

Vote: 173 Mbarara 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)

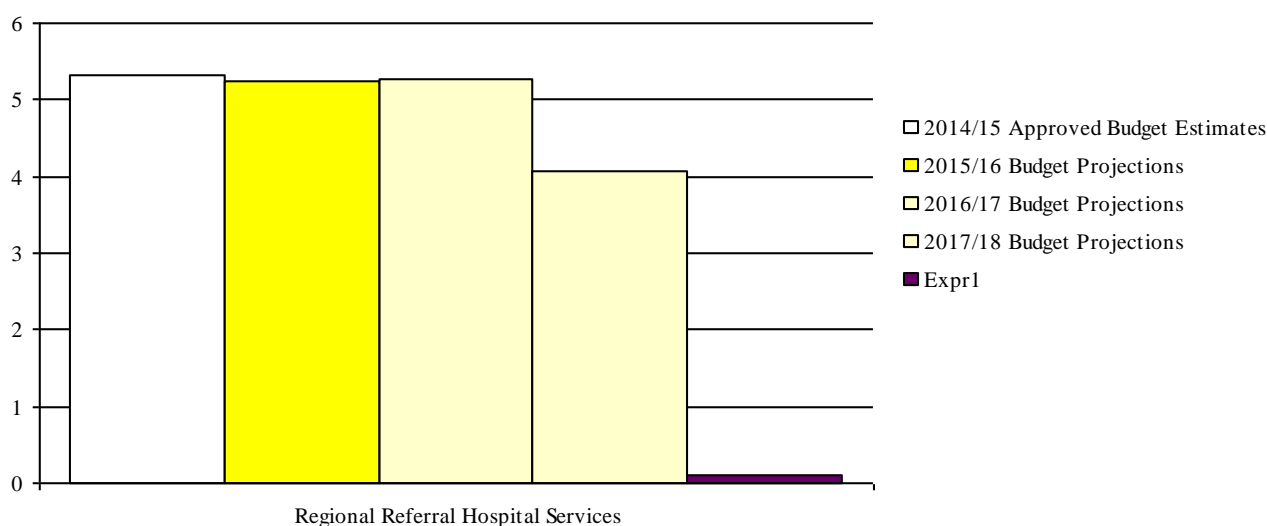
	2013/14 Outturn	2014/15		MTEF Budget Projections		
		Approved Budget	Spent by End Sept	2015/16	2016/17	2017/18
<i>(i) Excluding Arrears, Taxes</i>						
Recurrent Wage	2.949	3.279	0.706	3.279	3.279	2.089
Recurrent Non Wage	1.078	1.147	0.284	1.147	0.981	0.981
Development GoU	0.750	1.000	0.097	0.810	1.000	1.000
Development Ext.Fin	0.000	0.000	0.000	0.000	0.000	0.000
GoU Total	4.777	5.426	1.087	5.236	5.260	4.070
Total GoU+Donor (MTEF)	4.777	5.426	1.087	5.236	5.260	4.070
<i>(ii) Arrears and Taxes</i>						
Arrears	0.000	0.138	0.028	0.000	N/A	N/A
Taxes**	0.000	0.100	0.000	0.000	N/A	N/A
Total Budget	4.777	5.664	1.116	5.236	N/A	N/A
<i>(iii) Non Tax Revenue</i>						
	0.000	0.560	0.315	0.725	0.650	0.000
Grand Total	4.777	6.224	1.430	5.961	N/A	N/A
Excluding Taxes, Arrears	4.777	5.986	1.402	5.961	5.910	4.070

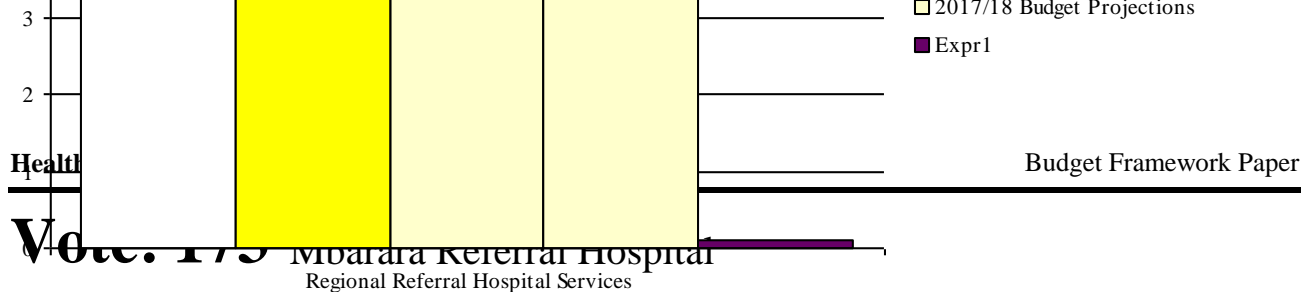
* Donor expenditure data unavailable

** 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:

To provide comprehensive, super specialised health services, conduct tertiary health training, research and contributing to the health policy.

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

The new block constructed with support of ADB was put under utilization amidst challenges of resources and an assortment of medical equipment purchased, information, communication equipment and soft wares were also purchased and a walk way linking the old hospital o the new block constructed.

Preliminary 2014/15 Performance

6,478 admissions

77 % Occupancy rate

4 days average length of stay

27,440 special clinics outpatients

801 Ultra sound examinations

23,240 lab examinations

115 ECGs'

10 ECHOs,

3,159 antenatal attendances handled

426 family planning contacts made

3,428 PMTCT & VCT Contacts

Construction of the 16 units staff quarters and refurbishment and remodelling of a basement into an office block for administration has commenced with completion of the procurement process and handover of sites doen already

10,069 general out patients

767 X-ray examinations

71 CT Scans

7,350 immunizations done

Vote: 173 Mbarara Referral Hospital

Vote Summary

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

<i>Vote, Vote Function Key Output</i>	Approved Budget and Planned outputs	2014/15 Spending and Outputs Achieved by End Sept	2015/16 Proposed Budget and Planned Outputs
Vote: 173 Mbarara Referral Hospital			
Vote Function: 0856 Regional Referral Hospital Services			
Output: 085601	Inpatient services		
<i>Description of Outputs:</i>	30,000 admissions, 70 % bed occupancy, 5 days average length of stay	6,478 admissions, 77 % Occupancy Rate, 4 Days Average Length of Stay. This includes: 1,535 normal deliveries, 858 Caesareans, 1,352 Major Operations, 1,768 Minor Operations, 26 Sessions of Renal Dialysis	30,000 admissions, 75 % Occupancy rate, 5 Days average length of stay
<i>Performance Indicators:</i>			
No. of in patients admitted	30,000	6,478	30,000
Bed occupancy rate (inpatients)	70	77	75
Average rate of stay for inpatients (no. days)	5	4	5
<i>Output Cost: US\$ Bn:</i>	<i>1.042</i>	<i>US\$ Bn: 0.118</i>	<i>US\$ Bn: 1.206</i>
Output: 085602	Outpatient services		
<i>Description of Outputs:</i>	40000 general outpatients, 120000 special clinics attendance	10,069 General outpatients, 27,440 Special Clinics' attendances	40,000 Outpatients, 133,000 special clinics attendance
<i>Performance Indicators:</i>			
No. of specialised outpatients attended to	120,000	27,440	133,000
No. of general outpatients attended to	40,000	10,069	40,000
<i>Output Cost: US\$ Bn:</i>	<i>0.181</i>	<i>US\$ Bn: 0.044</i>	<i>US\$ Bn: 0.181</i>
Output: 085604	Diagnostic services		
<i>Description of Outputs:</i>	6000 x-ray examinations, 6000 ultra sound scans, 1100 Scans, 67000 lab examinations, 7,000 blood transfusions, 1000 ECGs', 800 ECHOs,.	767 X-ray examinations, 801 Ultra Sound Scan examinations, 71 CT Scan Examinations, 23,240 laboratory examinations Also handled; 115 ECG Examinations 10 ECHO Examinations	6,000 X-rays examinations, 6,000 Ultra sound examinations, 600 CT Scans, 130,000 lab examinations, 1,000 ECGs', 800 ECHOs'
<i>Performance Indicators:</i>			
Patient xrays (imaging)	14,900	1,693	14,400
No. of labs/tests	67,000	23,240	130,000
<i>Output Cost: US\$ Bn:</i>	<i>0.102</i>	<i>US\$ Bn: 0.023</i>	<i>US\$ Bn: 0.102</i>
Output: 085606	Prevention and rehabilitation services		
<i>Description of Outputs:</i>	3000 Family Planning Contacts, 11000 antenatal cases, 22000 PMTCT/VCT Contacts, 30000 immunizations	426 Family Planning Contacts, 3,159 Antenatal Attendances, 3,248 PMTCT/VCT Contacts	
<i>Performance Indicators:</i>			
No. of people receiving family planning services	3,000	426	
No. of people immunised	30,000	7,350	

Vote: 173 Mbarara Referral Hospital

Vote Summary

<i>Vote, Vote Function Key Output</i>	Approved Budget and Planned outputs	2014/15 Spending and Outputs Achieved by End Sept	2015/16 Proposed Budget and Planned Outputs
No. of antenatal cases	33,000	6,407	
<i>Output Cost: US\$ Bn:</i>	<i>0.061</i>	<i>US\$ Bn: 0.015</i>	<i>US\$ Bn: 0.061</i>
Output: 085680	Hospital Construction/rehabilitation		
<i>Description of Outputs:</i>	Hospital administration block refurbished	Design of the layout completed, Procurement process at award of contract level	
<i>Performance Indicators:</i>			
No. reconstructed/rehabilitated general wards	0	0	
No. of hospitals benefiting from the renovation of existing facilities.	1	1	
<i>Output Cost: US\$ Bn:</i>	<i>0.130</i>	<i>US\$ Bn: 0.000</i>	<i>US\$ Bn: 0.000</i>
Output: 085681	Staff houses construction and rehabilitation		
<i>Description of Outputs:</i>	Construction of an 8 unit and 16 unit staff quarters	Drawing/designs & BOQs completed, Procurement process completed	Continue construction of the 16 units staff quarters
<i>Performance Indicators:</i>			
No. of staff houses constructed/rehabilitated	24	0	16
<i>Output Cost: US\$ Bn:</i>	<i>0.840</i>	<i>US\$ Bn: 0.097</i>	<i>US\$ Bn: 0.810</i>
Vote Function Cost	US\$ Bn: 6.224	US\$ Bn: 1.087	US\$ Bn: 5.961
Cost of Vote Services:	US\$ Bn: 5.986	US\$ Bn: 1.087	US\$ Bn: 5.961

* Excluding Taxes and Arrears

2015/16 Planned Outputs

The Hospital will continue to put up new structures to improve working conditions for health workers and create a conducive environment for clients. This will improve the staff morale and improve on their performance. Particularly we are to embark on construction of a flat of sixteen units for staff quarters and refurbish existing structure to accommodate offices.

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

<i>Vote Function Key Output Indicators and Costs:</i>	2014/15		MTEF Projections			
	2013/14 Outturn	Approved Plan Outturn by End Sept	2015/16	2016/17	2017/18	
Vote: 173 Mbarara Referral Hospital						
Vote Function: 0856 Regional Referral Hospital Services						
Average rate of stay for inpatients (no. days)		5	4	5	5	5
Bed occupancy rate (inpatients)		70	77	75	70	70
No. of in patients admitted		30,000	6,478	30,000	30,000	30,000
No. of general outpatients attended to		40,000	10,069	40,000	40,000	40,000
No. of specialised outpatients attended to		120,000	27,440	133,000	133,000	133,000
Value of medicines received/dispensed (Ush bn)		1.420	282307576			
No. of labs/tests		67,000	23,240	130,000	130,000	130,000
Patient xrays (imaging)		14,900	1,693	14,400	14,400	14,400
No. of antenatal cases		33,000	6,407		34689	34689

Vote: 173 Mbarara Referral Hospital

Vote Summary

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
No. of people immunised		30,000	7,350		30000	30000
No. of people receiving family planning services		3,000	426		3000	3000
No. of hospitals benefiting from the renovation of existing facilities.		1	1			
No. reconstructed/rehabilitated general wards		0	0			
No. of staff houses constructed/rehabilitated		24	0	16	16	
No. of maternity wards constructed		0	0			
No. of maternity wards rehabilitated		0	0			
No. of OPD wards constructed		0	0			
No. of OPD wards rehabilitated		0	0			
No. of other wards constructed		0	0			
No. of other wards rehabilitated		0	0			
No. of theatres constructed		0	0			
No. of theatres rehabilitated		0	0			
Value of medical equipment procured (Ush Bn)		0	0			
Vote Function Cost (UShs bn)	4.777	5.986	1.087	5.961	5.910	4.070
Cost of Vote Services (UShs Bn)	4.777	5.986	1.087	5.961	5.910	4.070

Medium Term Plans

- Construct two blocks of flats comprising 16 units of staff houses
- Fencing the hospital
- Acquisition of more land for the hospital development and expansion
- Orthopedic workshop, Oxygen plant and maintenance workshop
- Alternative sources power supply
- Specialist outreach services
- Conducting and Strengthening research
- Overhaul of water, sewerage and electric system to improve efficiency
- Water harvesting project
- Attract, retain, motivate critical Staff
- Management of health and general information System
- Training Staff in Customer care
- Isolation unit/disaster preparedness and T.B unit

(ii) Efficiency of Vote Budget Allocations

Putting the entity on IFMS will improve efficiency and help in execution of the budget as per the work plans. Most of the resources are allocated to care of the inpatients, out patients and human resource function which are critical for service delivery. The entity plans to fill the human resource gaps within the available resources by declaring the vacant posts for filling.

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	2.3	2.3	2.0	1.3	37.6%	37.9%	42.5%	31.7%
Service Delivery	2.4	2.4	2.1	1.4	39.3%	39.6%	44.7%	34.3%

The entity being a teaching regional referral hospital puts the bulk of its money in management of

Vote: 173 Mbarara Referral Hospital

Vote Summary

patients which includes investigations, operations and treatment. The bulk of of the entity's budget exceeding 50% goes on payment of utilities i.e water and electricity that are paid going by the existing rates and metre readings by the service providers while the rest of the costing is guided by the market trends.

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>					
Water - bills per month	7	7		7	Water consumption from NWSC will continue to decline as we utilise the water harvest
Travel Inland	120	120		120	On average pay 525 nights allowances.
Maintenance Machinery, Equipment & Furniture per month	1,322	981		981	On average service and repair 80 big equipments during the year as period of warranty runs out and equipment become older
Maintenance – Vehicles: maintenance of one vehicle per month	3,214	4,714		4,714	The seven vehicles take an average of 2,500,000 shs. every month on servicing & repairs
Fuel, Lubricants and Oils - purchased per month	3	0		0	Inflation led pricing and power blackouts that will lead to higher consumption of fuel
Electricity bills per month	1	1		1	Consumption expected to rise and reach 280,000 units of power per month

(iii) Vote Investment Plans

Funding requirements for capital development are too big compared to the current level of investment requirements due to dilapidated infrastructure, lack of staff accommodation, increased hospital services resulting in congestion. The stagnant low level of funding too far below the requirements will take ages to make any meaningful impact. Funding is directed mainly towards requirements that improve patient care and staff welfare like staff houses. The entity needs to invest in maintenance of the gains made by putting up a maintenance workshop and construct an oxygen plant for management of critically ill patients

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)	5.0	5.2	4.0	4.0	83.3%	86.4%	84.1%	100.0%
Investment (Capital Purchases)	1.0	0.8	0.8		16.7%	13.6%	15.9%	
Grand Total	6.0	6.0	4.7	4.0	100.0%	100.0%	100.0%	100.0%

The entity will continue the construction of a 16 units flat for staff quarters, construction of an oxygen plant and a maintenance workshop.

Table V2.6: Major Capital Investments

Project, Programme Vote Function Output <i>UShs Thousand</i>	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)
Project 1004 Mbarara Rehabilitation Referral Hospital			
085681 Staff houses construction and rehabilitation	8 units flat for staff quarters Start construction of a 16 units	Drawing of designs & BOQs completed	Construction of sixteen units staff quarters

Vote: 173 Mbarara Referral Hospital

Vote Summary

Project, Programme	2014/15		2015/16
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)
	flat for staff quarters	Procurement process completed	
Total	840,000	97,371	810,000
<i>GoU Development</i>	<i>840,000</i>	<i>97,371</i>	<i>810,000</i>
<i>External Financing</i>	<i>0</i>	<i>0</i>	<i>0</i>

(iv) Vote Actions to improve Priority Sector Outcomes

The required and key policy action required is the filling of the existing human resource gaps within the establishment. The entity will continuously declare posts for filling within the available wage bill resources. Availability of medicines and sundries is critical to service delivery and the entity will continue to engage NMS to deliver as per the orders and timely.

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:
Sector Outcome 0:			
Vote Function: 08 56 Regional Referral Hospital Services			
<i>VF Performance Issue: Improvement of maternal child health care</i>			
		Fill all the existing human resource gaps in delivery of maternal child health care services. Improve supply of medicines and consumables for service delivery	Submit all the human resource gaps for midwives for filling and engage NMS to have improved supply of medicines and consumables
Sector Outcome 1: Increased deliveries in health facilities			
Vote Function: 08 56 Regional Referral Hospital Services			
<i>VF Performance Issue: Under staffed structures</i>			
Recruitment Plans submitted to MOH	As a result of the recruitment plans submitted some few critical cadres have been recruited and posted. Clearance has been sought to replace attrition cases	Recruitment of critical cadres and replacement of attrition cases	Submit staff gaps to MOH and MOPS
Sector Outcome 3: Health facilities receive adequate stocks of essential medicines and health supplies (EMHS)			
Vote Function: 08 56 Regional Referral Hospital Services			
<i>VF Performance Issue: General and patient information not well managed</i>			
Training of all staff at data generation points in HMIS	Continuous training and including data capture in performance plans for individuals performing the task	Extend supervisory role and support by the medical records office to units generating data	Centralise information database, train and monitor information management officers. Solicit for more funding

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

Vote: 173 Mbarara Referral Hospital

Vote Summary

	2013/14 Outturn	2014/15		MTEF Budget Projections		
		Appr. Budget	Spent by End Sept	2015/16	2016/17	2017/18
Vote: 173 Mbarara Referral Hospital						
0856 Regional Referral Hospital Services	4.777	5.986	1.087	5.961	5.910	4.070
Total for Vote:	4.777	5.986	1.087	5.961	5.910	4.070

(i) The Total Budget over the Medium Term

Resource allocation over the medium term has not changed due to capped ceilings for the period. Instead we are experiencing budget cuts for capital development which affects the pace of completion of projects being implemented.

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

The major expenditure allocation is on utilities due to increased patient number and machinery that are crucial for service delivery and putting an end to accumulation of domestic arrears, catering for feeding costs of interns who handle the bulk of work, cleaning services and infection control to create a safe working environment for both health workers and clients. To improve welfare and motivation of staff construction of staff accommodation is undergoing.

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

Our priorities have remained the same in the medium term thus no major changes in resource allocation. However the budget reduction for capital development greatly affects resource allocation.

Table V3.2: Key Changes in Vote Resource Allocation

Changes in Budget Allocations and Outputs from 2014/15 Planned Levels:			Justification for proposed Expenditure and Outputs	Changes in Expenditure and Outputs
2015/16	2016/17	2017/18		
<i>Vote Function: 0801 Regional Referral Hospital Services</i>				
Output: 0856 01 Inpatient services				
US\$ Bn: -0.317	US\$ Bn: -0.053	US\$ Bn: -0.053	No changes in allocations has been made	
There had been an under estimation of inputs like stationery & fuel for inpatients	There had been an under estimation of inputs like stationery & fuel for inpatients			
Output: 0856 02 Outpatient services				
US\$ Bn: -0.181	US\$ Bn: 0.012	US\$ Bn: 0.012		
Output: 0856 04 Diagnostic services				
US\$ Bn: -0.102	US\$ Bn: 0.001	US\$ Bn: 0.001		
Output: 0856 05 Hospital Management and support services				
US\$ Bn: -0.290	US\$ Bn: -0.960	US\$ Bn: -0.960		
Output: 0856 80 Hospital Construction/rehabilitation				
US\$ Bn: -0.130	US\$ Bn: -0.130	US\$ Bn: -0.130		
The office accommodation is planned to be completed in one FY	The office accommodation is planned to be completed in one FY			
Output: 0856 99 Arrears				
US\$ Bn: -0.138	US\$ Bn: -0.138	US\$ Bn: -0.138		

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.

Vote: 173 Mbarara Referral Hospital

Vote Summary

Major challenges faced by the entity include insufficient supply of oxygen and total stock outs of it often leading to loss of lives by those who need it. A lot of resources have been injected in procurement of equipment but the entity lacks a maintenance workshop resulting into preventable malfunction of equipment due to inadequate servicing and maintenance. Power cuts are often experienced with the hospital on average being with no power for half of the week through the month and the year making our operations very difficult and expensive to sustain. The entity also experiences a big challenge of regulating visitors and attendants due to the porous nature of its boundary with the University. It is therefore imperative that resources be allocated to construct an oxygen plant, a maintenance workshop and fence off the hospital. A dedicated uninterrupted line should also be connected to the hospital.

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: 0801 Regional Referral Hospital Services</i>	
Output: 0856 01 Inpatient services	
<p><i>US\$ Bn:</i> Improved service delivery to the increased numbers of clients and specialized services</p>	<p><i>The inpatients increase due to introduction of more new services and increase in number of specialist doctors will require more funding and therefore contribute to the reduction of mortality rates and have a healthier population.</i></p> <p><i>New services such as Urology, Neurology and neurosurgery, Cardiology, Neonatology, Nephrology, Plastic & constructive Surgery, Oncology, Renal Medicine, operational CT Scan, Intensive Care etc</i></p>
Output: 0856 06 Prevention and rehabilitation services	
<p><i>US\$ Bn:</i> To improve on the community health services and reduce disease burden through prevention</p>	<p><i>increase in number of preventive and rehabilitative services offered will contribute to reducing disease prevalence and mortality. There is need for more funding of the activities. Prevention activities such as outreaches and counselling are expected to increase because some of the services are not offered in the region such as Physiotherapy activities.</i></p>
Output: 0856 71 Acquisition of Land by Government	
<p><i>US\$ Bn:</i> The hospital expansion has no more space to cater for the increasing number of patients</p>	<p><i>The hospital is growing and the services are increasing. The need for more land will enable expansion for construction of more structures for the services e.g oncology, neurology, biomedical workshop, isolation unit and incinerator among others. Acquiring land will enable hospital expansion to accommodate increasing services for a healthier population.</i></p>
Output: 0856 72 Government Buildings and Administrative Infrastructure	
<p><i>US\$ Bn:</i> 4.000 Expansion of the entity to cater for the increasing services and replace the dilapidated infrastructure. Need for fencing the hospital to manage the crowds, regulate visiting hours and improve on security.</p>	<p><i>The patients seen are increasing because of introduction of more new services and increase in number of specialist supervisors being a teaching hospital. Interns hostel will be able to accommodate the increase in number of interns. Interns need to be at the hospital setting in order to offer 24hr service to patients.</i></p>
Output: 0856 77 Purchase of Specialised Machinery & Equipment	
<p><i>US\$ Bn:</i> To meet the new technological advancements and improve investigations and service delivery</p>	<p><i>the hospital acquiring more specialised equipment will enable effective delivery of the increasing specialised services</i></p>
Output: 0856 85 Purchase of Medical Equipment	
<p><i>US\$ Bn:</i> To meet the new technological advancements and improve investigations and service delivery</p>	<p><i>The patients seen are increasing because of introduction of more new services and increase in number of specialists this means that the hospital will correspondingly require more space for wards and OPD. Acquiring more ward space will enable effective delivery of specialised services</i></p>

Vote: 173 Mbarara Referral Hospital

Vote Summary

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

Objective: To educate the community about the dangers of late service seeking behavior

Issue of Concern : Delayed health seeking behavior that results into complications

Proposed Interventions

Health education at hospital, outreach services to the catchment area

Budget Allocations UGX billion 0.09

Performance Indicators Reduced numbers of mothers in obstructed labor as a result of delaying, fewer mothers going to traditional birth attendants, a link between the hospital and the village health team members

Objective: To offer ambulatory services to all critically ill patients referred out of the facility

Issue of Concern : Inappropriate ambulatory services for critically ill patients

Proposed Interventions

Provision of free ambulatory services for critically ill poor patients and on cost sharing basis for those who can afford

Budget Allocations UGX billion 0.01

Performance Indicators Number of patients offered ambulatory services on referral out of the facility

Objective: To have equal access to health services despite gender, age and social economic status

Issue of Concern : Access to maternal child health services

Proposed Interventions

Provision of free maternal child health services, automatic waiver for services under the paying wing for all mothers and children who can't afford paying.

Budget Allocations UGX billion 0.06

Performance Indicators Number of mothers attending antenatal care, Number of mothers vaccinated for TT, Number of deliveries in the health facility

(ii) HIV/AIDS

Objective: To give HAART TO all that are eligible

Issue of Concern : Positive healthy living clients

Proposed Interventions

Putting all positive mothers on full HAART, all other clients whose CD4 count requires initiation of HAART, counselling of positive clients to adhere and live positively

Budget Allocations UGX billion 0.1

Performance Indicators Number of clients on full HAART, number of clients counselled, compliance levels of those clients on treatment

Vote: 173 Mbarara Referral Hospital

Vote Summary

Objective: Reduce incidence of HIV infections

Issue of Concern : Increased incidence of HIV in the community

Proposed Interventions

Safe male circumcision, provision of prophylaxis to all infected persons, provision of post exposure prophylaxis to the exposed, health education towards responsible behavior and personal protection, couple counselling and testing

Budget Allocations UGX billion 0.1

Performance Indicators Number of incidences, number of male circumcissions, number of condoms issued, number of vulnerable people issued post exposure prophylaxis and number of infected people on prophylaxis, number of dicondant couples

Objective: To eliminate mother to child transmission of HIV

Issue of Concern : Babies born with HIV when mothers are not diagnosed during antenantals

Proposed Interventions

Test every mother during antenantal, those who are found positive are put on treatment and followed up until delivery

Budget Allocations UGX billion 0.3

Performance Indicators Number of mothers tested, number of mothers on treatment of full HAART number of children tested negative born of positive mothers

(iii) *Environment*

Objective: Proper waste disposal and management

Issue of Concern : Environmental polution, public safety

Proposed Interventions

Slushing of compound, disposal of expired drugs, inceneration of dangerous wastes, disposal of waste water into National Water and Sewarage Corporation waste line, paving of walk ways

Budget Allocations UGX billion 0.3

Performance Indicators Clean compound, expired drugs disposed, dangerous wastes being disposed, bills for waste water disposal, paved walk ways

Objective: To have a clean and safe working environment

Issue of Concern : Contamination resulting into cross infection

Proposed Interventions

Proper cleaning and decontamination, segregation of wastes and proper disposal, availabilty of running water, functional toilet facilities, full uniform for staff and linen for theatre

Budget Allocations UGX billion 0.05

Performance Indicators Level of cleanliness, availability of running water, level of segregation of wastes, availability of color coded bins, staff in full

Vote: 173 Mbarara Referral Hospital

Vote Summary

uniform
Objective: To eliminate facility based infections
<i>Issue of Concern :</i> Facility based infections that result into sepsis
<i>Proposed Interventions</i>
Infection control and elimination of sepsis through provision of infection control materials, segregation of wastes and incineration and isolation of septic cases, autoclaving, protective gear
<i>Budget Allocations</i> UGX billion 0.05
<i>Performance Indicators</i> Number of septic cases registered, level of infections on wards, quantity of infection control materials procured

(ii) Payment Arrears

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

Payee	Payment Due Date	Amount (UShs Bn)
Umeme Uganda Ltd	30/06/2014	0.25
Medicine & healthsupplies (prequalifiedpharmacies,JMS)	30/06/2010	0.41
	Total:	0.661

The over commitment in 2007/2008 was caused by failure of Ministry of Finance to release funds as per the approved budget.

There was also change in policy in 2009/2010 where all funds meant for drugs and sundries was transferred to NMS without proper communications to the concerned votes. Those two scenarios led to domestic arrears.

Efforts were made to the Accountant General to have the arrears paid. However the deputy secretary to Treasury referred us to our mother ministry.

(ii) Non Tax Revenue Collections

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

Source of NTR	UShs Bn	2013/15 Actual	2014/15 Budget	2014/15 Actual by Sept	2015/16 Projected
Other Fees and Charges		0.000	0.560		0.725
	Total:	0.000	0.560		0.725

The entity started a private patients scheme that will be making one year in March 2014. It has a private wing for admission of inpatients and all the services that go with, a private patients general OPD and special clinics. This has seen a tremendous increase in the NTR collections and is projected to continue growing. The proceeds are used to motivate health workers who deliver the service through payment of allowances amounting to over 60% while the balance is spent on supplies, maintenance civil and machinery.