

Vote: 114 Uganda Cancer Institute

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)

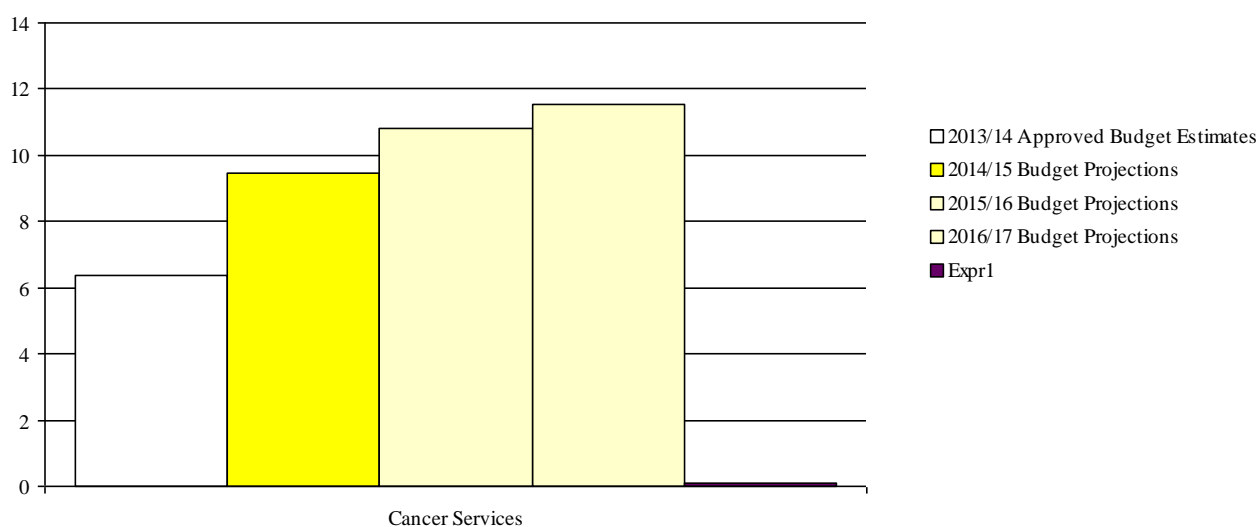
	2012/13 Outturn	2013/14		MTEF Budget Projections		
		Approved Budget	Spent by End Dec	2014/15	2015/16	2016/17
<i>(i) Excluding Arrears, Taxes</i>						
Recurrent						
Wage	1.053	1.299	0.654	1.299	1.299	1.659
Non Wage	1.119	1.083	0.480	1.083	1.186	1.233
Development						
GoU	2.985	4.100	3.471	7.100	8.307	8.639
Ext.Fin	0.000	0.000	0.000	0.000	0.000	0.000
GoU Total	5.158	6.482	4.605	9.482	10.792	11.531
Total GoU+Donor (MTEF)	5.158	6.482	4.605	9.482	10.792	11.531
<i>(ii) Arrears and Taxes</i>						
Arrears	0.000	0.000	0.000	0.000	N/A	N/A
Taxes**	0.000	0.100	0.000	0.000	N/A	N/A
Total Budget	5.158	6.582	4.605	9.482	N/A	N/A
<i>(iii) Non Tax Revenue</i>						
	0.000	0.900	0.332	0.990	1.089	1.089
Grand Total	5.158	7.482	4.937	10.472	N/A	N/A
Excluding Taxes, Arrears	5.158	7.382	4.937	10.472	11.881	12.620

* Donor expenditure data unavailable

** Non VAT taxes on capital expenditure

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

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



Vote: 114 Uganda Cancer Institute

Vote Summary

(ii) Vote Mission Statement

The Vote's Mission Statement is:

The Uganda Cancer Institute exists to provide state of the art cancer care services while advancing knowledge through research and training of healthcare professionals in cancer care

(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

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

Establishment of the new Uganda Cancer Institute Vote - 114; Human Resource Structure; Functional Support System' providing services independent of Mulago Hospital. Consultancy services for the new Cancer Building was finalized. Acquisition of specialised equipment and furniture, remodelling of out patient clinic and storage facility, appointment of Interim Board.

Preliminary 2013/14 Performance

Establishment of Satellite Centres of Mayuge and Ishaka. Establishment of Cancer Registries at the UCI. Ground breaking and commencement of construction of Cancer Building. Procurement of one Motor Vehicle and the process of other procuring the other three is in advanced stages. Procurement of Furniture and specialized equipment and Remodeling of x-ray and Pharmacy.

Table V2.1: Past and 201/12 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: 114 Uganda Cancer Institute			
<i>Vote Function: 0857 Cancer Services</i>			
Output:085701	Cancer Research		
<i>Description of Outputs:</i>	Operationalization and Support of the Established Institutional Research Committees (IRB,SRB,CAB and CBF Alignment and Defining the Directorates mandate.	Consultant has been engaged to streamline a roadmap for the accreditation of the IRB in the UCI Discussions have been started and are ongoing Medical team was reminded about maintenance of good clinical Practices	Operationalization and Support of the Established Institutional Research Committees (IRB,SRB,CAB and CBF Alignment and Defining the Directorates mandate.
	Development of Institutional training/Capacity building and Research agenda	Interns from medical school and other nursing training schools were mentored and supervised	Development of Institutional training/Capacity building and Research agenda
	International and Regional trainings and orientations Coordinated.	2 more nurses have joined the ongoing research making the number 6.	International and Regional trainings and orientations Coordinated.
	Establishment of Cancer data and surveillance centers.	Several studies regarding Kaposi's sarcoma are ongoing The database is under review for further improvement	Establishment of Cancer data and surveillance centers.
	Establishment of community based Cancer registries	1800 patients record captured in	Establishment of community based Cancer registries

Vote: 114 Uganda Cancer Institute

Vote Summary

<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
	In house - cancer research capacity is built and Studies conducted	the data base and 292 forms entered in the CCCP database Have acquired a data base that's now on testing (Clinical master software). All data in the other databases have been exported to clinical master software (7,912 records) Review meetings for the identification of the members to serve on SRB and CAB were held	In house - cancer research capacity is built and Studies conducted
	<i>Output Cost: US\$ Bn:</i> 0.390	<i>US\$ Bn:</i> 0.086	<i>US\$ Bn:</i> 0.381
Output: 085702	Cancer Care Services		
<i>Description of Outputs:</i>	Attend to 2,500 new cancer patients Conduct twice weekly major and routine daily ward rounds on all wards of the Institution. Attend to 33,000 patient visits. Attend to 33,000 person- days of cancer care Safely perform 7,500 bone marrow aspirates and biopsies. Safely perform 1500 lumber punctures and administration of Intra-thecal chemotherapy Oversee 5000 chemotherapy infusions Carry out 2 in service clinical training to nurses and Doctor to ensure high quality provision of care. Carry out 2 in service clinical training to doctors in the institute. Provision of Counseling services to patients as required. Provision of Social Support to patient as required. Provision of physiotherapy services as required. Provision of palliative care	Attended to 710 new cancer patients Continued to provide counseling services to all cancer patients at the institute Provided 503 patient days of Social Support and physiotherapy Palliative care was provided to those identified with terminal illnesses Provided three meals daily to 6345 patients The rounds were regularly conducted with both doctors and nurses Attend to 20,000 person days of inpatient person days 450 bone marrow aspirates and biopsies were performed 270 lumber punctures and intra-thecal chemotherapy were performed Oversaw administration of 8565 chemotherapy infusions Conducted 36 trainings for the clinical teams including nurses regarding Tumor boards and research in progress Attended to 3,603 outpatient visits	Patient Registration, diagnosis and treatment Patient Counseling and reviews Provision of Social Support and physiotherapy Provision of palliative care Patients fed Support drugs and oral chemotherapy dispensed to all patients

Vote: 114 Uganda Cancer Institute

Vote Summary

<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
	Provision of three basic meals to 26,000 in patient -days		
<i>Performance Indicators:</i>			
No.of out-patients	30000	3603	32000
No.of investigations undertaken	40000	21496	42000
No. of in-patients treated	33000	7140	35000
<i>Output Cost: US\$ Bn:</i>	<i>1.752</i>	<i>US\$ Bn: 0.193</i>	<i>US\$ Bn: 1.853</i>
Output:085703	Cancer Outreach Service		
<i>Description of Outputs:</i>	<p>Conduct weekly cancer awareness and screening clinics (on station at UCI) the entire year;</p> <p>Clinical outreach and Continuity clinic visit carried out in the two established clinics (Arua and Mbarara)</p> <p>1 Cancer Survivors' group supported</p> <p>-Conduct 12(Twelve) cancer awareness campaigns;</p> <p>-Conduct ten regional community cancer education and screening outreaches;</p> <p>Key messages on Cancer prevention disseminated through:</p> <p>Conduct two cancer radio talk shows;</p> <p>Conduct 2 (Two) cancer television talk shows;</p> <p>Produce Cancer related Information, Education and Communication (IEC) materials twice a year;</p> <p>Prepare and produce 4 quarterly reports and</p> <p>Conduct two community cancer research projects .</p> <p>Finalize the Construction of the 6 level Cancer ward i.e Perimeter Wall, Stone Pitching the upper side, Plumbing, Electrical installation Drainage Channels, Leveling and Paving.</p>	<p>11 static weekly-Friday cancer screening clinics were conducted at UCI</p> <p>Conducted 2 awareness campaigns in schools</p> <p>13 outreaches were conducted in which 15300 individuals were sensitized of whom 2257 were screened and 208 were trained.</p> <p>Printed and distributed 1000 brochures and 4 Banners for cancer awareness and distributed 122 magazines</p> <p>Conducted 4 in-service cancer education and screening trainings</p> <p>Held three radio talk shows and one TV show</p>	<p>Static Cancer screening clinics</p> <p>Patient follow ups</p> <p>Survivors' programs established</p> <p>Cancer awareness campaigns established</p> <p>Information Education and Communication</p> <p>Materials produced</p> <p>TV and Radio Talk shows conducted</p> <p>Community programs conducted</p> <p>Conduct Mobile cancer care and continuity clinics</p>

Vote: 114 Uganda Cancer Institute

Vote Summary

<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
	Renovation of offices and wards		
	Equip and functionalize the Mayuge Satellite center		
	Expansion of LAN and ICT Services in the UCI		
	Remodel and increase functional capacity of facilities.		
<i>Performance Indicators:</i>			
No. of outreach visits	20	13	22
<i>Output Cost: UShs Bn:</i>	<i>0.436</i>	<i>UShs Bn: 0.100</i>	<i>UShs Bn: 0.406</i>
Vote Function Cost	UShs Bn: 7.482	UShs Bn: 4.605	UShs Bn: 10.472
Cost of Vote Services:	UShs Bn: 7.382	UShs Bn: 4.605	UShs Bn: 10.472

* Excluding Taxes and Arrears

2014/15 Planned Outputs

The Institute will continue with advocacy for the streamlining of its legal status to ensure that its mandates are clear.

The Institute will endeavor to finalize the construction of the six level Cancer ward to address the patients congestion problem caused by the ever increasing numbers of patients.

The scope of services provided by the private wing of the Institute by introduction of services like private cancer screening.

The Institute will continue supporting the internet connectivity to facilitate information sharing within the Institute and other relevant stakeholders of the Institute.

We shall increase country coverage of Community Cancer Outreach services to increase awareness.

In the area of Cancer Research the Institute will facilitate development of Institutional Training agenda. We are planning to conduct a baseline surveillance survey at Mayuge Community Cancer Surveillance site.

The construction of the 3 Level USAID - Fred Hutchinson building has started and will be completed during this financial year.

Upon completion of the Strategic plan, UCI will conduct a restructuring exercise to address capacity gaps that will be identified to further improve service delivery.

Develop a Client charter to help in informing the general public on expected services provided at the Institute.

Implement the Human Resource Information system and train users in order to increase employee monitoring at the Institute.

Support further training of staff including induction and refresher training to increase knowledge and employability at the Institute.

In order to address safety needs of employees at the work place, we plan to develop and Implement an occupational Health and safety policy.

The Institute will implement the Operations Manual to help streamline the internal processes and systems of the Institute for quick and better service delivery.

Vote: 114 Uganda Cancer Institute

Vote Summary

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	Outturn by End Dec	MTEF Projections		
				2014/15	2015/16	2016/17
Vote: 114 Uganda Cancer Institute						
Vote Function:0857 Cancer Services						
No. of in-patients treated		33000	7140	35000	38000	
No. of investigations undertaken		40000	21496	42000	44000	
No. of out-patients		30000	3603	32000	34000	
No. of outreach visits		20	13	22	25	
No. of buildings constructed			0			
No. of Wards constructed			0			
Vote Function Cost (US\$ bn)	5.158	7.382	4.605	10.472	11.881	12.620
Cost of Vote Services (US\$ Bn)	5.158	7.382	4.605	10.472	11.881	12.620

Medium Term Plans

- Streamline the Institute's legal status and finalize a strategic and master plan.
- Increasing the Institute's capacity of managing the increasing numbers of Cancer cases through remodeling the existing facilities, finalization of the construction of the Cancer ward and operationalisation of Mayuge satellite center.
- Facilitate better service delivery by providing more tools and equipments.
- Broaden the range of services provided at the institute.
- Expansion of LAN, ICT and Communication Services in the UCI
- Comprehensive Cancer Outreach programs countrywide
- Cancer Research and operation of a multi-disciplinary Cancer management team.

(ii) Efficiency of Vote Budget Allocations

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

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:0857 Cancer Services					
Feeding of Patients	3	3			Average unit cost estimated at 3000 per patient day in admission
chemotherapy for patients		650			On average each patient gets six cycles each cycle is on average made up of three different drugs amounting on average 650,000UGX, we are still underfunded , as a result can not meet all chemotherapy requirements of all patients
bone marrows					

(iii) Vote Investment Plans

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)	3.3	3.4	3.7	3.7	44.5%	32.2%	31.3%	29.5%
Investment (Capital Purchases)	4.1	7.1	8.2	8.9	55.5%	67.8%	68.7%	70.5%

Vote: 114 Uganda Cancer Institute

Vote Summary

Grand Total	7.4	10.5	11.9	12.6	100.0%	100.0%	100.0%	100.0%
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Completion of 6 Level cancer ward construction and equipping it; Specialised Medical equipment; Expansion of LAN, ICT and Communication Services in the UCI; Continued remodeling office space and furnishing.

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 1120 Uganda Cancer Institute Project			
085772 Government Buildings and Administrative Infrastructure	6 Level Cancer Ward constructed.	Plumbing and electrical installation; finalization of the Lift, Installation of the Morgue, Nuclear Medicine room, radiology section, sanitary ware and Internal finishing were all completed	Construction of Radio Therapy Bunker consultancy on structural designs for facilities Monitoring, supervision and appraisal of capital works
Total	4,100,000	1,136,241	3,100,000
<i>GoU Development</i>	<i>4,100,000</i>	<i>1,136,241</i>	<i>3,100,000</i>
<i>External Financing</i>	<i>0</i>	<i>0</i>	<i>0</i>
085777 Purchase of Specialised Machinery & Equipment	Assorted Specialized medical equipment	NA	Assortment of medical equipment for the new cancer ward procured
Total	100,000	0	4,000,000
<i>GoU Development</i>	<i>100,000</i>	<i>0</i>	<i>4,000,000</i>
<i>External Financing</i>	<i>0</i>	<i>0</i>	<i>0</i>

(iv) Vote Actions to improve Priority Sector Outcomes

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

2013/14 Planned Actions:	2013/14 Actions by Sept:	2014/15 Planned Actions:	MT Strategy:
Sector Outcome 3: Health facilities receive adequate stocks of essential medicines and health supplies (EMHS)			
Vote Function: 08 57 Cancer Services			
<i>VF Performance Issue: Establishment of a multisectoral frame work for cancer control</i>			
Continue dialogue on the development of the National Cancer policy. Initiate a phased Implementation of the Strategic investment plan.	draft policy is already in place		Multisectoral dialogue, include cancer in the development agenda eg MDGs

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

This section sets out the proposed vote budget allocations for 2014/15 and the medium term, including major areas of expenditures and any notable changes in allocations.

Table V3.1: Past Outturns and Medium Term Projections by Vote Function*

	2012/13 Outturn	2013/14		MTEF Budget Projections		
		Appr. Budget	Spent by End Sept	2014/15	2015/16	2016/17
Vote: 114 Uganda Cancer Institute						
0857 Cancer Services	5.158	7.382	1.657	10.472	11.881	12.620
Total for Vote:	5.158	7.382	1.657	10.472	11.881	12.620

Vote: 114 Uganda Cancer Institute

Vote Summary

(i) The Total Budget over the Medium Term

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

Cancer care services will consume Shs 1.7bn, Outreach services will consume shs 0.435bn and shs 0.563bn for support services. Infrastructure development and assorted medical equipment will consume shs 2.8bn and 0.2bn respectively.

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

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: 0805 Cancer Services</i>			
Output: 0857 05 Internal Audit			
US\$ Bn: 0.021	US\$ Bn: 0.023	US\$ Bn: 0.023	
Output: 0857 72 Government Buildings and Administrative Infrastructure			
US\$ Bn: -1.000	US\$ Bn: 3.510	US\$ Bn: 4.800	Construction of the new cancer ward is to be completed in FY 2013/14. The funds will be reallocated to equipping the facility.
Output: 0857 77 Purchase of Specialised Machinery & Equipment			
US\$ Bn: 4.000	US\$ Bn: 0.551	US\$ Bn: 0.000	Construction of the new cancer ward is to be completed in FY 2013/14. The funds will be reallocated to equipping the facility.

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.

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: 0804 Cancer Services</i>	
Output: 0857 04 Cancer Institute Support Services	
US\$ Bn: 0.000	
Output: 0857 72 Government Buildings and Administrative Infrastructure	
US\$ Bn: 1.000	Construction of the radiotherapy equipment bunker
Construction of the radiotherapy equipment bunker	
Output: 0857 77 Purchase of Specialised Machinery & Equipment	
US\$ Bn: 20.000	Operationalisation of the newly completed cancer ward (one off)
Improved in volume and quality of cancer services	
US\$ 20bn. This is part of Governments actions to reduce the referrals abroad by creating centres of excellence in the country. Construction of the cancer ward was completed in FY 2013/14. The funds are therefore for equipping it to make it functional. This will result in the improvement of both the quality and quantity of cancer services. Another US\$ 4bn is required for construction of the cancer bunker.	

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

Vote: 114 Uganda Cancer Institute

Vote Summary

(i) Gender and Equity

Gender issues are critical in the management of cancer cases. The female gender groups play a big role in caring for the sick people at homestead level. Despite this key supportive role, little effort has been placed on building the capacity of the female gender to acquire basic palliative care skills necessary for effective management of the sick at a homestead level. As managers of a home, women need to be targeted in basic cancer care endeavors. The male gender on the other hand is preoccupied with income generating activities. This therefore calls for gender specific interventions at a local level to educate them on the basics of cancer care so that they can complement each other.

(ii) HIV/AIDS

HIV is a single major factor in recent accelerated burden of cancer in Uganda. The high morbidity and mortality due to cancer in the country is attributed to late disease presentation and yet the majority of these cases could be cured if detected early. The cost of cancer treatment is out of reach for majority of average persons calling for concerted efforts for the public to be educated on referring any strange happenings in their health to facilitate early detection. To address this, awareness campaigns are geared towards this problem.

(iii) Environment

The institute will continue working with Mulago to incinerate the expired medical products. The collection and disposal biowaste, will continue to be outsource to a specialized professional company to manage it in line with environmental guidelines. The existing and future installations will continue being subjected to tests to ensure noncontamination of the environment with chemotherapy.

(ii) Payment Arrears

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

NA

(ii) Non Tax Revenue Collections

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

Source of NTR	UShs Bn	2012/13 Actual	2013/14 Budget	2013/14 Actual by Sept	2014/15 Projected
Other Fees and Charges				0.000	0.990
	Total:			0.000	0.990