation of adverts, running the advert in the media, data entry, shortlisting, interviewing, confirmation of minutes and dissemination of results.

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
Vote Function:0852 Human	n Resource Mana	igement for H	lealth		
Cost of recruiting one health worker	485	488	480	490	Being the total cost of recruiting one health worker

(iii) Vote Investment Plans

Over the last four financial years, the Commission's development budget has stagnated at Ushs. 0.347 Billion. However, its expected to increase to Ushs. 0.406 Billion and Ushs. 0.422 Billion in FY 2015/16 and FY 2016/17 respectively.

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

	(i) Allocat	(i) Allocation (Shs Bn)			(ii) % Vote			
Billion Uganda Shillings	2013/14	2014/15	2015/16	2016/17	2013/14	2014/15	2015/16	2016/17
Consumption Expendture(Outputs Provided)	3.2	3.2	3.4	3.8	90.3%	90.3%	87.9%	90.8%
Investment (Capital Purchases)	0.3	0.3	0.5	0.4	9.7%	9.7%	12.1%	9.2%
Grand Total	3.6	3.6	3.9	4.2	100.0%	100.0%	100.0%	100.0%

The major planned capital expenditure in FY 2014/15 is the procurement of two (2) Vehicles to facilitate Commission Support Supervision activities at a cost of UGX 280 Million (Tax excl) i.e 81% of capital budget

Table V2.6: Major Capital Investments

(iv) Vote Actions to improve Priority Sector Outomes

The Commission plans to continue advocating for better Terms and Conditions of Service for Health Workers in addressing the high attrition rate of Health Workers in the Country. The Commission will also advocate training in rare disciplines such as ENT, Pathology, Dental and Laboratory Technologists and

Vote Summary

other Super specialties, some of which training is not conducted in Uganda to ensure that such highly needed Health Workers are available in the Country's Job Market.

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 1: Increased deliveries in health facilities

Vote Function: 0852 Human Resource Management for Health

VF Performance Issue: - Inability to fill approved posts for Health Workers in National and Regional Referral Hospitals

Advocate for better Terms and Conditions of Service for Health Workers by writing to H.E the President a concept paper; and encouraging training in those endangered professions/ disciplines where the labour market is limited has been done.

The Commission continued to dvocate for better Terms and Conditions of Service for Health Workers and encoraged training in those endangered professions/ disciplines where the labour market is limited. during the various interactions with stakeholders

Subject to availability of funds and clearance by Public Service, fill all vacant posts. Advocate for training in those affected professions/ disciplines such as ENT, Pathology, Dental and Laboratory Technologists.

for health workers.

Continue to fill and replace all vacant posts, advocate for better Terms and Conditions of Service for Health Workers. Advocate for training in those endangered professions/ disciplines such as ENT, Pathology, Dental and Laboratory Technologists.

VF Performance Issue:

Advocate for better Terms and Conditions of Service for Health Workers by writing to H.E the President a concept paper on the matter.

Poor Working Terms and Conditions for Health Workers The Commission continued to dvocate for better Terms and Conditions of Service for Health Workers and encoraged training in those endangered professions/ disciplines where the labour market is limited, during the various interactions with stakeholders

At various stakeholder Advocacy for better Terms and Conditions of Service for meetings the commission Health Workers. plans to advocate for better working conditions of service

Sector Outcome 2: Children under one year old protected against life threatening diseases

Vote Function: 08 52 Human Resource Management for Health

VF Performance Issue: Rising rates of Health Worker absenteeism

The Commission plans to conduct Support Supervission visits that among others HRH issues will emphasise adherence to the Health Workers Code of Conduct and Ethics. Commission too plans to print copies of the H/Ws Code of conduct & Ethics for dissemination

The Commission continued to disseminate ts copies of Code of Conduct and Ethics to Health Workers in a number of Health Institutions visited during the quarter in order to promote adherence to recruitment guidelines and best HRM practices.

The Commission plans to conduct Support Supervission visits that among others HRH issues will emphasise adherence to the Health Workers Code of Conduct and Ethics. Commission too plans to print copies of the H/Ws Code of conduct & Ethics for dissemination

Ensure and enforce adherence of Health Workers to the Code of Conduct and Ethics through workshops and Support Supervision.

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*

Table V 3.1. Tast Outturns and Medium Term 110	jechons i	by vote.	r unchon			
		2013/14		MTEF Budget Projections		
	2012/13 Outturn	Appr. Budget	Spent by End Sept	2014/15	2015/16	2016/17
Vote: 134 Health Service Commission						
0852 Human Resource Management for Health	3.364	3.583	0.630	3.583	3.867	4.228
Total for Vote:	3.364	3.583	0.630	3.583	3.867	4.228

(i) The Total Budget over the Medium Term

Vote Summary

The Health Service Commission budget allocation for FY 2014/15 is UGX 3.587 billion of which UGX 0.869 billion is Wage, UGX 2.367 billion is Non Wage Recurrent and UGX 0.347 billion is for Capital Development. However the Commission total budget is expected to increase to Ushs. 3.867 Billion and Ushs. 4.228 Billion in FY 2015/16 and FY 2016/17 respectively.

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

The major expenditure allocation is to Secretariat Support Service for Human Resource for Health Management functions

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

The Commission plans no major changes in resource allocation from the FY 2013/14 budget.

Table V3.2: Key Changes in Vote Resource Allocation

Changes in Budget Allocation	ons and Outputs from	2013/1	4 Planned Leve	els:	Justification for proposed Changes in
2014/15		2015/	16	2016/17	Expenditure and Outputs
Vote Function:0876 Human I	Resource Management j	for He	alth		
Output: 0852 76 Purcha	se of Office and ICT Eq	uipmer	t, including Soft	ware	
<i>UShs Bn:</i> -0.033	UShs Bn:	0.043	UShs Bn:	-0.017	This will improve service delivery in the
The funds were re-allocated					Registry and Resource centre
to equiping the Commission					
Registry and Resource					
Centre					
Output: 0852 77 Purcha	se of Specialised Machin	ery &	Equipment		
<i>UShs Bn:</i> 0.017	UShs Bn:	0.000	UShs Bn:	0.000	This will ensure effecient management of
The funds secured for					paper records in the Commission registry
purchase of a shredder,					
filing cabinets and briefcase					
Output: 0852 78 Purcha	se of Office and Residen	tial Fu	rniture and Fittir	ngs	
<i>UShs Bn:</i> 0.028	UShs Bn:	0.077	UShs Bn:	0.038	This will improve service delivery in the
Funds secured for equiping					Registry and Resource centre
the Commission Registry					
and Resource Centre					

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.

The following challenges continued to be experienced

- i.Partial embargo on recruitment in the Public Service
- ii.Delayed submissions for vacant posts which have wage bill provision.
- Iii.Inadequate office and parking space.
- Iv.Understaffing
- iv.Inadequate transport to facilitate support supervision activities of the Commission.
- V.Constantly increasing rent bills
- vi.General inadequate funding of the commission activities

Vote Summary

Table V4.1: Additional Output Funding Requests

Additional Requirements for Funding and	Justification of Requirement for
Outputs in 2014/15:	Additional Outputs and Funding

Vote Function:0801 Human Resource Management for Health

Output: 0852 01 Health Workers Recruitment services

UShs Bn: 2.000

UGX 2 Billion for purchase of a prime piece of land for the construction of office premises will be required

The Commission will have adequate operational office and parking space for its recruitment activities. This will improve the Commission capacity to deliver its cardinal mandate as well as cost effectiveness in the long term.

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 Commission follows order of merit when recruiting and selecting candidates. It also gives cognizance of the various disabilities that may not affect the skills and expertise of such challenged individuals eg stammering.

(ii) HIV/AIDS

The Commission formulated a customised HIV/AIDS work place policy that caters for its Staff who are either inffected or affected. The policy is financed from the Commission secretariat support services budget to the tune of UShs. 5million.

(iii) Environment

Not applicable

(ii) Payment Arrears

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

None

(ii) Non Tax Revenue Collections

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

N/A