

# Vote: 170 Mbale Referral Hospital

## Vote Summary

### VI: Vote Overview

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

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

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

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

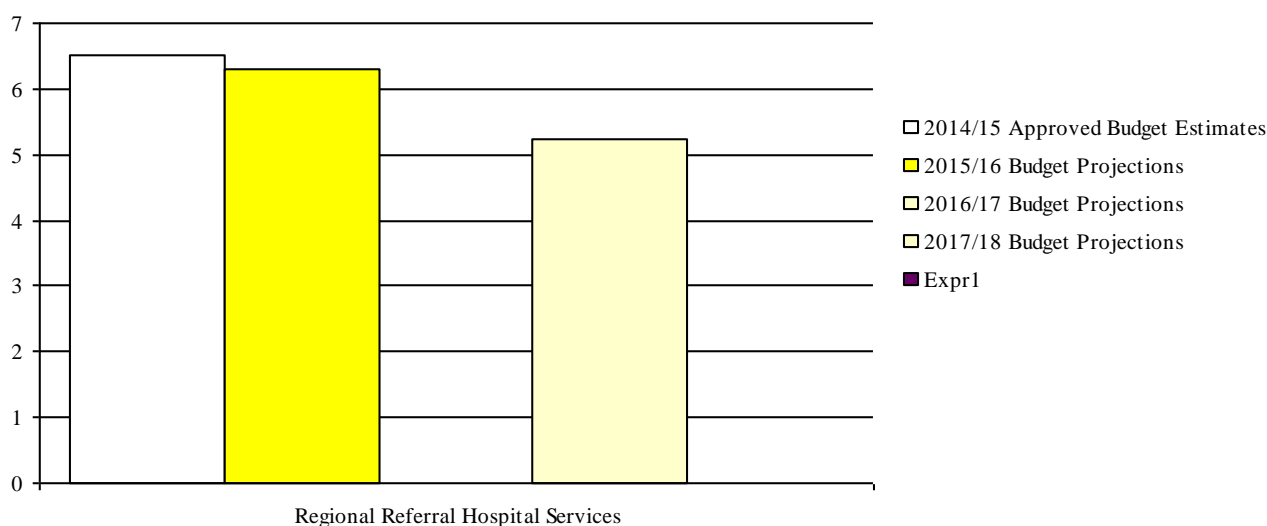
	2013/14 Outturn	2014/15		MTEF Budget Projections		
		Approved Budget	Spent by End Sept	2015/16	2016/17	2017/18
<i>(i) Excluding Arrears, Taxes</i>						
Recurrent Wage	3.655	3.826	0.836	3.826	3.826	2.673
Recurrent Non Wage	1.368	1.882	0.446	1.882	1.577	1.577
Development GoU	0.538	0.800	0.194	0.600	1.000	1.000
Development Ext.Fin	0.000	0.000	0.000	0.000	0.000	0.000
<b>GoU Total</b>	<b>5.560</b>	<b>6.507</b>	<b>1.476</b>	<b>6.308</b>	<b>6.403</b>	<b>5.250</b>
<b>Total GoU+Donor (MTEF)</b>	<b>5.560</b>	<b>6.507</b>	<b>1.476</b>	<b>6.308</b>	<b>6.403</b>	<b>5.250</b>
<i>(ii) Arrears and Taxes</i>						
Arrears	0.000	0.025	0.006	0.000	N/A	N/A
Taxes**	0.000	0.000	0.000	0.000	N/A	N/A
<b>Total Budget</b>	<b>5.560</b>	<b>6.533</b>	<b>1.482</b>	<b>6.308</b>	<b>N/A</b>	<b>N/A</b>
<i>(iii) Non Tax Revenue</i>						
	0.000	0.180	0.048	0.270	0.270	0.270
<b>Grand Total</b>	<b>5.560</b>	<b>6.713</b>	<b>1.530</b>	<b>6.578</b>	<b>N/A</b>	<b>N/A</b>
Excluding Taxes, Arrears	5.560	6.687	1.524	6.578	6.673	5.520

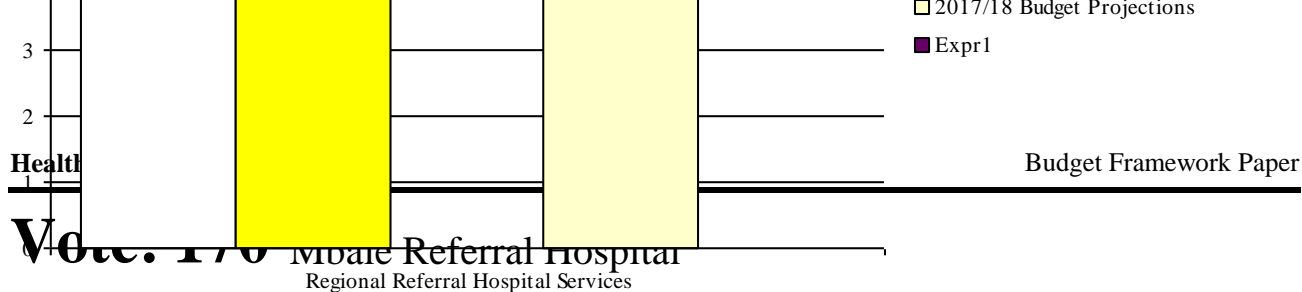
\* Donor expenditure data unavailable

\*\* 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 Summary

### (ii) Vote Mission Statement

The Vote's Mission Statement is:

*Vision:- To provide general and specialized Health services to our catchment area for improvement of quality of life, mission-To provide general,currative,preventive ,rehabilitative,promotive and specialized health services*

### (iii) Vote Outputs which Contribute to Priority Sector Outcomes

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

**Table V1.2: Sector Outcomes, Vote Functions and Key Outputs**

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

## V2: Past Vote Performance and Medium Term Plans

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

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

#### 2013/14 Performance

There was an improvement in outputs,the staff accomodation in good progress,sewerage line over haule near complete,and 2 gates construction in good progress.

#### Preliminary 2014/15 Performance

By end of May ,our actual performance would be -:Inpatients admitted 56,925, Medical clinic 3222 patients

Surgical clinic 1736 patients

Ent clinic 3564 patients

orthopaedic 3566 patients

Gynae 598 patients

Genera out patien 96129 patients seen

psychothrapy 6066 patients to be seen,Diagnostic services 106,212 ,prevention services 21,659 and our

Annual targets were 64,000pts,104,000 outpatients,72 cases,40,000 cases respectively

**Table V2.1: Past and 2015/16 Key Vote Outputs\***

Vote, Vote Function Key Output	Approved Budget and Planned outputs	2014/15 Spending and Outputs Achieved by End Sept	2015/16 Proposed Budget and Planned Outputs
<b>Vote: 170 Mbale Referral Hospital</b>			

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<i>Vote, Vote Function Key Output</i>	<b>Approved Budget and Planned outputs</b>	<b>2014/15 Spending and Outputs Achieved by End Sept</b>	<b>2015/16 Proposed Budget and Planned Outputs</b>
<b>Vote Function: 0856 Regional Referral Hospital Services</b>			
<b>Output:085601</b>	<b>inpatients services</b>		
<i>Description of Outputs:</i>	62,000 patients to be attended to. Admitted 13648 patients Average length of stay is 5 days		We forecast to admit 62500 patients in FY 2015/16
	Bed occupancy rate 85%		
<i>Performance Indicators:</i>			
No. of in patients admitted	62,000	13,648	62,500
Bed occupancy rate (inpatients)	85	78	80
Average rate of stay for inpatients (no. days)	5	2.4	4
<i>Output Cost: US\$ Bn:</i>	<i>0.741</i>	<i>US\$ Bn: 0.147</i>	<i>US\$ Bn: 0.613</i>
<b>Output:085602</b>	<b>Outpatient services</b>		
<i>Description of Outputs:</i>	104,000 out patients cases to be seen	29466 patients were seen in General out patients and 3342 seen in special clinics	We forecast to handle 106,000 patients in OPD services
<i>Performance Indicators:</i>			
No. of specialised outpatients attended to	5,800	3,342	6,000
No. of general outpatients attended to	104,000	29,466	100,000
<i>Output Cost: US\$ Bn:</i>	<i>0.417</i>	<i>US\$ Bn: 0.096</i>	<i>US\$ Bn: 0.370</i>
<b>Output:085604</b>	<b>Diagnostic services</b>		
<i>Description of Outputs:</i>	72,000 LAB TEST TO BE DONE,45,000 X-RAY TO BE DONE	37537 lab tests were done	82,000 LAB TEST TO BE DONE,45,000 X-RAY TO BE DONE
<i>Performance Indicators:</i>			
Patient xrays (imaging)	45,000	2,209	5,400
No. of labs/tests	72,000	37,537	65,000
<i>Output Cost: US\$ Bn:</i>	<i>0.110</i>	<i>US\$ Bn: 0.018</i>	<i>US\$ Bn: 0.078</i>
<b>Output:085606</b>	<b>Prevention and rehabilitation services</b>		
<i>Description of Outputs:</i>	17000 ANC cases seen,4800 cases of specialized clinics , 2500 cases of pysiotherapy cases to be seen and 9000 children to be immunized	2242 New ANC were seen, 1028 cases seen in physiotherapy and 334 children immunized with BCG plus 150 patients seen in palliative care	7000 ANC cases seen,4800 cases of specialized clinics , 5400 cases of pysiotherapy cases to be seen and 9000 children to be immunized
<i>Performance Indicators:</i>			
No. of people receiving family planning services	2,500	447	2,500
No. of people immunised	9,000	8,173	9,000
No. of antenatal cases	17,000	2,242	7,000
<i>Output Cost: US\$ Bn:</i>	<i>0.060</i>	<i>US\$ Bn: 0.013</i>	<i>US\$ Bn: 0.060</i>
<b>Output:085683</b>	<b>OPD and other ward construction and rehabilitation</b>		
<i>Description of Outputs:</i>	Construction of surgical complex	Engineering works and drawings and designs were done	Construction of surgical complex
<i>Performance Indicators:</i>			
No. of other wards rehabilitated	0	0	0
No. of other wards	1	1	1

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<i>Vote, Vote Function Key Output</i>	<b>Approved Budget and Planned outputs</b>	<b>2014/15 Spending and Outputs Achieved by End Sept</b>	<b>2015/16 Proposed Budget and Planned Outputs</b>
constructed			
No. of OPD wards rehabilitated	0	0	
No. of OPD wards constructed	0	194,000,000	1
<i>Output Cost: UShs Bn:</i>	<i>0.800</i>	<i>UShs Bn: 0.194</i>	<i>UShs Bn: 0.600</i>
<b>Vote Function Cost</b>	<b>UShs Bn:</b>	<b>6.713 UShs Bn:</b>	<b>1.476 UShs Bn: 6.578</b>
<b>Cost of Vote Services:</b>	<b>UShs Bn:</b>	<b>6.687 UShs Bn:</b>	<b>1.476 UShs Bn: 6.578</b>

\* Excluding Taxes and Arrears

### 2015/16 Planned Outputs

To admit 62,000 patients, To see 106,000 General outpatients, investigations 60,000 cases, and prevention 40,000 cases

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

<i>Vote Function Key Output Indicators and Costs:</i>	<b>2014/15</b>		<b>MTEF Projections</b>			
	<b>2013/14 Outturn</b>	<b>Approved Plan</b>	<b>Outturn by End Sept</b>	<b>2015/16</b>	<b>2016/17</b>	<b>2017/18</b>
<b>Vote: 170 Mbale Referral Hospital</b>						
<b>Vote Function: 0856 Regional Referral Hospital Services</b>						
Average rate of stay for inpatients (no. days)		5	2.4	4	4	4
Bed occupancy rate (inpatients)		85	78	80	80	80
No. of in patients admitted		62,000	13,648	62,500		
No. of general outpatients attended to		104,000	29,466	100,000	100,000	100,000
No. of specialised outpatients attended to		5,800	3,342	6,000	6,000	6,000
Value of medicines received/dispensed (Ush bn)		1.639	0.409			
No. of labs/tests		72,000	37,537	65,000		
Patient xrays (imaging)		45,000	2,209	5,400		
No. of antenatal cases		17,000	2,242	7,000		
No. of people immunised		9,000	8,173	9,000		
No. of people receiving family planning services		2,500	447	2,500		
No. of hospitals benefiting from the rennovation of existing facilities.		1	0			
No. reconstructed/rehabilitated general wards		1	0			
No. of staff houses constructed/rehabilitated		0	0			
No. of maternity wards constructed		0	0			
No. of maternity wards rehabilitated		0	0			
No. of OPD wards constructed		0	194,000,000	1	1	1
No. of OPD wards rehabilitated		0	0			
No. of other wards constructed		1	1	1		
No. of other wards rehabilitated		0	0	0		
No. of theatres constructed		0	0			
No. of theatres rehabilitated		0	0			
Value of medical equipment		0	0			

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Vote Function Key Output Indicators and Costs:	2013/14 Outturn	2014/15		MTEF Projections		
		Approved Plan	Outturn by End Sept	2015/16	2016/17	2017/18
procured (Ush Bn)						
<b>Vote Function Cost (US\$ bn)</b>	<b>5.560</b>	<b>6.687</b>	<b>1.476</b>	<b>6.578</b>		<b>5.520</b>
<b>Cost of Vote Services (US\$ Bn)</b>	<b>5.560</b>	<b>6.687</b>	<b>1.476</b>	<b>6.578</b>		<b>5.520</b>

### Medium Term Plans

We plan to continue with construction of Surgical complex

### (ii) Efficiency of Vote Budget Allocations

Reduced referrals to National Referral Hospital. We shall have more surgeries carried out because there will be more theatre and ward space.

**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			
	2014/15	2015/16	2016/17	2017/18	2014/15	2015/16	2016/17	2017/18
Key Sector	1.2	1.0	1.3	1.0	18.2%	15.9%	19.5%	17.8%
Service Delivery	2.1	1.7	2.2	1.9	31.8%	26.2%	32.7%	33.7%

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

Unit Cost Description	Actual 2013/14	Planned 2014/15	Actual by Sept	Proposed 2015/16	Costing Assumptions and Reasons for any Changes and Variations from Plan
<i>Vote Function: 0856 Regional Referral Hospital Services</i>					
Construction of surgical, Emergency and Records/Resource centre	0	0	0	0	The construction of surgical complex shall improve on surgical services in the Region

### (iii) Vote Investment Plans

We are going to improve on our response to manage accident and emergency care in the Region. We also need to provide facilities for intensive care for critical ill

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

Billion Uganda Shillings	(i) Allocation (Shs Bn)				(ii) % Vote Budget			
	2014/15	2015/16	2016/17	2017/18	2014/15	2015/16	2016/17	2017/18
Consumption Expenditure (Outputs Provided)	5.9	6.0	5.9	4.7	88.0%	90.9%	88.0%	85.5%
Investment (Capital Purchases)	0.8	0.6	0.8	0.8	12.0%	9.1%	12.0%	14.5%
<b>Grand Total</b>	<b>6.7</b>	<b>6.6</b>	<b>6.7</b>	<b>5.5</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

We plan to start construction of Surgical complex of 13 billion over a period 3 to 4 years.

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

Project, Programme	2014/15		2015/16	
	Approved Budget, Planned Outputs (Quantity and Location)	Actual Expenditure and Outputs by September (Quantity and Location)	Proposed Budget, Planned Outputs (Quantity and Location)	
<b>Project 1004 Mbale Rehabilitation Referral Hospital</b>				
<b>085683 OPD and other ward construction and rehabilitation</b>	Construction of Surgical/casualty complex- Phase 1 completed	Long term consultancy on Drawings & Disigns of surgical/casualty complex were done to 75%	Construction of Surgical/casualty complex- Phase 1 completed	
<b>Total</b>	<b>799,880</b>		<b>194,000</b>	<b>600,000</b>
<i>GoU Development</i>	<i>799,880</i>		<i>194,000</i>	<i>600,000</i>
<i>External Financing</i>	<i>0</i>		<i>0</i>	<i>0</i>

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

We intend to declare and fill up all the vacant positions within the available resources to improve on efficiency. 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)

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.

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

2014/15 Planned Actions:	2014/15 Actions by Sept:	2015/16 Planned Actions:	MT Strategy:
<b>Sector Outcome 1: Increased deliveries in health facilities</b>			
Vote Function: 08 56 Regional Referral Hospital Services			
VF Performance Issue: Under staffing and poor cadre mix			
Inventory updated regularly	Submitted vacant posts to public service and MOH	To submit vacant posts to HSC and public services	To ensure that all vacant posts are filled

## V3 Proposed Budget Allocations for 2015/16 and the Medium Term

This section sets out the proposed vote budget allocations for 2015/16 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\***

	2013/14 Outturn	2014/15		MTEF Budget Projections		
		Appr. Budget	Spent by End Sept	2015/16	2016/17	2017/18
<b>Vote: 170 Mbale Referral Hospital</b>						
0856 Regional Referral Hospital Services	5.560	6.687	1.476	6.578	6.673	5.520
<b>Total for Vote:</b>	<b>5.560</b>	<b>6.687</b>	<b>1.476</b>	<b>6.578</b>	<b>6.673</b>	<b>5.520</b>

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

### (ii) The major expenditure allocations in the Vote for 2015/16

The major bulk of our budget allocation is towards inpatient and outpatient service delivery

### (iii) The major planned changes in resource allocations within the Vote for 2015/16

The allocation of GOU development fund is to construct surgical complex

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

Changes in Budget Allocations and Outputs from 2014/15 Planned Levels:			Justification for proposed Changes in Expenditure and Outputs
2015/16	2016/17	2017/18	
Vote Function: 0801 Regional Referral Hospital Services			
<b>Output: 0856 01 inpatients services</b>			
US\$ Bn: -0.128	US\$ Bn: -0.128	US\$ Bn: -0.128	The construction of surgical complex shall reduce on the number of referrals from 14 districts of Mt Elgon Region to National Hospital. This shall attract surgeons to the region.
Some fund have been allocated to preventive and immunization services	Some fund have been allocated to preventive and immunization services	Some fund have been allocated to preventive and immunization services	
<b>Output: 0856 02 Outpatient services</b>			

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Changes in Budget Allocations and Outputs from 2014/15 Planned Levels:			Justification for proposed Expenditure and Outputs	Changes in
2015/16	2016/17	2017/18		
<i>UShs Bn:</i> -0.048	<i>UShs Bn:</i> -0.047	<i>UShs Bn:</i> -0.047	Some fund have been allocated to preventive and immunization services	
Some fund have been allocated to preventive and immunization services	Some fund have been allocated to preventive and immunization services	Some fund have been allocated to preventive and immunization services		
<b>Output: 0856 04 Diagnostic services</b>				
<i>UShs Bn:</i> -0.032	<i>UShs Bn:</i> -0.032	<i>UShs Bn:</i> -0.032	Some fund have been allocated to preventive and immunization services	
Some fund have been allocated to preventive and immunization services	Some fund have been allocated to preventive and immunization services	Some fund have been allocated to preventive and immunization services		
<b>Output: 0856 83 OPD and other ward construction and rehabilitation</b>				
<i>UShs Bn:</i> -0.200	<i>UShs Bn:</i> 0.000	<i>UShs Bn:</i> 0.000		

## V4: Vote Challenges for 2015/16 and the Medium Term

This section sets out the major challenges the vote faces in 2015/16 and the medium term which the vote has been unable to address in its spending plans.

Equipping Surgical complex and paediatric ward

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

Additional Requirements for Funding and Outputs in 2015/16:	Justification of Requirement for Additional Outputs and Funding
<i>Vote Function: 08 Regional Referral Hospital Services</i>	
<b>Output: 0856</b>	
<i>UShs Bn:</i> 4.000 To Allocation funds towards the construction of Surgical complex, Medical records centre for research purposes	This shall help to improve on surgical and casualty services in the 14 Districts of Mt Elgon region and teaching skills of medical students
<b>Output: 0856 05 Hospital Management and support services</b>	
<i>UShs Bn:</i> By construction of surgical complex we would increase on surgical operations	if these structures had been constructed we would see more patients in the surgical disciplines
<b>Output: 0856 80 Hospital Construction/rehabilitation</b>	
<i>UShs Bn:</i> CONSTRUCTION OF ACCIDENT AND EMERGENCY UNIT	This is a critical facility and a priority in as far as improving quality of care and adequate emergency response
<b>Output: 0856 81 Staff houses construction and rehabilitation</b>	
<i>UShs Bn:</i> 0.183	Currently, only 20% of the staff are accommodated and affects their effectiveness and quality of service delivery. This will improve on staff motivation and reduce on absences
<b>Output: 0856 83 OPD and other ward construction and rehabilitation</b>	
<i>UShs Bn:</i>	The current structure for the department of surgery is no longer in use since it was condemned by the engineers, there is no ENT ward and orthopedic ward.

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

<b>Objective:</b> Male involvement in ANC services
<b>Issue of Concern :</b>

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*Proposed Interventions*

*Budget Allocations UGX billion*

*Performance Indicators*

#### (ii) HIV/AIDS

**Objective:** To encourage testing to all clients who come to the Hospital at all points of contact

*Issue of Concern :*

*Proposed Interventions*

*Budget Allocations UGX billion*

*Performance Indicators*

#### (iii) Environment

**Objective:** Waste management and disposal

*Issue of Concern :*

*Proposed Interventions*

*Budget Allocations UGX billion*

*Performance Indicators*

#### (ii) Payment Arrears

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

Payee	Payment Due Date	Amount (US\$ Bn)
UMEME	01/07/2015	0.04
<b>Total:</b>		<b>0.040</b>

#####

#### (ii) Non Tax Revenue Collections

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

Source of NTR	US\$ Bn	2013/15 Actual	2014/15 Budget	2014/15 Actual by Sept	2015/16 Projected
Other Fees and Charges		0.000	0.180		0.270
<b>Total:</b>		<b>0.000</b>	<b>0.180</b>		<b>0.270</b>

Money generated from NTR is to cater for medicines in private wing(MASABA WING) and allowances to staff