

Vote: 014 Ministry of Health

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:

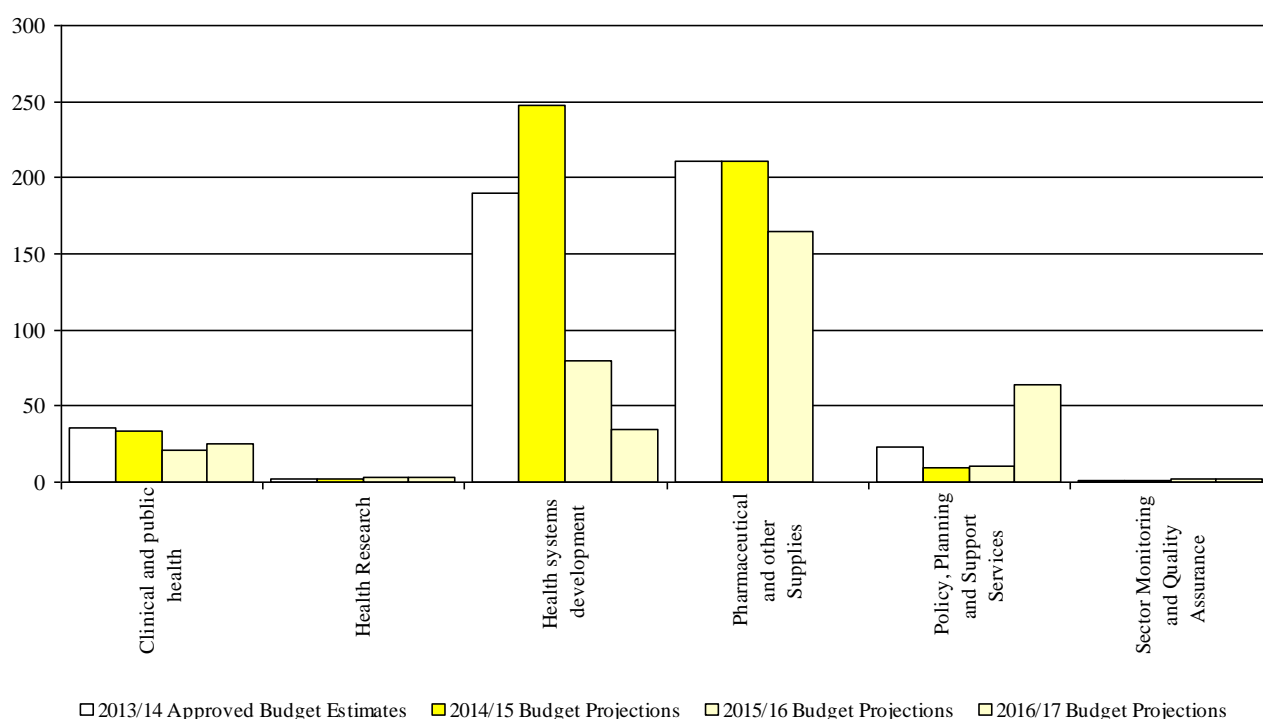
Table V1.1: Overview of Vote Expenditures (UShs Billion)

	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	5.923	5.604	2.402	5.604	5.604	7.153
Recurrent Non Wage	30.957	27.474	7.352	27.474	30.084	31.287
Development GoU	9.708	12.645	2.567	11.639	14.795	15.386
Development Ext. Fin	0.156	416.668	57.020	460.017	230.380	75.650
GoU Total	46.588	45.723	12.321	44.717	50.483	53.827
total GoU + Ext Fin. (MTEF)	46.744	462.391	69.341	504.734	280.862	129.477
<i>(ii) Arrears and Taxes</i>						
Arrears	0.000	0.000	0.000	0.000	N/A	N/A
Taxes	4.500	11.600	0.000	12.560	N/A	N/A
Total Budget	51.244	473.991	69.341	517.294	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)



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(ii) Vote Mission Statement

The Vote's Mission Statement is:

To facilitate the attainment of a good standard of health by all people of Uganda in order to promote a healthy and productive life

(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 01 Sector Monitoring and Quality Assurance		
Outputs Contributing to Outcome 1:	Outputs Contributing to Outcome 2:	Outputs Contributing to Outcome 3:
<i>Outputs Provided</i>	<i>Outputs Provided</i>	None
080104 Standards and guidelines developed	080103 Support supervision provided to Local Governments and referral hospitals	
Vote Function: 08 02 Health systems development		
Outputs Contributing to Outcome 1:	Outputs Contributing to Outcome 2:	Outputs Contributing to Outcome 3:
<i>Capital Purchases</i>	None	None
080281 Health centre construction and rehabilitation		
080285 Theatre construction and rehabilitation		
Vote Function: 08 03 Health Research		
Outputs Contributing to Outcome 1:	Outputs Contributing to Outcome 2:	Outputs Contributing to Outcome 3:
None	<i>Outputs Provided</i>	None
	080303 Research coordination	
Vote Function: 08 04 Clinical and public health		
Outputs Contributing to Outcome 1:	Outputs Contributing to Outcome 2:	Outputs Contributing to Outcome 3:
<i>Outputs Provided</i>	<i>Outputs Provided</i>	None
080401 Community health services provided (control of communicable and non communicable diseases)	080405 Immunisation services provided	
080402 Clinical health services provided (infrastructure, pharmaceutical, integrated curative)		
080403 National endemic and epidemic disease control services provided		
Vote Function: 08 05 Pharmaceutical and other Supplies		
Outputs Contributing to Outcome 1:	Outputs Contributing to Outcome 2:	Outputs Contributing to Outcome 3:
None	None	<i>Outputs Provided</i>
		080501 Preventive and curative Medical Supplies (including immunisation)

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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

1. Health Systems Development

Under the Vote Function rehabilitation works were started in Tororo, Bududa, Kambuga, Itojo, Nebbi, Apac, and Rushere. Solar energy installation or grid connection was completed in health facilities in Palisa, Budaka, Kumi, Bukedea as well as Kotido, Kaabong and Abim districts. Equipment worth Ushs 1.68bn arrived in the country and was distributed to 4 hospitals and 12 HCIVs.

2. Clinical and Public Health Vote Function

Under the Vote Function, Village Health Teams (VHTs) were established in 13 Districts. 42 disease outbreaks detected & responded to. 10 Districts were supported to manage epidemics/emergencies and emergency health supplies were procured and delivered. Surveillance system on guinea worms was sustained in 35 districts. Vaccines and vaccination logistics were supplied to all Local Governments. The tetanus vaccination campaign was carried out in 5 districts. 1 round of mass polio & measles immunization in children below 5 years was conducted countrywide and 3 rounds of mass polio immunisation conducted in 29 high risk districts (children below 5 years). The following coverage were attained;-HIV counseling 30%, HCT 50% and PMTCT 53%. The HIV/AIDs National Strategic Plan was disseminated

3. Sector Monitoring and Quality Assurance (Vote 014 –Ministry of health)

Out of the 4 quarterly reviews and 7 studies planned, 3 quarterly reviews and 7 studies were conducted. All districts were supervised at least thrice during the financial year. 19 of the 25 planned districts supported under the Yellow Star Programme.

4. Health Research

Research on; plague, resistance to anti-malaria, immune boosting, herbal medicines, HIV drug resistance and arbovirus was undertaken. The polio Laboratory was accredited. UVRI was able to detect the wild polio virus. Hepatitis E outbreaks were confirmed and 8 influenza surveillance sites established. UVRI participated in the screening for swine flu. Traditional health practitioners and conventional health practitioners were sensitized on the role of traditional health practitioners and traditional medicine in primary health care in four districts. The UNHRO bill was enacted.

5. Pharmaceuticals and other supplies

Medicines and health supplies worth 74.390bn were procured and distributed under programme 9, Logistical support was extended to all districts and NGO health providers. Medicines for TB worth shs 1.818bn and for HIV/AIDS worth shs 1.921bn were procured and distributed under the Global Fund for HIV/AIDS, TB and Malaria. Medicines worth 3.35bn and Medical equipment worth 1.05 bn were procured under Health Sector Programme Support Project. Vaccines worth 33.606bn shs were procured (7bn GoU 26.606bn under GAVI.) - an equivalent of 4.63 million doses of pentavalent vaccines. Reproductive health commodities worth 6bn procured and distributed under UNFPA. An additional shs 2.3bn worth of vaccines and vaccination logistics was provided to cater for the mass polio immunization campaigns.

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6. Policy, Planning and Support Services. (Vote 014 –Ministry of health)

The following services were provided under the vote function; Policy, consultation, planning , Ministry Support Services, Provision of guidelines, Ministerial and Top Management oversight functions. The relevant policy documents;-MPS, BFP and the health sector performance report were produced. The political leadership took stewardship and participated in the supervision of health services nationwide. The health segment of the NDP was finalized.

Preliminary 2013/14 Performance

The key achievements for the first quarter of FY 2013/14 are summarized under the respective Vote Functions listed below:

1. Health Systems Development (Vote 014 –Ministry of Health)

- Under this Vote Function the following was achieved in the first quarter of FY 2013/14;
- Signed contracts for renovation of 9 Hospitals under Phase I namely: Mityana, Nakaseke, Anaka, Moyo, Entebbe, Nebbi, Moroto RRH, Iganga & Kiryandongo.
- Initiated a requested for additional funding of US\$ 65 million from the World Bank for renovation of an additional 9 Hospitals and 27 HCIVs under UHSSP under Phase II namely: Mubende RRH, Apac, Itojo, Entebbe, Buwenge, Kitgum, Anaka, Masindi, Bukwo, Pallisa and HCIVs: Kasanda, Kiganda, Ngoma, Mwera, Kyantungo Kikamulo, Kabuyanda, Mwizi, Kitwe, Rubare, Aboke, Aduku, Bwijanga, Bullisa, Padibe, Atyak, Obongi, Pakwach, Buvuma, Budondo, Ntenjeru-Kojja, Buyinja, Nankoma, Bugono, Kiyunga, Kibuku and Budaka. The request is expected to be approved by the World Bank Board in February 2014.
- Completed distribution of Emergency Obstetric and Neonatal Care Equipment, general and specialized equipment procured during FY 12/13 worth US\$ 13.2 million.
- Distribution of 69 Photocopiers, 175 printers and 175 photocopiers is ongoing.
- Contracts signed for supply of safe delivery kits (mama kits) contraceptives and long term family planning methods under the National Medical Stores.
- Submitted a request for procurement of 19 ambulances through the United Nations Office for Project Services
- The consultancy for the 30 Years Master Plan for Mulago Hospital is ongoing. The consultant submitted an acceptable inception report. The consultant will complete the work by end of the next quarter.
- A Consultant has been recruited to undertake supervision for the civil works for lower Mulago. The consultant is now reviewing the detailed plans for the upgrade and renovation of lower Mulago.
- Evaluation of Consultants to undertake civil works in Kawempe and Kiruddu Hospitals have been completed. Contracts are expected to be signed by 31st December, 2013 after clearance from the African Development Bank and the Solicitor General.
- Continued with the procurement process for the consultant to design the Maternal and Neonatal Hospital. Contract will be signed with the consultant within the se
- Shortlisting is ongoing for a second round of scholarships for health workers in hard to reach and hard to stay areas.

2. Clinical and Public Health Vote Function (Vote 014 –Ministry of Health)

REPRODUCTIVE HEALTH

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The Ministry procured and distributed critical basic and comprehensive EMoNC equipment to 230 health facilities. The monitoring and evaluation framework for reproductive health, policy briefs on family planning and information and education communication materials on fistula were developed.

Eight (8) districts were monitored for implementation of the roadmap namely: Mubende, Gulu, Abim, Nakapiripit, Bundibugyo, Amudat, Arua and Kitgum. Emergency obstetric and newborn care (EMoNC) supervision and mentoring was undertaken in Amudat, Nakapiripit, Arua, Gulu, Kitgum, Bundibugyo and Abim districts.

Maternal and perinatal death review revitalisation was undertaken in 14 districts. Standardisation of the training Module for reproductive health/HIV Integration was completed and training on the same done in Oyam district. The Ministry also trained health workers on Maternal and Perinatal Deaths Reviews (MPDR) in the districts of: Jinja, Masaka, Kayunga, Buikwe, Kalungu, Bukomansimbi, Lwengo, Lyantonde, Rakai, Sembabulu, Iganga, Luuka, Mayuge, Kamuli, Kaliro, Namayingo, Namutumba and Bugiri.

The sector procured and distributed sexual assault forensic evidence collection Kits in Gulu, Lira, Moroto, Masaka and Mbarara districts. A Sexual Gender Based Violence (SGBV) assessment for SGBV prevention and response was undertaken for central government ministries, institutions and NGOs working in the area of Sexual Gender Based Violence (SGBV). Field testing and finalisation of the Gender and Human rights mainstreaming guidelines was completed.

CHILD HEALTH

Conducted integrated supervision for child health days including ICCM in implementing districts. A consolidated review team for Pneumonia and diarrhea implementation framework was formulated.

NON COMMUNICABLE DISEASES (NCD)

A comprehensive NCD policy which includes cancer was developed. The draft will be presented to the technical working group (TWG) in the second quarter. Public awareness campaigns on NCD were undertaken using media dialogue meetings, radio and TV talk shows. A cancer camp was held in Mityana to screen and ensure early detection of NCDs. Surveillance is being strengthened through HMIS.

PUBLIC HEALTH EMERGENCIES (PHE)

Rapid / immediate response to PHE was provided to 5 districts prone to major public health emergencies. Guidelines on PHE management were distributed to 4 districts namely Nwoya, Zombo, Arua and Maracha. No major outbreaks or incidence (floods, landslides, earthquakes etc) were reported during the quarter.

NUTRITION

Held two Preparatory meetings for the African Food and Nutrition security Day. Orientation on nutrition status and the Accelerating Nutrition Improvement (ANI) was carried out in Luuka, Namutumba, Iganga, Kibaale, Hoima and Masindi districts. The Ministry developed guideline for Industries and Importers to implement Mandatory Food Fortification Regulations. A food fortification monitoring and evaluation framework was also developed.

ENVIRONMENTAL HEALTH

Review of the Public Health Act is ongoing. Quarterly technical support supervision was carried out in Dokolo, Amulor kaberamaido, Soroti, Amuria, Bukedea, Kumi, Palisa, Kibuku, Serere, Ngora, Mbarara, Bushenyi and Sheema districts.

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ORAL HEALTH

Support supervision on oral health was conducted in the districts of Mbale, Kaberamaido, Sironko, Kumi, Soroti.

VETERINARY PUBLIC HEALTH (VPH)

Rabies, Influenza, brucellosis and other zoonotic diseases were investigated and monitored in all districts in Uganda. District and hospital health staff were trained to orient them on current treatment and management of rabies.

NURSING

Conducted support supervision in 7 hospitals and 3 districts. Draft nurses and midwives policy is in place. The Ministry also coordinated the procurement and distribution of uniforms for nurses and midwives.

3. Quality Assurance Vote Function (Vote 014 –Ministry of Health)

The following was achieved;

The 19th Joint Review Mission (JRM) and National Health Assembly took place in September 2013 and the Annual Health Sector Performance Report for FY 2012/13 was produced and disseminated. The above meetings were preceded by field visits to 16 districts to collect information for consideration during the meetings.

Work on the Client Charters for Arua, Hoima, Moroto regional referral hospitals was started and draft copies are available.

4. Health Research (Vote 014 –Ministry of Health)

5. Pharmaceuticals and Other supplies (Global Fund and GAVI)

The following procurements were undertaken using funds from the Global Fund;

- 16 millions Long-lasting insecticide treated Nets worth USD 44.95m. The nets will be distributed country wide.
- ACTs, Rapid Diagnostic Tests (RDTs) and Lab Supplies worth USD 9.48m.
- First and second line Anti-TB Drugs worth USD 3.7million.
- ARVs and Cotrimoxazole worth USD 43.5m

The Health Sub Districts and Health sub District Focal Persons were supported to conduct Supervision at lower levels and District levels. The ministry also supported The AIDS Support Organisation (TASO) to Implement TB-Directly Observed Treatment (DOTs). The National Medical Stores was supported in distributing the Medicines to the last mile (health sub district).

Other outputs include; joint support supervision carried out in 25 districts, Global Fund asset registers reviewed for appropriateness, sub-recipient accountabilities reviewed for accuracy and training for M & E Specialists on use of DHIS II conducted.

The ministry also; supported the recruitment of the Regional Performance Monitoring Teams (RPMTs) to support the districts in an efficient health service delivery, prepared and submitted the No-Cost Extension for R10 TB SSF Grant, submitted the HIV/AIDs Interim Funding Application, visited sampled districts to undertake an audit of processes for ensuring quality of services of programs supported by the Global Fund, procured computers and solar panels for 90 facilities in underserved districts.

6. Policy, Planning and Support Services. (Vote 014 –Ministry of Health)

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The following was achieved in the first quarter.

The Ministry produced Quarterly activity & financial reports and undertook technical supervision and inspection of sector activities for consistency with Government Policies.

Requisite documentation and information for meetings with Parliament on the health sector budget were prepared. Sector budget meetings were organized to consider budget pressures and other matters pertaining to health financing. A concept paper for the 2010/11 and 2011/12 National Health Accounts was prepared.

Other outputs include; assorted procurements for goods and services undertaken, report on study on scaling up National Health Insurance Scheme produced, HMIS data validation done on EPI indicators, HMIS stakeholder meetings held to review HMIS tools, HMIS technical support supervision done, DHIS2 training done for MOH staff, Internet services provided for MOH headquarters and remote sites.

Table V2.1: Past and 2014/15 Key Vote Outputs*

<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
Vote: 014 Ministry of Health			
Vote Function: 0801 Sector Monitoring and Quality Assurance			
Output: 080103	Support supervision provided to Local Governments and referral hospitals		
<i>Description of Outputs:</i>	4 Support supervision visits per district conducted	Pre carried out in 16-JRM visits districts	2 Support supervision visits per district conducted
<i>Performance Indicators:</i>			
Number of Supervision, monitoring visits conducted in LG's	4	1	2
<i>Output Cost: US\$ Bn:</i>	0.392	0.005	0.392
Output: 080104	Standards and guidelines developed		
<i>Description of Outputs:</i>	Comprehensive supervision and monitoring guidelines developed.	Contract for comprehensive supervision and monitoring guidelines awarded.	Develop and Print 10,000 copies of the support supervision strategy.
	Accreditation system developed	Quality Improvement Indicator Manual drafted	Update and translate patient charter into local language
	Quality Improvement Indicator Manual developed		
<i>Performance Indicators:</i>			
No. of monitoring and quality assurance guidelines developed**	3	1	2
<i>Output Cost: US\$ Bn:</i>	0.112	0.000	0.112
Vote Function Cost	US\$ Bn:	0.805 US\$ Bn:	0.190 US\$ Bn:
0.805			0.805
Vote Function: 0802 Health systems development			
Output: 080280	Hospital Construction/rehabilitation		
<i>Description of Outputs:</i>	Construction works will be undertaken kawolo, itojo, kawempe and kiruddu. 13 General hospitals rehabilitated	Bids for civil works for Kawempe and Kiruddu Hospitals have been completed. Contracts signed for renovation of 9 hospitals	Construction works will be undertaken in kawolo, kawempe and kiruddu and Moroto..22hospitals rehabilitated
<i>Performance Indicators:</i>			
No. of hospitals rennovated	13	0	22
No. of hospitals constructed	4	0	4
<i>Output Cost: US\$ Bn:</i>	165.315	0.000	229.272
<i>Output Cost Excl. Ext Fin. US\$ Bn:</i>	2.047	0.000	1.050

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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
Output: 080282	Staff houses construction and rehabilitation		
<i>Description of Outputs:</i>	Staff housing constructed at HC IIIs in the Karamoja Region districts of Kaabong, Abim, Kotido, Moroto, Amudat, Napak and Nakapiripirit,	Construction of staff houses not yet undertaken	Staff housing constructed at HC IIIs in the Karamoja Region districts of Kaabong, Abim, Kotido, Moroto, Amudat, Napak and Nakapiripirit,
<i>Performance Indicators:</i>			
No. of staff houses rehabilitated	0	0	0
No. of staff houses constructed	88	0	66
<i>Output Cost: US\$ Bn:</i>	4.760	<i>US\$ Bn:</i> 0.000	<i>US\$ Bn:</i> 0.000
<i>Output Cost Excl. Ext Fin. US\$ Bn:</i>	0.000	<i>US\$ Bn:</i> 0.000	<i>US\$ Bn:</i> 0.000
Vote Function Cost	<i>US\$ Bn:</i> 196.367	<i>US\$ Bn:</i> 10.416	<i>US\$ Bn:</i> 247.219
<i>VF Cost Excl. Ext Fin. US\$ Bn</i>	<i>US\$ Bn</i> 10.897	<i>US\$ Bn</i> 0.399	<i>US\$ Bn</i> 4.497
Vote Function: 0803 Health Research			
Output: 080303	Research coordination		
<i>Description of Outputs:</i>	Implement the strategic Plan for research Institutions	Implemented the strategic Plan for research Institutions	Implement the strategic Plan for research Institutions. This includes identification of research priorities, production of research policies and guidelines and carrying out health research
<i>Performance Indicators:</i>			
Number of reports on specialised research	10	0	12
Number of HIV Testing centres provided with proficiency Testing Panels	1500	591	3000
No. of health sector research priorities assessed	10	0	12
<i>Output Cost: US\$ Bn:</i>	0.952	<i>US\$ Bn:</i> 0.158	<i>US\$ Bn:</i> 0.952
Vote Function Cost	<i>US\$ Bn:</i> 2.413	<i>US\$ Bn:</i> 1.028	<i>US\$ Bn:</i> 2.413
Vote Function: 0804 Clinical and public health			
Output: 080401	Community health services provided (control of communicable and non communicable diseases)		
<i>Description of Outputs:</i>	Empower the communities to take charge of their own health through strengthening VHTs and increased awareness of disease prevention and health promotion	Training of 55 THPs and VHTs in Atur was conducted in Dokolo district in Good manufacturing practices, herbal products development and the registration process of herbal medicines with the NDA carried out	Empower the communities countrywide to take charge of their own health through strengthening VHTs and increased awareness on disease prevention and health promotion. This will be done by undertaking 5 community awareness campaigns, establishing VHTs in 10 additional districts and carrying out health awareness and sensitisation in 85 districts.
<i>Performance Indicators:</i>			
Number of awareness campaigns on cancer and	2	1	2

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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
NCD conducted			
Community awareness campaigns on disease prevention and health promotion carried out	5	2	5
<i>Output Cost: US\$ Bn:</i>	3.692	<i>US\$ Bn:</i> 0.299	<i>US\$ Bn:</i> 3.692
<i>Output Cost Excl. Ext Fin. US\$ Bn:</i>	3.112	<i>US\$ Bn:</i> 0.182	<i>US\$ Bn:</i> 3.112
Output: 080402	Clinical health services provided (infrastructure, pharmaceutical, integrated curative)		
<i>Description of Outputs:</i>	Mentorship training of professionals from National referral hospitals to Regional Referral Hospitals and RRH hospitals to General hospitals and GHs to HCIVs conducted	Mentorship training of professionals from National referral hospitals to Regional Referral Hospitals and RRH hospitals to General hospitals and GHs to HCIVs conducted	Components of the roadmap for maternal health implemented countrywide. Policies, guidelines and standards for health infrastructure, pharmaceutical and curative services implemented and monitored countrywide. Quarterly reports on the status and performance of health infrastructure and quality of pharmaceutical and curative services in the country produced. Health workers trained in different health service modalities countrywide. Public health emergencies responded to. Pharmaceutical supply chain management and curative services implementation
<i>Performance Indicators:</i>			
No. of health workers trained**	4500	670	5000
No. of Districts with established and operational Village health teams*	111	85	111
No. of districts implementing the Road Map to Maternal Health**	111	111	111
No of districts where quarterly area team supervision has been conducted to intensify medicines inspection*	111	40	111
% of districts supervised and mentored for improvement of quality of care in Reproductive Health services**	100	29	100
<i>Output Cost: US\$ Bn:</i>	2.156	<i>US\$ Bn:</i> 0.186	<i>US\$ Bn:</i> 1.956
Output: 080403	National endemic and epidemic disease control services provided		
<i>Description of Outputs:</i>	Guidelines on health thematic areas developed	Guidelines on health thematic areas developed	Endemic and epidemic diseases prevented and controlled wherever they arise, Epidemic preparedness enhanced

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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
			nationwide, compliance with International Health Regulations ensured, programs targeting diseases for eradication and elimination strengthened countrywide.
<i>Performance Indicators:</i>			
Number of guidelines, policies, strategies and training materials produced	6	2	7
<i>Output Cost: US\$ Bn:</i>	1.744	<i>US\$ Bn:</i> 0.137	<i>US\$ Bn:</i> 2.244
Output: 080404	Technical support, monitoring and evaluation of service providers and facilities		
<i>Description of Outputs:</i>	Integrated and technical support supervision conducted in all regional referral hospitals and districts	Integrated and technical support supervision conducted in all regional referral hospitals and districts	Integrated and technical support supervision conducted in all regional referral hospitals and districts
<i>Performance Indicators:</i>			
Number of technical support supervisions carried in LG'S	4	1	4
<i>Output Cost: US\$ Bn:</i>	0.182	<i>US\$ Bn:</i> 0.017	<i>US\$ Bn:</i> 0.582
Output: 080405	Immunisation services provided		
<i>Description of Outputs:</i>	The population protected against life threatening immunisable diseases	The population protected against life threatening immunisable diseases	The population countrywide is protected against life threatening immunisable diseases as indicated below
<i>Performance Indicators:</i>			
Proportion of children immunised with DPT 3**	95	93	97
No. of mass polio campaigns carried out**(rounds made)	2	0	2
No. of children immunised with DPT 3**	1474642	386150	1622107
<i>Output Cost: US\$ Bn:</i>	1.000	<i>US\$ Bn:</i> 0.000	<i>US\$ Bn:</i> 1.000
Vote Function Cost	<i>US\$ Bn:</i> 35.716	<i>US\$ Bn:</i> 5.580	<i>US\$ Bn:</i> 34.016
VF Cost Excl. Ext Fin.	<i>US\$ Bn:</i> 21.706	<i>US\$ Bn:</i> 5.394	<i>US\$ Bn:</i> 20.006
Vote Function: 0805 Pharmaceutical and other Supplies			
Output: 080501	Preventive and curative Medical Supplies (including immunisation)		
<i>Description of Outputs:</i>	Pentavalent vaccines (DONOR - GAVI Support) and traditional vaccines	Pentavalent and other vaccines procured and distributed	Pentavalent vaccines (DONOR - GAVI Support) and traditional vaccines procured and distributed
<i>Performance Indicators:</i>			
Value of vaccines procured and distributed against plan	60.23	28,472,892,060	26.13
<i>Output Cost: US\$ Bn:</i>	169.851	<i>US\$ Bn:</i> 23.382	<i>US\$ Bn:</i> 162.434
<i>Output Cost Excl. Ext Fin. US\$ Bn:</i>	3.200	<i>US\$ Bn:</i> 0.000	<i>US\$ Bn:</i> 3.200
Vote Function Cost	<i>US\$ Bn:</i> 215.327	<i>US\$ Bn:</i> 47.844	<i>US\$ Bn:</i> 210.327
VF Cost Excl. Ext Fin.	<i>US\$ Bn:</i> 12.042	<i>US\$ Bn:</i> 1.971	<i>US\$ Bn:</i> 7.042
Vote Function: 0849 Policy, Planning and Support Services			

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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
Vote Function Cost	US\$ Bn:	23.363 US\$ Bn:	4.284 US\$ Bn: 9.954
<i>VF Cost Excl. Ext Fin.</i>	<i>US\$ Bn</i>	<i>9.460 US\$ Bn</i>	<i>3.341 US\$ Bn 9.954</i>
Cost of Vote Services:	US\$ Bn:	462.391 US\$ Bn:	69.341 US\$ Bn: 504.734
<i>Vote Cost Excl. Ext Fin.</i>	<i>US\$ Bn</i>	<i>57.323 US\$ Bn</i>	<i>12.321 US\$ Bn 44.717</i>

* Excluding Taxes and Arrears

2014/15 Planned Outputs

The planned outputs for FY 2014/15 are summarized under the respective Sector Vote Functions listed below:

1. Health Systems Development (Vote 014 –Ministry of Health)

- Construction of Kawempe ,Kiruddu General Hospitals under taken
- Rehabilitation of Lower Mulago Hospital under taken
- Construction of Specialized Maternal and Neonatal Health Unit in Mulago undertaken
- Supervision of civil works for Maternal and Neonatal health unit in Mulago undertaken.
- Continuation with the rehabilitation works for 9 hospitals namely Mityana, Nakaseke, Anaka, Moyo, Entebbe, Nebbi, Moroto RRH, iganga & Kiryandongo

Another 13 hospitals and 27 HC IVs are scheduled for rehabilitation using the additional USD 90 Million from the World Bank. These are Pallisa, Kitgum, Apac, Bugiri, Abim, Atutur, Kitagata, Masindi, Buwenge, Bukwo, Itojo, Mubende and Moroto hospitals. The HC IVs are Kasanda, Kiganda, Ngoma, Mwera, Kyantungo Kikamulo, Kabuyanda, Mwizi, Kitwe, Rubare, Aboke, Aduku, Bwijanga, Bullisa, Padibe, Atyak, Obongi, Pakwach, Buvuma, Budondo, Ntenjeru-Kojja, Buyinja, Nankoma, Bugono, Kiyunga, Kibuku and Budaka.

- Procurement and distribution of mama kits.
- Procurement and distribution of specialized equipment.
- Awarding of scholarships to selected health workers deployed in hard to reach places
- services for the management of the ambulance system procured,
- In FY 2014/15; Staff housing (66 units) will be constructed at HC IIs & IIIs in the Karamoja Region in the following districts; Kaabong, Abim, Kotido, Moroto ,Amudat, Napak and Nakapiripirit.
- Kawolo Hospital: Renovation and expansion of the OPD, Theatre and Maternity ward and construction of a Trauma centre, 4 staff house units and a Mortuary.

2. Clinical and Public Health Vote Function (Vote 014 –Ministry of Health)

In FY 2013/14; The Ministry will monitor 60 districts for implementation of Roadmap, Conduct Independent maternal death audits in 8 districts. Commemorate the Safe Motherhood day, hold the Annual reproductive health stakeholder's meeting and carry out 4 Surgical camps for Family Planning .It is anticipated that 66% of sick or malnourished U5s and newborns in 40 districts will be reached with effective treatment for pneumonia, diarrhea and malaria. The Child Survival Strategy will be disseminated in 80 districts and 10 training institutions.

It is further anticipated that the National Non Communicable Diseases (NCD) strategy and National cancer policy will be developed. NCD public awareness and healthy lifestyles will be promoted. Early detection and treatment of breast and cervical cancers in 12 HC Ivs, capacity building of health facilities to deliver quality NCD management, Support supervision in 12 Health facilities in 3 regions and strengthening of surveillance systems will be undertaken.

On public health emergencies, Technical Support Supervision of activities carried out in 80 districts will be

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undertaken and rapid response to public health emergencies given to all districts. VHTs will be established in 10 additional districts and Health awareness and sensitisation conducted in 85 districts.

Under immunization, the ministry will support all districts to adhere to the set standards and policy guidelines for delivery of quality immunization services. Surveillance of EPI diseases and National supplemental immunization activities will be carried out.

In response to the nodding syndrome, -Appropriate treatment and case management together with psychological support to affected children and their care givers will be provided. Livelihood improvements and diet diversification to affected households promoted. Rehabilitative education programmes affecting special needs shall be provided while advocacy and sensitization of the community conducted. Integrated disease surveillance at community and health facility level will be strengthened and coordination, monitoring and support supervision at central and district level conducted.

In the fight against Malaria, -Small scale and large scale field testing of mosquito larviciding will be completed and policy guidelines on mosquito larviciding developed. Photo-biological control of malaria will be implemented in Jinja and Mbale Municipalities plus Nakasongola, Namayingo and Sembabule districts. Indoor residue spraying (IRS) supplies will be procured and implementation micro plans for districts developed. Baseline entomological studies will be conducted in two districts and training of personnel involved in IRS carried. Advocacy for IRS carried out and IRS implementation reports produced and disseminated.

3. Quality Assurance Vote Function (Vote 014 –Ministry of Health)

In FY 2013/14, two quarterly reviews and one Pre JRM field visit will be conducted. The 20th JRM and the 10th NHA shall be conducted. Two support supervision visits per district will be carried out and the annual health sector performance report produced. Comprehensive supervision and monitoring guidelines for the health sector developed

4. Health Research (Vote 014 –Ministry of Health)

Planned outputs under this vote function include;

Indoor residual spraying activities in affected villages of West Nile monitored, Influenza surveillance conducted and staff trained in surveillance; Insecticide resistance in main malaria vector population across Uganda determined, Malaria patterns and risk areas determined across Uganda, Immune responses for plague, yellow fever and other out-breaks due to highly pathogenic viruses monitored, DTS proficiency testing panels distributed to all HIV testing sites and support supervision done, 100% phase two of the rapid test evaluation completed, Epidemiological research in Kasensero and Dimu landing site in Rakai district done, Epidemiological research in HIV/AIDS, Malaria and Acute Viral Outbreaks carried out, Available research capacity through training and supervision of young researchers improved and UVRI strategic plan printed and disseminated

Other planned outputs include; Herbal medicines/Herbal therapies developed and standardised; research information and research work disseminated, Medicinal plants of Uganda databases established (at NCRI and regional community centres for Traditional medicine) and national research priorities developed in various fields of health care (Malaria, MCH, HIV/AIDS etc).

5. Pharmaceuticals and Other supplies (Global Fund and GAVI)

Medicines & Pharmaceutical Products, Health Products and Health Equipment like X-rays, Microscopes for Health Facilities will be Procured. The Global Fund Asset Verification Report will be produced and M & E Capacity building plan developed. Data quality Audits & Joint Support Supervision will be conducted in 78 districts. The National TB Prevalence survey will be conducted.

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6.Policy, Planning and Support Services. (Vote 014 –Ministry of Health)

In FY 2014/15 under the Planning vote function:

Supervision and inspection of sector activities will be undertaken for consistency with Government Policies. National, Regional and district planning meetings and National District Health Officer's Meetings will be held. Policies aimed at harmonizing partnerships will be developed, human rights and gender reports produced.

The following documents will be produced during the financial year: Ministerial Policy Statement for FY 2015/16, budget Framework Paper for FY 2015/16, 4 HMIS Quarterly Reports, Annual work plan for FY 2015/16, statistical data on health, quarterly performance reports, budget monitoring reports, local government mentoring reports, , health sector statistical abstract 2014, Quarterly LGs OBT review reports, LGs releases advice report, midterm review report for the Health Sector Strategic and Investment Plan, quarterly audit reports, procurement reports, National Health Accounts report, Annual Health Sector Performance Report , Annual Final Accounts Report for FY 2014/15, DHO meeting report and 4 PRDP reports.

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

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
Vote: 014 Ministry of Health						
Vote Function:0801 Sector Monitoring and Quality Assurance						
Number of Supervision, monitoring visits conducted in LG's		4	1	2	2	2
No. of monitoring and quality assurance guidelines developed**		3	1	2	5	5
Vote Function Cost (US\$ bn)	0.639	0.805	0.190	0.805	1.601	2.200
Vote Function:0802 Health systems development						
No. of hospitals constructed		4	0	4	5	10
No. of hospitals renovated		13	0	22	8	20
No of health centres constructed		0	0		0	
No. of Health centres supplied with energy		0	0	20	0	0
No. of Health facilities rehabilitated/renovated		2	0	27	27	0
No. of staff houses constructed		88	0	66	20	100
No. of staff houses rehabilitated		0	0	0	0	60
No. of maternity wards constructed			0			
No. of maternity wards rehabilitated			0			
No. of OPD wards constructed			0			
No. of OPD wards rehabilitated			0			
No. of other wards constructed			0			
No. of other wards rehabilitated			0			
No. of theatres remodelled & equipped			0			
Vote Function Cost (US\$ bn)	N/A	190.267	10.416	247.219	79.612	35.000
VF Cost Excl. Ext Fin.	5.635	4.797	0.399	4.497	N/A	N/A
Vote Function:0803 Health Research						
No. of health sector research priorities assessed		10	0	12	17	20

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Vote Function Key Output Indicators and Costs:	2012/13 Outturn	2013/14 Approved Plan	Outturn by End Dec	MTEF Projections		
				2014/15	2015/16	2016/17
Number of HIV Testing centres provided with proficiency Testing Panels		1500	591	3000	4500	8000
Number of reports on specialised research		10	0	12	15	18
Vote Function Cost (US\$ bn)	1.746	2.413	1.028	2.413	2.952	3.000
Vote Function:0804 Clinical and public health						
Community awareness campaigns on disease prevention and health promotion carried out		5	2	5	5	
Number of awareness campaigns on cancer and NCD conducted		2	1	2	2	
% of districts supervised and mentored for improvement of quality of care in Reproductive Health services**		100	29	100	100	
No of districts where quarterly area team supervision has been conducted to intensify medicines inspection*		111	40	111	111	
No. of districts implementing the Road Map to Maternal Health**		111	111	111	111	
No. of Districts with established and operational Village health teams*		111	85	111	111	
No. of health workers trained**		4500	670	5000	2000	
Number of guidelines, policies, strategies and training materials produced		6	2	7	8	
Number of technical support supervisions carried in LG'S		4	1	4	4	
No. of children immunised with DPT 3**		1474642	386150	1622107	1822107	
No. of mass polio campaigns carried out**(rounds made)		2	0	2	2	
Proportion of children immunised with DPT 3**		95	93	97	100	
Vote Function Cost (US\$ bn)	N/A	35.216	5.580	34.016	21.501	25.000
<i>VF Cost Excl. Ext Fin.</i>	<i>22.502</i>	<i>21.206</i>	<i>5.394</i>	<i>20.006</i>	<i>N/A</i>	<i>N/A</i>
Vote Function:0805 Pharmaceutical and other Supplies						
Value of vaccines procured and distributed against plan		60.23	28,472,892,060	26.13	65	
Vote Function Cost (US\$ bn)	N/A	210.327	47.844	210.327	164.984	0.000
<i>VF Cost Excl. Ext Fin.</i>	<i>8.150</i>	<i>7.042</i>	<i>1.971</i>	<i>7.042</i>	<i>N/A</i>	<i>N/A</i>
Vote Function:0849 Policy, Planning and Support Services						
Vote Function Cost (US\$ bn)	N/A	23.363	4.284	9.954	10.213	64.277
<i>VF Cost Excl. Ext Fin.</i>	<i>12.418</i>	<i>9.46</i>	<i>3.341</i>	<i>9.954</i>	<i>N/A</i>	<i>N/A</i>
Cost of Vote Services (US\$ Bn)	N/A	462.391	69.341	504.734	280.862	129.477
<i>Vote Cost Excl. Ext Fin</i>	<i>51.088</i>	<i>45.723</i>	<i>12.321</i>	<i>44.717</i>	<i>N/A</i>	<i>N/A</i>

Medium Term Plans

1.Improving the management of human resources by rolling out the Human Resource for Health (HRH)

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Management Information System to provide information on levels and distribution of health workers. With the guidance of the Ministry of Public Service, the Hard to Reach Area Incentive Framework (HRIF) will continue to be implemented.

2. Further improvements in the supply chain management for essential medicines, vaccines and other health supplies will be realized through improved and innovative strategies in the supply system. Supervision will be enhanced through collaboration with partners, local governments and other stake holders. By expediting procurement, improving the collaboration with NMS and reducing leakages, the availability of medicines and vaccines will be improved. Procurement plans from health facilities shall serve as the basis for improving resource allocation for medicines at the various levels.

3. Development plans for Regional Referral Hospitals will be implemented and will form the basis for allocating Development funds more efficiently.

4. Emphasis will continue to be placed on consolidating the existing health infrastructure through equipping and renovation, rather than the construction of new facilities.

5. Further improve the functionality and coverage of village health teams

6. Scale up the road map for Reproductive and Maternal health and the Child Survival Strategy countrywide

7. Enhance budget monitoring in the sector and improve the overall resource allocation criteria

8. Implement the new resource allocation formula for PHC grants.

9. Training in Leadership and Management will be carried out country wide

10. Enhancing public –private partnership

(ii) Efficiency of Vote Budget Allocations

To ensure efficiency and value for money over the medium term, the sector will implement the following strategies;

1. Implement a transparent and technically sound process to allocate resources to distribute to districts, Hospitals and other spending institutions including formulation and or review of resource allocation formulas. In addition, decision of new programs will give special preference to districts with highest poverty incidence, poorest mortality indicators, hard to reach and hard to stay areas in allocation of resources.

2. Reduce waste in health sector through minimizing inputs for any given output by; improving management and performance of health workers by paying them reasonably well, providing of their welfare through incentives, and improving logistics and procurement management systems. Given the high value of third party commodities, the sector will explore ways of improving efficiency in health spending through; management of donations of medicines, reduce waste in pharmaceuticals, reduce the costs of clearing and handling charges of medicines and vaccines and drugs procurement and deliveries. Other initiatives include the financial and commodities trucking system (FACTS).

3. Undertake efficiency studies in health facilities to investigate factors that affect efficiency and how efficiency can be improved.

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4. Develop the health financing strategy.

5. Partnership with the private sector in areas of comparative advantage..

6. Establish a criteria to access financial implications of new projects and programmes.

7. Strengthen future analysis and value for money audit.

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	179.9	172.8	181.2	1.8	38.9%	34.2%	64.5%	1.4%
Service Delivery	349.1	401.6	260.4	35.4	75.5%	79.6%	92.7%	27.3%

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: 0802 Health systems development</i>					
Staff house 2 BED RM	90,720	90,720		99,792	1 UNIT X 81 sq M x 1.232mil per sq mtr
Staff house 1 BED RM.	55,000	55,000		60,500	1 UNIT X 44 sq M x 1.375mil per sq mtr
PLACENTA PIT	3,000	3,000		3,300	
MEDICAL WASTE PIT	3,000	3,000		3,300	
HC IV OPERATING THEATRE	198,400	198,400		218,240	155 sq M x 1.408 mil per sq meter
HC IV OPD	564,480	564,480		620,928	441 sq M x 1.408 mil per sq meter
HC IV MORTUARY	30,450	30,450		33,495	29 sq M x 1.155 mil per sq meter
HC IV MATERNITY WARD	221,200	221,200		243,320	177 sq M x 1.374 mil per sq meter
HC IV GENERAL WARD	195,176	195,176		214,693	157.4 sq M x 1.363 mil per sq meter
HC III Out Patients Department	194,680	194,680		214,148	157 sq M x 1.364 mil per sq meter
HC III GENERAL/MATERNITY WARD	314,880	314,880		346,368	246 sq M x 1.408 mil per sq meter
HC II OPD/Emergency ward (142 sqm)	177,500	177,500		195,250	142 Sq M x 1.375 mil per sq meter

(iii) Vote Investment Plans

Allocations over the medium term are geared towards health systems development. The funds are allocated with the aim of functionalizing existing facilities, enhancing maternal and reproductive health and provision of requisite medical equipment.

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)	231.1	229.1	196.6	94.5	50.0%	45.4%	70.0%	73.0%
Grants and Subsidies (Outputs Funded)	8.8	9.0	4.7	0.0	1.9%	1.8%	1.7%	0.0%

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Investment (Capital Purchases)	222.5	266.6	79.6	35.0	48.1%	52.8%	28.3%	27.0%
Grand Total	462.4	504.7	280.9	129.5	100.0%	100.0%	100.0%	100.0%

The major capital purchases for FY 2014/15 constitute rehabilitation and equipping of 9 general hospitals, construction of Kawempe, Kiruddu, Kawolo, and the modern women's (Maternal and Neonatal) hospitals. Staff housing (66) will be also constructed at HC IIIs in the Karamoja region districts of Kaabong, Abim, Kotido, Moroto, Napak, Amudat and Nakapiripirit.

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 1141 Gavi Vaccines and HSSP				
080572 Government Buildings and Administrative Infrastructure	1) Procure Consultancy services for design, construction and supervision of Central Vaccine Store and UNEPI Offices in Butabika, 8 Regional vaccine hubs at regional referral hospitals, 20 District medicines Stores in 20 new districts and 26 Staff houses in 13 districts with hard to reach areas 2) Procure and install 2 (50KVA) generators for the CVS, 8 (25KVA) generators for the regional hubs and solar energy in 26 new staff houses	Bid evaluation initiated for Central Vaccine Store, Regional Hubs, medicine stores and staff houses.	- Procure Consultancy services for design. - Construction and supervision of Central Vaccine Store and UNEPI Offices in Butabika. - Medicines Stores in 20 new districts and - 26 Staff houses in 13 districts with hard to reach areas. Procure and install 2 (50KVA) generators for the CVS, 8 (25KVA) generators for the regional hubs and solar energy in 26 new staff houses	
Total	11,930,000	0	14,703,150	
<i>GoU Development</i>	0	0	0	
<i>External Financing</i>	11,930,000	0	14,703,150	
080575 Purchase of Motor Vehicles and Other Transport Equipment	1) 4 (40HP) motorised boats for Namayingo, Kalangala Mukono, and Buvuma districts with deep water Islands 2) 6 (25HP) motorised boats for Wakiso, Kabale, Kisoro, Nakasongola, Mayuge and Bugiri 3) 4 insulated trucks for transportation of vaccine supplies, 69 Pick-up motor vehicles for districts and centre (UNEPI, CS, ESD,CC) and 2 station wagon vehicles for monitoring of GAVI operations 4) 584 Motorcycles for HC IIIs and 3,000 bicycles for HCII's	Completed evaluation of bids for boats and motorcycles and received approval by MCC. Evaluation report for vehicles finalised. Specifications for trucks and bicycles finalised.	- 4 (40HP) motorised boats for Namayingo, Kalangala Mukono, and Buvuma districts with deep water Islands - 6 (25HP) motorised boats for Wakiso, Kabale, Kisoro, Nakasongola, Mayuge and Bugiri - 4 insulated trucks for transportation of vaccine supplies, 69 Pick-up motor vehicles for districts and centre (UNEPI, CS, ESD,CC) and 2 station wagon vehicles for monitoring of GAVI operations - 584 Motorcycles for HC IIIs and 3,000 bicycles for HCII's	
Total	11,121,439	0	5,793,110	
<i>GoU Development</i>	0	0	0	
<i>External Financing</i>	11,121,439	0	5,793,110	
080577 Purchase of Specialised Machinery & Equipment	Procurement and installation of assorted cold chain equipment including, 22 cold rooms, 1 freezer room, 270 assorted cold chain equipment (refrigerators	Procurement of spare parts and tool kits initiated. Reprogrammed procurement of cold chain meant for regional hubs due to cancellation of	Procurement and installation of assorted cold chain equipment including, 22 cold rooms, 1 freezer room, 270 assorted cold chain equipment (refrigerators	

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Project, Programme	2013/14		2014/15
Vote Function Output <i>US\$ Thousand</i>	Approved Budget, Planned Outputs (Quantity and Location)	Actual Expenditure and Outputs by September (Quantity and Location)	Proposed Budget, Planned Outputs (Quantity and Location)
	and freezers), 1000 vaccine carriers, assorted tool kits and spare parts for cvs, regional hubs and other HF's (public and private)	activity .	and freezers), 1000 vaccine carriers, assorted tool kits and spare parts for cvs, regional hubs and other HF's (public and private)
Total	3,763,515	0	4,228,400
<i>GoU Development</i>	<i>0</i>	<i>0</i>	<i>0</i>
<i>External Financing</i>	<i>3,763,515</i>	<i>0</i>	<i>4,228,400</i>
Project 1148 Public Health Laboratory strengthening project			
080472 Government Buildings and Administrative Infrastructure	Architectural plans developed, 4 satellite laboratories (Arua, Mbale, Mbarara, and Lacor) and NTRL construction at Butabika initiated Consultancy services to procure and install ventilation system on the new NTRL procured	The stage of drawing floor diagram for 4 satellite laboratories (Arua, Mbale, Mbarara, and Lacor) for been locked down to allow move on to the next stage of drafting architectural designs by AMHOLD Bids for constructing NTRL were evaluated and the Best Evaluated Bidder was notified after a No Objection from the TTL. The Contract has been submitted to the SG for his opinion.	Architectural plans developed, 4 satellite laboratories (Arua, Mbale, Mbarara, and Lacor) and NTRL construction at Butabika initiated Consultancy services to procure and install ventilation system on the new NTRL procured
Total	11,380,790	0	11,380,790
<i>GoU Development</i>	<i>0</i>	<i>0</i>	<i>0</i>
<i>External Financing</i>	<i>11,380,790</i>	<i>0</i>	<i>11,380,790</i>
Project 0216 District Infrastructure Support Programme			
080280 Hospital Construction/rehabilitation	•Kisozi HCIII: Completion of Construction and equipping carried out. •Buyiga HCIII: Completion of Construction and equipping carried out. Retention for Kapchorwa and Masafu Hospital retention paid	The activities of this project were scheduled for the next quarters	- Buyiga HCIII: Completion of Construction and equipping carried out. Initial allocations were not sufficient to complete the works.
Total	1,247,000	0	700,000
<i>GoU Development</i>	<i>1,247,000</i>	<i>0</i>	<i>700,000</i>
<i>External Financing</i>	<i>0</i>	<i>0</i>	<i>0</i>
Project 0232 Rehab. Of Health Facilities in Eastern Region			
080280 Hospital Construction/rehabilitation			Construction of OPD complex with casualty unit and theatres in Hoima and Kabale RRHs.
Total	0	0	2,640,000
<i>GoU Development</i>	<i>0</i>	<i>0</i>	<i>0</i>
<i>External Financing</i>	<i>0</i>	<i>0</i>	<i>2,640,000</i>
Project 1027 Institutional Support to MoH			
080272 Government Buildings and Administrative Infrastructure	- Renovation of Old Ministry of Health Head quarters at Wandegeya and wabigalo Central workshop	The activities of this project were scheduled for the next quarters	Undertake phase 2 of renovation of Old Ministry of Health Head quarters at Wandegeya including retiling

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Project, Programme	2013/14		2014/15
Vote Function Output <i>US\$ Thousands</i>	Approved Budget, Planned Outputs (Quantity and Location)	Actual Expenditure and Outputs by September (Quantity and Location)	Proposed Budget, Planned Outputs (Quantity and Location)
Total	250,436	0	700,000
<i>GoU Development</i>	<i>250,436</i>	<i>0</i>	<i>700,000</i>
<i>External Financing</i>	<i>0</i>	<i>0</i>	<i>0</i>
Project 1123 Health Systems Strengthening			
080280 Hospital Construction/rehabilitation	- Civil works in 13 general Hospitals Consultancy services for supervision of civil works	Contracts were signed with best evaluated bidders for 9 Hospitals under Phase I including: Mityana, Nakaseke, Kiryandongo, Nebbi, Anaka, Moyo, Moroto, Iganga and Entebbe. The sites have been handed over and works are expected to commence in December 2013. An additional US\$ 65 million has been requested from the World Bank and will be used to renovate the remaining 9 Hospitals and 27 HCIVs. The shortlisting report for clerks of works is yet to be reviewed and cleared by the Delegated Contracts Committee	Construction works for 9 hospitals and 27 HC Ivs undertaken. Another 13 hospitals and 27 HC Ivs are scheduled for rehabilitation using the additional USD 90 Million from the World Bank. These are Pallisa, Kitgum, Apac, Bugiri, Abim, Atutur, Kitagata, Masindi, Buwenge, Bukwo, Itojo, Mubende and Moroto hospitals. The HC Ivs are Kasanda, Kiganda, Ngoma, Mwera, KyantungoKikamulo, Kabuyanda, Mwizi, Kitwe, Rubare, Aboke, Aduku, Bwijanga, Bullisa, Padibe, Atyak, Obongi, Pakwach, Buvuma, Budondo, Ntenjeru-Kojja, Buyinja, Nankoma, Bugono, Kiyunga, Kibuku and Budaka.
Total	92,618,354	0	138,431,700
<i>GoU Development</i>	<i>0</i>	<i>0</i>	<i>0</i>
<i>External Financing</i>	<i>92,618,354</i>	<i>0</i>	<i>138,431,700</i>
Project 1187 Support to Mulago Hospital Rehabilitation			
080280 Hospital Construction/rehabilitation	Construction of Kawempe, Kiruddu and lower mulago undertaken Construction of the specialised Maternal and neonatal health unit in mulago undertaken. GoU counterpart funding for the specialised Maternal and neonatal health unit in mulago (0.8bn)	Evaluation of Consultants to undertake civil works in Kawempe and Kiruddu Hospital have been completed. Contract will be signed in the next quarter after clearance from the African Development Bank and the Soliciter General. Continued with the procurement process for the consultant to design the Maternal and Neonatal Hopital. Contract will be signed with the consultant within the second quarter.	Construction of Kawempe ,Kiruddu and rehabilitation of Lower Mulago Hospital under taken Construction of Specialised Maternal and Neonatal Health Unit in Mulago undertaken
Total	58,860,000	0	74,910,000
<i>GoU Development</i>	<i>800,000</i>	<i>0</i>	<i>350,000</i>
<i>External Financing</i>	<i>58,060,000</i>	<i>0</i>	<i>74,560,000</i>
Project 1243 Rehabilitation and Construction of General Hospitals			

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Project, Programme Vote Function Output <i>US\$ Thousands</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)
080280 Hospital Construction/rehabilitation	Kawolo hospital;- Expanding and rehabilitation of the Outpatient department, expanding and renovating the theatre and maternity, constructing 4 units of staff houses and mortuary. Itojo hospital: Expanding and rehabilitation of the Outpatient department and the medical block and rehabilitating 2 staff housing units	No funds were released for this activity	Kawolo hospital;- Expanding and rehabilitation of the Outpatient department, expanding and renovating the theatre and maternity, constructing 4 units of staff houses and mortuary.
Total	12,590,000	<i>0</i>	12,590,000
<i>GoU Development</i>	<i>0</i>	<i>0</i>	<i>0</i>
<i>External Financing</i>	<i>12,590,000</i>	<i>0</i>	<i>12,590,000</i>

(iv) Vote Actions to improve Priority Sector Outcomes

To address insufficient availability of qualified health staff at task, the sector shall, continue Implementing the motivation and retention strategy for health workers, roll out Human Resources for Health Management Information System (HRHMIS) to additional all districts in the country and implementation of the hard to reach incentive scheme to all districts involved, Establish a Department of Human Resources for Health in the Ministry of Health to coordinate HRH development and management, fill and build capacity for management functions (positions and structures) for hospitals (regional and general and HC IV).

To address low functionality of VHTs, the sector will extend the establishment of VHTS to more additional districts; undertake Sensitization and capacity improvement of VHTs through seminars and training exercises.

In order to address inadequate health infrastructure and equipment, capital investment plans will continue to be geared towards consolidating existing infrastructure

Increased infant immunisation is extensively described in the Child Survival Strategy. The critical inputs to improved performance are the availability of adequate quantities and a reliable supply and storage cold chain system for the vaccines and immunisation supplies. Equally important is the availability of a motivated health workers and community sensitization through village health teams (VHTs). Accordingly the Sector undertakes to fully implement the Child Survival Strategy.

To counter stock outages and supply side deficiencies, the Sector will continue to adopt a Last Mile delivery mechanism to be implemented by the National Medical Stores, to ensure that medicines are delivered by NMs to the final consumer, the health unit, rather than to the stores at the District Headquarters. In addition, the Sector will develop regional storage capacity for medicines to improve the availability of stock within the regions, and to reduce regional disparities.

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: 08 01 Sector Monitoring and Quality Assurance			

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2013/14 Planned Actions:	2013/14 Actions by Sept:	2014/15 Planned Actions:	MT Strategy:
<i>VF Performance Issue: Uncoordinated development and poor operationalisation of standards at service delivery points</i>			
Implement the Client Charter	Implemented the Client Charter	Client Charter disseminated to all districts. Client satisfaction survey disseminated	Coordinated development and dissemination of standards
Vote Function: 08 49 Policy, Planning and Support Services			
<i>VF Performance Issue: -Right staff numbers and skills</i>			
Compulsory deployment to rural areas for Medical Doctors before they are considered for registration.	Discussion for a second round of mass recruitment on going	The sector shall, continue implementing the motivation and retention strategy for health workers, the hard to reach incentive scheme to all districts involved and build capacity for management functions for health facilities	Further continue Implementing the motivation and retention strategy for health workers, the hard to reach incentive scheme to all districts involved and build capacity for management functions for health facilities
Bonding Health workers after Post Graduate training			
Stipend for privately sponsored health workers on Post Graduate Training.			
Sector Outcome 2: Children under one year old protected against life threatening diseases			
Vote Function: 08 03 Health Research			
<i>VF Performance Issue: Poor health research coordination</i>			
Implement research health policy and the strategic plan	Implemented the research health policy and the strategic plan	Implement research health policy and the strategic plan	Implement research health policy and the strategic plan
Vote Function: 08 04 Clinical and public health			
<i>VF Performance Issue: Inadequate coverage of Village Health Teams.</i>			
Establish national coverage of VHTs	VHTs trained.	Operationalise the VHT strategy in 36 poorly performing districts	Establish national coverage of VHTs
<i>VF Performance Issue: Irregular and ineffective support supervision</i>			
Implement the M&E strategy.	M&E strategy implemented	Implement the M&E strategy.	Implement the M&E strategy.
Vote Function: 08 49 Policy, Planning and Support Services			
<i>VF Performance Issue: Availability of information and compliance with the laws and regulations.</i>			
National Health Information Strategy (NHIS) implemented	The DHIS2 being rolled out to all districts	National Health Information Strategy (NHIS) implemented	National Health Information Strategy (NHIS) implemented
Sector Outcome 3: Health facilities receive adequate stocks of essential medicines and health supplies (EMHS)			
Vote Function: 08 05 Pharmaceutical and other Supplies			
<i>VF Performance Issue: Uncoordinated and inefficient supply chain management (procurement planning and distribution of medicines and health supplies)</i>			
Continue implementing the Government Policy on procurement of medicines and medical supplies	Policy on procurement of medicines and medical supplies implemented	Further continue implementing the Government Policy on procurement of medicines and medical	Tailoring the basic kit to regional needs and reviewing it every six months

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
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	2012/13 Outturn	2013/14		MTEF Budget Projections		
		Appr. Budget	Spent by End Sept	2014/15	2015/16	2016/17
0801 Sector Monitoring and Quality Assurance	0.639	0.805	0.027	0.805	1.601	2.200
0802 Health systems development	5.635	190.267	0.057	247.219	79.612	35.000
0803 Health Research	1.746	2.413	0.185	2.413	2.952	3.000
0804 Clinical and public health	22.535	35.216	1.060	34.016	21.501	25.000
0805 Pharmaceutical and other Supplies	8.150	210.327	23.562	210.327	164.984	0.000
0849 Policy, Planning and Support Services	12.541	23.363	1.007	9.954	10.213	64.277
Total for Vote:	51.244	462.391	25.899	504.734	280.862	129.477

(i) The Total Budget over the Medium Term

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

The major services provided by the vote which take up major shares of the vote expenditure are; procurement of vaccines, infrastructural development nationwide and Malaria control interventions like IRS.

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

The major planned changes in resource allocation are described in the table below.

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 Health systems development</i>				
Output: 0802 01 Monitoring, Supervision and Evaluation of Health Systems				
<i>US\$ Bn:</i> 10.598	<i>US\$ Bn:</i> -6.500	<i>US\$ Bn:</i> -6.500		The increment is in line with the UHHSP work plan for the period. The funds are meant for scholarships, reproductive health commodities and leadership and management strengthening
Output: 0802 75 Purchase of Motor Vehicles and Other Transport Equipment				
<i>US\$ Bn:</i> -1.001	<i>US\$ Bn:</i> -1.150	<i>US\$ Bn:</i> -1.150		The decline is in line with the work plan for the period under the Health Systems Strengthening project. Some of the activities undertaken in FY 2013/14 such as procurement of vehicles will not be repeated on the same magnitude hence the decline..
Output: 0802 76 Purchase of Office and ICT Equipment, including Software				
<i>US\$ Bn:</i> -1.250	<i>US\$ Bn:</i> -1.250	<i>US\$ Bn:</i> -1.250		The decline is in line with the work plan for the period under the Health Systems Strengthening project. Some of the activities undertaken in FY 2013/14 such as procurement of equipment were concluded and will not be repeated in FY 2014/15 hence the reduction.
Output: 0802 77 Purchase of Specialised Machinery & Equipment				
<i>US\$ Bn:</i> -8.541	<i>US\$ Bn:</i> -8.541	<i>US\$ Bn:</i> -8.541		The decline is in line with the UHHSP work plan for the period. Procurement of specialized equipment will be undertaken in FY 2013/14 and scaled down in FY 2014/15 hence the reduction
Output: 0802 78 Purchase of Office and Residential Furniture and Fittings				

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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		
US\$ Bn:	-2.500	US\$ Bn: -2.500	US\$ Bn: -2.500	The decline is in line with the work plan for the period under the Health Systems Strengthening project.. Some of the activities undertaken in FY 2013/14 such as procurement of furniture are not scheduled for FY 2014/15 hence the reduction.
Output: 0802 80 Hospital Construction/rehabilitation				
US\$ Bn:	63.956	US\$ Bn: -85.704	US\$ Bn: -130.315	This is additional funds in line with existing financing agreement and disbursement schedule for the Uganda Health Systems Strengthening Project (UHSSP) .Contracts have been signed for the rehabilitation of 9 hospitals under the UHSSP. Two new hospitals (kawempe and Kirrudu) are scheduled for construction in 2014.
Output: 0802 82 Staff houses construction and rehabilitation				
US\$ Bn:	-4.760	US\$ Bn: -4.760	US\$ Bn: -4.760	
<i>Vote Function:0806 Clinical and public health</i>				
Output: 0804 06 Coordination of Clinical and Public Health including the Response to the Nodding Disease				
US\$ Bn:	-1.700	US\$ Bn: -5.249	US\$ Bn: -5.249	Some activities undertaken in the first years under the response to Nodding Syndrome such as research, case management, community sensitization and mobilization have been scaled down. Surplus funds were moved to other critical areas such as Indoor Residue Spraying, clinical services, specialist outreaches and development of the 4th sector strategic plan after review of the current sector plan. Specialist consultants will be supported to support lower level facilities to offer specialized medical services. These interventions may be carried out through surgical camps
<i>Vote Function:0801 Pharmaceutical and other Supplies</i>				
Output: 0805 01 Preventive and curative Medical Supplies (including immunisation)				
US\$ Bn:	-7.418	US\$ Bn: -4.868	US\$ Bn: -169.851	The reduction is in line with the projected donor disbursements for medicines and medical supplies under GAVI and Global Fund during that period
Output: 0805 02 Strengthening Capacity of Health Facility Managers				
US\$ Bn:	5.838	US\$ Bn: -3.860	US\$ Bn: -3.860	Scheduled activities under the GAVI work plan include leadership and management training for health workers hence the provision. Other activities include Ministry of Health headquarters and districts supported to carry out monitoring and support supervision of GAVI supported activities, data validation undertaken and

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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	
			<i>operationalise static and outreach immunization including child health days.</i>
Output: 0805 03 Monitoring and Evaluation Capacity Improvement			
<i>US\$ Bn:</i> 3.842	<i>US\$ Bn:</i> -9.260	<i>US\$ Bn:</i> -9.260	<i>The funds are for procurement of medical supplies under the Global Fund Project</i>
Output: 0805 72 Government Buildings and Administrative Infrastructure			
<i>US\$ Bn:</i> 2.773	<i>US\$ Bn:</i> -11.930	<i>US\$ Bn:</i> -11.930	<i>The increment is on account of consultancy services for design, construction and supervision of Central Vaccine Store and UNEPI Offices in Butabika.</i>
Output: 0805 75 Purchase of Motor Vehicles and Other Transport Equipment			
<i>US\$ Bn:</i> -5.328	<i>US\$ Bn:</i> -11.121	<i>US\$ Bn:</i> -11.121	<i>The procurement of vehicles under the GAVI project is scheduled to be undertaken in FY 2013/14 and will be scaled down in FY 2014/15.</i>
<i>Vote Function: 0801 Policy, Planning and Support Services</i>			
Output: 0849 01 Policy, consultation, planning and monitoring services			
<i>US\$ Bn:</i> -13.909	<i>US\$ Bn:</i> -7.767	<i>US\$ Bn:</i> 6.297	

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 sector faces the following major challenges:

1.No funds have been provided for wage enhancement of the other health workers except Medical officers at Health Centre IIIs and IVs. This has negative impact on attraction, motivation and retention of health workers. Low salaries also lead to increased absenteeism and productivity as workers are forced to consider alternate sources of income.

2.Rehabilitation of general hospitals. Many of the general hospitals some of which were constructed in the 1930s and 1960s are in dire shape. Pictures of these hospitals portraying their sorry state have frequently appeared in the press causing an embarrassment to Government. According to a recent report, the total requirement for civil works, medical equipment, furniture and transport for 25 general hospitals excluding those being covered under the ongoing projects is USD 312 million.

3.Only Ushs 41.185bn has been allocated as recurrent budget to run Health service delivery in 137 LGs with 56 General Hospitals, 61 PNFP Hospitals and 4,205 Lower Level Health Units. Analysis of the UBOS price indices shows that prices of goods and services in general have increased by 44% between 2008/09 and 2012/13 while those of utilities alone (rent, fuel, water and electricity) increased by 20.4%. This has not been matched by commensurate increases in the budgets of the health institutions. This is further compounded by the fact that some health facilities have a budget of Ushs 120,000 per month (excluding medicines) to deliver all the required services.

The recent massive recruitment in Local Governments if not supported by additional investment in the recurrent budget may compromise intended results. The Non Wage recurrent budget therefore needs to be

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revised to enhance health service delivery in the Local Governments. Ushs 21.78bn is required (15.84 bn for traditional PHC NWR for Government facilities while Ushs 5.94bn is for general hospitals).

4.Furthermore, investment in capital development (over Ushs 50bn annually) has not been followed by commensurate increments in maintenance budgets. The bulk of medical equipment and other health infrastructure procured over the years remain unmaintained and un/underutilized. For instance it is common to find new ambulances grounded just for lack of tyres.

Furthermore the maintenance contract under the imaging equipment (X-ray machines and ultra sound scanners) for 18 Hospitals and 30 HC IVs expired in August 2011. To renew the maintenance contracts Shs.2.5 billion per year is required.

5.Huge disease burden owing mainly to HIV/AIDS, Malaria, Tuberculosis, pneumonia and diarrhea particularly in children. Although cost-effective interventions exist for the majority of diseases affecting the population, the health sector is under-resourced to adopt and implement these interventions to scale. The MOH needs significant funding to scale up considerable implementation of these programmes to achieve the health MDG targets.

6.Emergencies and Epidemics: The budget provision for handling emergencies and epidemics is inadequate hence constraining the ability of the health sector to respond promptly and adequately to emergencies.

7.Operationalisation of the cancer ward (one off) Ushs 20bn. This is part of Governments actions to reduce the referrals abroad by creating centres of excellence in the country.

8.Counterpart funding requirements

i.Global Fund VAT-Ushs 3bn

ii.GAVI- for counterpart funding obligations for Pentavalent, PCV and HPV vaccines-Ushs 9.7bn

9.Construction of 2 regional blood banks in Moroto and Arua each at Ushs 2.5bn each and UBTS Central stores at Ushs 2.16bn

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:0875 Health systems development</i>	
Output: 0802 75 Purchase of Motor Vehicles and Other Transport Equipment UShs Bn: 40.000 Setting up the Uganda Ambulance System	<i>Support to the introduction of the Uganda ambulance service. This is meant to improve management of emergencies and referrals in the country. This will begin with the Kampala metropolitan area and will gradually expand country wide. A budget of Ushs 40bn and 270bn is required for the first year and for five years respectively.</i>
<i>Vote Function:0852 Health Research</i>	
Output: 0803 52 Support to Uganda National Health Research Organisation(UNHRO) UShs Bn: 3.000	<i>Investing in research is key to evidence based health policy formulation and should be strongly supported. This contributes to NDP objective 4: create a culture in which health research guides policy formulation. The current NWR budget for the Financial Year 2013/14 is Ushs 1.219 bn Uganda shillings, an amount insufficient for UNHRO and its constituent institutions to implement their new mandates. In order for the Act to be implemented, a proposed additional start up expenditure of Uganda shillings 3 billion is required.</i>

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Additional Requirements for Funding and Outputs in 2014/15:	Justification of Requirement for Additional Outputs and Funding
<i>Vote Function:0801 Clinical and public health</i>	
Output: 0804 01 Community health services provided (control of communicable and non communicable diseases)	
UShs Bn: 206.000	
	<p>The funds are required for the Implementation of roadmap for acceleration of reduction of maternal, new born morbidity and mortality (Emergency Obstetric care (EMoC), child birth service standards, capacity building of PNFs, maternal paediatric mortality audits)</p> <p>Indoor residue spraying is a proven intervention against malaria which is the highest killer disease in the country.</p> <p>The above interventions are all key to disease prevention and reduction in maternal and child mortality. These mainly contribute to strategic objectives 1 & 2 of the NDP.</p>
Output: 0804 05 Immunisation services provided	
UShs Bn: 6.500	
GAVI- counterpart funding obligations for Pentavalent, PCV and HPV vaccines	GAVI- counterpart funding obligations for Pentavalent, PCV and HPV vaccines-Government of Uganda contribution is estimated at Ushs 9.7 bn of which shs 3.2bn has been provided in the sector budget for financial year 2014/15. Shs 6.5 bn additional funds is required to co- finance the GAVI programme .
Output: 0804 07 Provision of standards,Leadership, guidance and support to nursing services	
UShs Bn:	
<i>Vote Function:0803 Pharmaceutical and other Supplies</i>	
Output: 0805 03 Monitoring and Evaluation Capacity Improvement	
UShs Bn: 0.000	
	The funds are meant to fund recurrent activities under the Global Fund for AIDS, TB and Malaria project following the implementation of the commoditization policy.
<i>Vote Function:0801 Policy, Planning and Support Services</i>	
Output: 0849 01 Policy, consultation, planning and monitoring services	
UShs Bn: 3.000	
	The funds are required for development of the fourth health sector strategic plan, enhancement of the monitoring and supervision of sector programmes in line with the sector priorities and implementation of district and regional planning meetings
Output: 0849 02 Ministry Support Services	
UShs Bn: 135.200	
A motivated and appropriately skilled workforce with adequate numbers for enhanced health service delivery	Attraction and retention of health workers: The sector faces a challenge of attracting key human resources for health. This has caused a persistent service delivery gap in health facilities. No funds have been provided for wage enhancement for the other health workers except Medical officers at Health Centre IIIs and Ivs. Low salaries also lead to increased absenteeism and reduced productivity as workers are forced to consider supplementary sources of income. Ushs. 129bn is required for this.
	Wage provision for bonded health workers: In an attempt to solve the Human Resource challenge the Ministry of Health working with development partners offers scholarships to persons pursuing courses in selected medical fields. Some of these trainees are bonded and are expected to serve in the sector at the end of their training. Many of the bonded personnel have now completed their training and are waiting to be absorbed into the service. The challenge however is that there is no wage provision made for recruitment of these persons. Failure to absorb the health workers may lead to further loss as a result of brain drain. Ushs 2.4bn is

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Additional Requirements for Funding and Outputs in 2014/15:	Justification of Requirement for Additional Outputs and Funding
	<p><i>required to recruit and pay those that have completed.</i></p> <p><i>Funding for the Human Resources for Health Information System (HRHIS). The HRHIS is currently being supported under a development partner project that is scheduled to end in 2014. In order to guarantee continuity, Ushs 800 million is required to fund the programme activities.</i></p> <p><i>Recruitment of health workers both in Local Governments and Ministry of Health headquarters: The sector still has challenges of low staffing. The population of Uganda has been increasing rapidly over time. However the number of health workers in the country has not increased proportionately. This creates a gap between the demand for health workers and the supply. Furthermore the current staffing norms are no longer suitable for addressing today's health service demands. There is therefore need to recruit an additional 3,000 Health workers not recruited during last year's recruitment drive. Ushs 3bn required is required to cover recruitment expenses for an additional 3000 workers excluding wage.</i></p>

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, 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:

(ii) Non Tax Revenue Collections

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

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