

Vote: 176 Naguru 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)

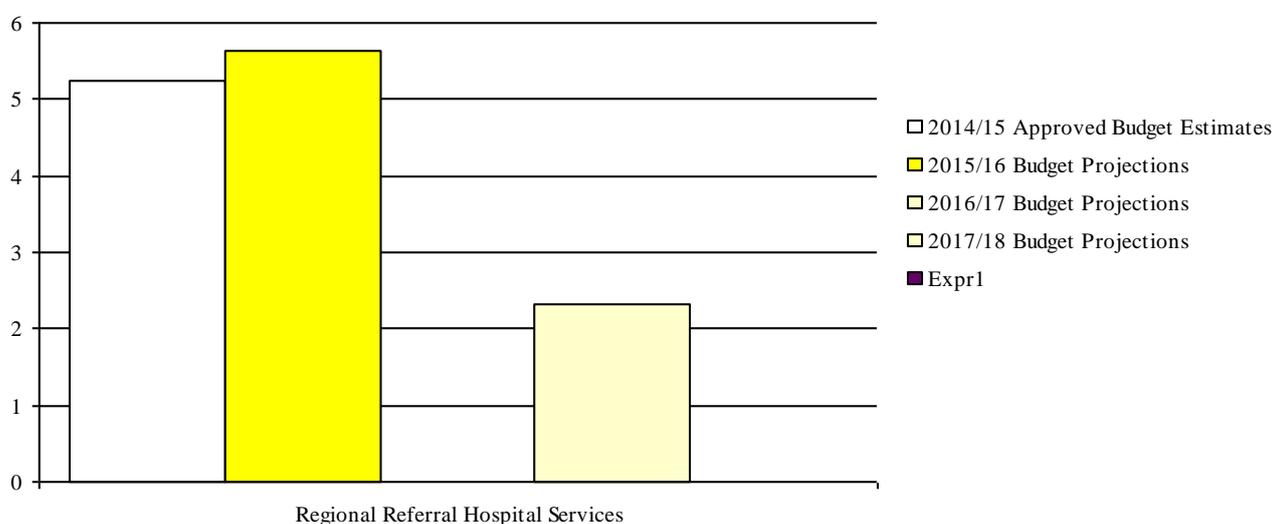
	2013/14 Outturn	2014/15		MTEF Budget Projections		
		Approved Budget	Spent by End Sept	2015/16	2016/17	2017/18
<i>(i) Excluding Arrears, Taxes</i>						
Recurrent Wage	1.605	3.420	0.562	3.420	3.420	1.173
Recurrent Non Wage	2.282	0.816	0.125	0.816	0.640	0.640
Development GoU	3.289	1.020	0.243	1.394	0.500	0.500
Development Ext.Fin	0.000	0.000	0.000	0.000	0.000	0.000
GoU Total	7.116	5.256	0.929	5.630	4.560	2.313
Total GoU+Donor (MTEF)	7.116	5.256	0.929	5.630	4.560	2.313
<i>(ii) Arrears and Taxes</i>						
Arrears	0.000	0.069	0.013	0.000	N/A	N/A
Taxes**	0.060	0.000	0.000	0.000	N/A	N/A
Total Budget	7.176	5.325	0.943	5.630	N/A	N/A
<i>(iii) Non Tax Revenue</i>						
	0.000	0.171	0.000	0.171	0.278	0.281
Grand Total	7.176	5.495	0.943	5.801	N/A	N/A
Excluding Taxes, Arrears	7.116	5.427	0.929	5.801	4.838	2.594

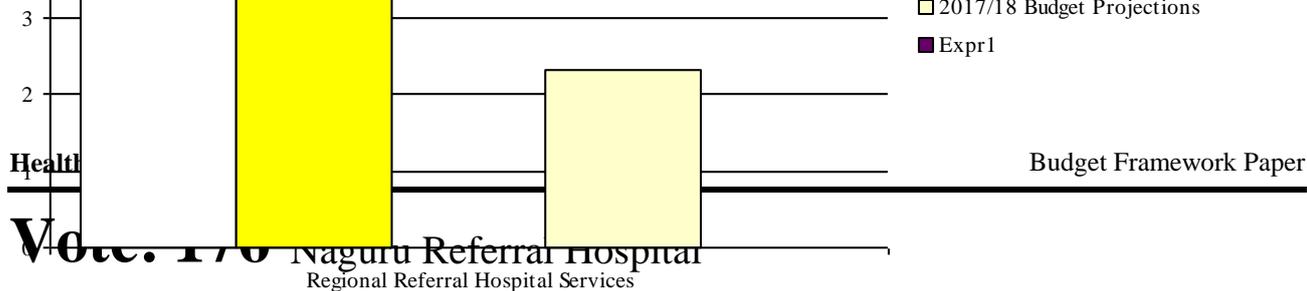
* Donor expenditure data unavailable

** 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)





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(ii) Vote Mission Statement

The Vote's Mission Statement is:

To provide general and specialised patient care services, train health professionals and conduct research.

(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 56 Regional Referral Hospital Services		
Outputs Contributing to Outcome 1:	Outputs Contributing to Outcome 2:	Outputs Contributing to Outcome 3:
<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>		
085681 Staff houses construction and rehabilitation		
085682 Maternity ward 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 vote achieved the following strategic outputs during FY 2013/14 1.Procured land for construction of staff accommodation. 2. Procured a contractor to construct the hostel and a supervising engineer to oversee the overall construction project. Additionally started on the construction of drug stores, completed burglar proofing in critical areas, extended generator power to entire hospital, extended perimeter wall, installation of intercoms, installed water harvesting equipment, installed CCTV, Electronic display screens, procured 2 double cabins for administrative purpose as well as paid for the hospital shuttle among others

Preliminary 2014/15 Performance

By end of September 2014/15, Outpatients and inpatients continued to be managed, clients continued to be screened by the diagnosis departments, machines continued to be supplied and clients continued to be rehabilitated.

With regard to capital investment, drug stores and staff hostel continued to be constructed.

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
Vote: 176 Naguru Referral Hospital			
<i>Vote Function: 0856 Regional Referral Hospital Services</i>			

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<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
Output: 085601	Inpatient services		
<i>Description of Outputs:</i>	13,248 in patients 7,976 deliveries 4,880 Surgical operations (includes emergencies &C/sections 1,048 Internal med 2,064 Paediatrics	3,852 in patients 1,890 deliveries 1,077 Surgical operations (includes emergencies &C/sections 258 Internal med 627 Paediatrics	16,733 in patients 8,358 deliveries 4,796 Surgical operations (includes emergencies &C/sections 1,137 Internal med 2,714 Paediatrics
<i>Performance Indicators:</i>			
No. of in patients admitted	29,216	3,413	16,733
Bed occupancy rate (inpatients)	100	267	100
Average rate of stay for inpatients (no. days)	4 days	16	4 days
<i>Output Cost: US\$ Bn:</i>	<i>0.253</i>	<i>US\$ Bn: 0.044</i>	<i>US\$ Bn: 0.195</i>
Output: 085602	Outpatient services		
<i>Description of Outputs:</i>	46,800 MCH contacts which include - ANC (29,848)) - Family planning(3,348) - PMTCT(12,436) - 12,856 surgical outpatient contacts - 129,360 general outpatients - 119,680 Specialised out patient clinics which include - medical opd (31,076) - paed specialised (22,988) - Surgical specialised (12856) - Dental specialised (4,460) - HIV Clinic (17,004) - Gastro entorology (1,608) - Urology (764) - ENT (1,072) - Hypetension (1,576) - Acupuncture (1,108)	25,797 general outpatients Specialised out patient clinics which include -3,828 surgical outpatient contacts - medical opd (17,894) - paed specialised (10,066) -Dental specialised (2,099) - HIV Clinic (5,773) -Gastro entorology (388) -Urology (158) - ENT (469) - Hypetension (998) - Acupuncture (694)	116,124 general outpatients 181,404 Specialised out patient clinics which include -16,598 surgical outpatient contacts - 74,684 medical opd - 42,563 paed specialised 9,396.Dental specialised - 24,792 HIV Contacts - 1,713 Gastro entorology contacts - 708 Urology contacts - 1,983 ENT contacts - 4,150 Hypetension contacts - 2,887 Acupuncture contacts -2,588 eye contacts
<i>Performance Indicators:</i>			
No. of specialised outpatients attended to	119,680	42,367	181,404
No. of general outpatients attended to	448,840	25,797	116,124
<i>Output Cost: US\$ Bn:</i>	<i>0.084</i>	<i>US\$ Bn: 0.010</i>	<i>US\$ Bn: 0.061</i>
Output: 085603	Medicines and health supplies procured and dispensed		
<i>Description of Outputs:</i>	medicines and supplies procured from NMS	2 cycles of essential medicines and supplies were delivered by NMS at a total cost of 366,034,792 represented by a percentage of 44% of total allocated budget	medicines and supplies procured from NMS
<i>Performance Indicators:</i>			
Value of medicines received/dispensed (Ush bn)	0.700000000	366,034,792	0.800000000
<i>Output Cost: US\$ Bn:</i>	<i>0.003</i>	<i>US\$ Bn: 0.000</i>	<i>US\$ Bn: 0.020</i>

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<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
Output:085604	Diagnostic services		
<i>Description of Outputs:</i>	252 CT Scans 9,140 ultra sound ations (both general scans & specialised scans) 3,088 x-ray examinations (S, Medical, Ips) 33,984 Laboratory tests (for CH, SOPDs, MOPDs, Paediatrics, ENT, Eye, Teenage clients)	44 CT Scans 2,491ultra sound ations (both general scans & specialised scans) 1213 x-ray examinations (S, Medical, Ips) 36,525 Laboratory tests (for CH, SOPDs, MOPDs, Paediatrics, ENT, Eye, Teenage clients)	201 CT Scans 10,878 ultra sound ations (both general scans & specialised scans) - 5,161 x-ray examinations (S, Medical, Ips) - 149,498 Laboratory tests (for CH, SOPDs, MOPDs, Paediatrics, ENT, Eye, Teenage clients)
<i>Performance Indicators:</i>			
Patient xrays (imaging)	3,088	1,213	17,358
No. of labs/tests	33,984	36,525	44,100
<i>Output Cost: US\$ Bn:</i>	<i>0.061</i>	<i>US\$ Bn: 0.005</i>	<i>US\$ Bn: 0.059</i>
Output:085606	Prevention and rehabilitation services		
<i>Description of Outputs:</i>	16,760 client contacts/sessions (Includes Physiotherapy , Occupational therapy, social rehabilitation, appliances to Ips, and Ops)	MCH contacts which include •ANC 8,717 •Family planning 1,247 •PMTCT 3,066 3,931 client contacts/sessions (Includes Physiotherapy , Occupational therapy, social rehabilitation, appliances to Ips, and Ops)	- 39,548 MCH contacts which include •ANC (42,200) •Family planning (16,968) •PMTCT(13,508) 17,400 client contacts/sessions (Includes Physiotherapy , Occupational, therapy, social rehabilitation, appliances to Ips, and Ops) - 10,752 orthopaedic contacts
<i>Performance Indicators:</i>			
No. of people receiving family planning services		1,247	
No. of people immunised	24,044	9,900	31,658
No. of antenatal cases	29,848	8,717	82,688
<i>Output Cost: US\$ Bn:</i>	<i>0.024</i>	<i>US\$ Bn: 0.001</i>	<i>US\$ Bn: 0.019</i>
Output:085681	Staff houses construction and rehabilitation		
<i>Description of Outputs:</i>	staff hostel construction commenced	staff hostel construction commenced	construction of the first block of staff hostels
<i>Performance Indicators:</i>			
No. of staff houses constructed/rehabilitated	12	0	50
<i>Output Cost: US\$ Bn:</i>	<i>0.902</i>	<i>US\$ Bn: 0.216</i>	<i>US\$ Bn: 0.632</i>
Output:085685	Purchase of Medical Equipment		
<i>Description of Outputs:</i>	n/a	N/A	Purchase of assorted medical equipment
<i>Performance Indicators:</i>			
Value of medical equipment procured (Ush Bn)		0	103,000,000
<i>Output Cost: US\$ Bn:</i>	<i>0.000</i>	<i>US\$ Bn: 0.000</i>	<i>US\$ Bn: 0.103</i>
Vote Function Cost	US\$ Bn:	5.495 US\$ Bn:	0.929 US\$ Bn: 5.801
Cost of Vote Services:	US\$ Bn:	5.427 US\$ Bn:	0.929 US\$ Bn: 5.801

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* Excluding Taxes and Arrears

2015/16 Planned Outputs

The Hospital will continue to pay wages, offer outpatient, management and support, prevention and rehabilitation and diagnostic, audit services.

With regard capital development, the vote will complete first block of staff house, commence construction of retention wall, remodel records offices, migrate from postpaid to pre-paid electricity and water meters, procure assorted specialized equipment form various departments.

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

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
Vote: 176 Naguru Referral Hospital						
Vote Function:0856 Regional Referral Hospital Services						
Average rate of stay for inpatients (no. days)		4 days	16	4 days	4	
Bed occupancy rate (inpatients)		100	267	100	100	
No. of in patients admitted		29,216	3,413	16,733	16,733	
No. of general outpatients attended to		448,840	25,797	116,124	116,124	
No. of specialised outpatients attended to		119,680	42,367	181,404	181,404	
Value of medicines received/dispensed (Ush bn)		0.700000000	366,034,792	0.800000000	0.7	
No. of labs/tests		33,984	36,525	44,100	48,510	
Patient xrays (imaging)		3,088	1,213	17,358	17,358	
No. of antenatal cases		29,848	8,717	82,688	82,688	
No. of people immunised		24,044	9,900	31,658	31,658	
No. of people receiving family planning services			1,247			
No. of hospitals benefiting from the renovation of existing facilities.		0	0			
No. reconstructed/rehabilitated general wards		0	0			
No. of staff houses constructed/rehabilitated		12	0	50	50	50
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			
No. of other wards rehabilitated			0			
No. of theatres constructed		0	0			
No. of theatres rehabilitated		0	0			
Value of medical equipment procured (Ush Bn)			0	103,000,000		
Vote Function Cost (UShs bn)	7.176	5.427	0.929	5.801		2.594
Cost of Vote Services (UShs Bn)	7.176	5.427	0.929	5.801		2.594

Medium Term Plans

Completion of retaining wall valued at 1.1bn, commencement of perimeter wall valued at 400m, and creation of additional floor to create space for the increasing number of patients and additional office space

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and intensive care unit.

(ii) Efficiency of Vote Budget Allocations

The plans to improve the efficiency and value for money over the medium term shall include, strengthening the risk management system of the institution and strengthening financial controls and to follow the PPDA guidelines during the procurement process.

The justification for the allocations to service delivery and key sector outputs is to ensure delivery of quality Health services. Additionally key capital allocations are to ensure availability of accommodation for critical staff.

Finally, allocation of funds for construction of the retention wall is to prevent collapse of land which may result into destruction of the access roads and soil erosion to the surrounding constructed structures.

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	1.3	0.9	0.8	2.0	23.3%	15.6%	16.2%	77.1%
Service Delivery	1.3	1.1	0.8	2.1	24.5%	18.8%	16.8%	81.0%

The costing assumptions include 1. Projected outputs do not surpass allocated resources 2, stability in the economy hence no inflation which may cause price fluctuation in delivery of services.,3. Stability in unit cost of utilities

Justification for cuts in inpatient services is attributed to reduction in cost of providing special meals to all inpatients. Consideration for feeding in patients will only concentrate of feeding needy/ disadvantaged patients.

Justification for increase in diagnostic costs is due to increasing maintenance costs for the equipment and license fees towards Atomic energy Agency.

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>					
Cost per outpatient (budget for outpatient / number of out patients seen)		1	0	1	stable prices of inputs
Cost per inpatient (budget for inpatient / number of inpatients seen)		19	11	12	stable prices of inputs
cost per diagnostic contact		1	0	0	stable prices in inputs

(iii) Vote Investment Plans

The first hostel shall house only eight families yet there are additional critical staff to be considered for accommodation hence the need for an extra hostel block.

The retaining wall is critical in preventing storm water from washing away the newly constructed hostel in addition to protecting the surrounding access road from collapsing during the rainy season.

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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)	4.4	4.4	4.5		81.2%	76.0%	93.2%	
Investment (Capital Purchases)	1.0	1.4	0.3	2.6	18.8%	24.0%	6.8%	100.0%
Grand Total	5.4	5.8	4.8	2.6	100.0%	100.0%	100.0%	100.0%

-Completion of the retaining wall valued at 1.1bn, commencement of perimeter wall valued at 400m, and creation of additional floor to create space for the increasing number of patients and additional office space and intensive care Unit.

Table V2.6: Major Capital Investments

Project, Programme	2014/15		2015/16
Vote Function Output <i>UShs 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)
Project 1004 Naguru Rehabilitation Referral Hospital			
085681 Staff houses construction and rehabilitation	12 unit storied 2 bedroomed staff hostel construction completed	construction works are on-going	block 1 staff hostel completed consultancy fees paid
Total	902,232	215,757	631,518
<i>GoU Development</i>	<i>902,232</i>	<i>215,757</i>	<i>631,518</i>
<i>External Financing</i>	<i>0</i>	<i>0</i>	<i>0</i>

(iv) Vote Actions to improve Priority Sector Outcomes

1. Develop Human resource for health that is Equipping staff with various skills through training and benchmarking.
2. Equipment Maintenance plan i.e preventive and corrective maintenance on timely and regular basis
3. Lobby for additional funding

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 1: Increased deliveries in health facilities			
Vote Function: 08 56 Regional Referral Hospital Services			
VF Performance Issue: <i>space for clinical services</i>			
		implementation as per the developed a 30 year master plan and a five year strategic and investment plan.	implementation as per the developed a 30 year master plan and a five year strategic and investment plan.
VF Performance Issue: <i>staff accomodation</i>			
COMMENCEMENT OF CONSTRUCTION WORKS FOR STAFF HOSTEL	Works on-going	completion of construction of the first block to house 8 staff and their families	additional works to ensure completion of project with available funds
VF Performance Issue: <i>staffing levels in critical areas</i>			
Continue lobbying for recruitment of critical staff	the exercises of validation and recruitment of staff completed	Continue lobbying for recruitment of critical staff and lobby for increment of the wage bill	Continue lobbying for recruitment of critical staff and lobby for increment of the wage bill

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

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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: 176 Naguru Referral Hospital						
0856 Regional Referral Hospital Services	7.176	5.427	0.929	5.801	4.838	2.594
Total for Vote:	7.176	5.427	0.929	5.801	4.838	2.594

(i) The Total Budget over the Medium Term

The total resource allocation is 3,4bn for wage , .816bnfor NWR, 1.02bn for capital. The expenditure in the medium term for the inpatient services has reduced due to reduction in funds to cater for only the disadvantaged patients and the original funds reallocated for interns accomodation. Expenditure on diagnostic services will increase due to increase in new equipments that will require high maintainance costs

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

Major expenditure allocations include Wage bill, utilities, fuel and lubricants, travel inland and goods and services. This is as result of recruitment of more staff, acquisition of a multipurpose pick up, footage and mileage allowances to staff, increased patient load leading to increase in waste generated, cleaning services, increasing utility billsand infrastructural expansion , equipping and maintainace.

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

Reasons for changes in resource allocations within the sector is attributed to 1. reduction of funds from special meals (in patients) to cater for interns accomodation allowances 2. introduction of mileage allowance to cater for the newly recruited specialist within a radius of 8km from the place of work

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		
<i>Vote Function:0801 Regional Referral Hospital Services</i>				
Output: 0856 01 Inpatient services				
<i>US\$ Bn:</i> -0.058	<i>US\$ Bn:</i> -0.079	<i>US\$ Bn:</i> -0.253		<i>Re allocation of funds to interns settlement will result into availability of medical interns hence improve on coverage in all clinical areas. This will subsequently lead to improved quality of care hence reduced morbidity and mortality resulting into productive society</i>
significant reductions in the output is due to reduction in funding for special meals i.e Number of in patients fed will only be reduced to the identified needy patient and funds were reallocated to cater for interns housing allowances	significant reductions in the output is due to reduction in funding for special meals i.e Number of in patients fed will only be reduced to the identified needy patient and funds were reallocated to cater for interns housing allowances	significant reductions in the output is due to reduction in funding for special meals i.e Number of in patients fed will only be reduced to the identified needy patient and funds were reallocated to cater for interns housing allowances		
Output: 0856 04 Diagnostic services				
<i>US\$ Bn:</i> -0.049	<i>US\$ Bn:</i> -0.049	<i>US\$ Bn:</i> -0.061		<i>Increased imaging and screening is key in patient management and contributes to treatment outcomes.Improved treatment outcomes results into a healthy and productive population</i>
Anticipated increase in the activity especially utilisation of CT scan and lobbying for laboratory reagents	Anticipated increase in the activity especially utilisation of CT scan and stable supply of laboratory reagents	Anticipated increase in the activity especially utilisation of CT scan and stable supply of laboratory reagents		
Output: 0856 78 Purchase of Office and Residential Furniture and Fittings				
<i>US\$ Bn:</i> 0.050	<i>US\$ Bn:</i> -0.036	<i>US\$ Bn:</i> -0.036		<i>Security of records is essential for future research while patients privacy is a constitutional right</i>
-Remodelling of registry will improve on the	-Remodelling of registry will improve on the	-Remodelling of registry will improve on the		

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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	
efficiency on the security and management of patients records,security of records,Buglar proofing will improve on the security of the property and specialized equipment,Partitioning for patient privacy	efficiency on the security and management of patients records,security of records,Buglar proofing will improve on the security of the property and specialized equipment,Partitioning for patient privacy	efficiency on the security and management of patients records,security of records,Buglar proofing will improve on the security of the property and specialized equipment,Partitioning for patient privacy	
Output: 0856 81 Staff houses construction and rehabilitation			
<i>US\$ Bn:</i> -0.271	<i>US\$ Bn:</i> -0.573	<i>US\$ Bn:</i> 1.098	<i>Availability of staff accomodation is contributes to improved duty coverage, and improved emergency care all of which contribute to improved patient management, treatment outcomes and subsequent lead to a health and productive population</i>
Increased alloaction is as a result of increased need for staff coverage for emergency duties thus additional funding is geared towards improving staff performance and efficiency	Increased alloaction is as a result of increased need for staff coverage for emergency duties thus additional funding is geared towards improving staff performance and efficiency	Increased alloaction is as a result of increased need for staff coverage for emergency duties thus additional funding is geared towards improving staff performance and efficiency	
Output: 0856 85 Purchase of Medical Equipment			
<i>US\$ Bn:</i> 0.103	<i>US\$ Bn:</i> 0.000	<i>US\$ Bn:</i> 0.100	<i>The availability of the spacialised medical equipment contributes to improved patient management and care and further contributes to a healthy and productive population</i>
The recruitment of spacialists in dental and eye departments led to an increase in demand for spcialised medical equipment that were not available in the faility	Demand for specialised medical equiment will fall due adequcy and proper handling of those previously procured	Demand for specialised medical equiment will fall due adequcy and proper handling of those previously procured	
Output: 0856 99 Arrears			
<i>US\$ Bn:</i> -0.069	<i>US\$ Bn:</i> -0.069	<i>US\$ Bn:</i> -0.069	<i>N/A</i>
<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	

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.

Inadequate funding continues to impact on various vote outputs. Feeding of all inpatients remains a big challenge as compared to previous period, The institution has instead concentrated on feeding only the neady patients. Additionally, evacuation of body parts remains un funded due to insufficient funds,forintance the estimated cost of evecuating

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	
<i>US\$ Bn:</i> 0.000	<i>Feeding of patients (Nutrition) contributes to better treatment outcomes which furhet contributes to a health and productive population</i>
Instead of serving Special meals for 100 in patients, only the identified needy patients are served the cost of which would be 356million for 100 patients at a cost of 10,000 per meal per day	
Output: 0856 05 Hospital Management and support services	
<i>US\$ Bn:</i> 0.000	<i>Increase productivity of health workers will partly lead to improved health outcomes for the population and subsequently better well being</i>
The need to motivate staff for improved productivity	

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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: 3.strengthen partnership with institutions that have services for the disadvantaged

Issue of Concern : Resource allocation to the entity for different programmes is inadequate to meet all needs of the disadvantaged groups

Proposed Interventions

lobby for funding and support from partners such as government MDAS, NGOS, Donors, dialogue with stake holders undertaking similar activities for disadvantaged groups in order to improve service delivery

Budget Allocations UGX billion 0.005

Performance Indicators Institutions partnered with, proposals developed and funded

Objective: 2.Improve access to services for the disadvantaged groups

Issue of Concern : congestion and long waiting time for the disadvantaged

Proposed Interventions

- Reorganisation of the patient flow system, Creation of special clinics to meet their needs, Triaging team to identify them and give the disadvantaged groups preferential support to the necessary clinics, train health personnel in customer care

Budget Allocations UGX billion 0.01

Performance Indicators - Number of patients seen in the special clinics on time, number of staff trained in customer care

Objective: 1. To develop special services for disadvantaged such as elderly, disabled, blind, deaf, dumb, and case presenting with Gender based Violence

Issue of Concern : Naguru hospital has noted an increase in number of disadvantaged yet at its inception, no provision was made to cater for unique features related to the disadvantaged groups

Proposed Interventions

1. Creation of information to provide guidance to all disadvantaged cases. 2. display of health messages using the electronic display screens in various local languages to inform and guide the disadvantaged. 3. strengthen special clinics to handle the disadvantaged. 4. Aid mobility of the disabled and frail elderly patients by providing wheel chairs, trolleys and guides 5. procure equipment for physical rehabilitation 6. strengthen privacy in various departments

Budget Allocations UGX billion 0.029

Performance Indicators 1. Information desk created. 2. messages developed and displayed. 3.health workers equipped with knowledge and skills to handle the disadvantaged 4.Mobility aides provided 5. assorted physiotherapy equipment procured such as therapeutic ultra sound, 5 dumb balls, 1 couch, 1 tilt table, wheel chairs, 6. labour ward

Vote: 176 Naguru Referral Hospital

Vote Summary

partitioned to strengthen privacy

(ii) HIV/AIDS

Objective: Promote research activities

Issue of Concern :lack of information for evidence based management of HIV/AIDS CLIENTS

Proposed Interventions

- Institution based research to be promoted, constitute institution ethical review board which currently does not exist, train board members

Budget Allocations UGX billion 0.01

Performance Indicators - Ethical review board in place, approved research projects

Objective: 2. Improve partnership with stake holders engaged in treatment and care of HIV/AIDS Patients

Issue of Concern :Insufficient resources for comprehensive care for the HIV Patients

Proposed Interventions

Lobby partners to collaborate in comprehensive care , write proposals for funding

Budget Allocations UGX billion 1000000

Performance Indicators MOU signed, number of staff trained in comprehensive care

Objective: 1. Improve delivery of services for HIV clients

Issue of Concern :shortage of manpower and space to provide comprehensive services to HIV clients

Proposed Interventions

- Train more staff in comprehensive care, creation of isolation and treatment area specifically for TB clients

Budget Allocations UGX billion 250000

Performance Indicators -isolation tent procured, number of staff trained in comprehensive care

(iii) Environment

Objective: 3. protection of environment from pollution

Issue of Concern :High level of degradation of the environment

Proposed Interventions

Lobby licencing authorities to enforce regulation

Budget Allocations UGX billion 0.002

Performance Indicators Number of communications to regulatory authorities

Objective: 2. Minimise hospital acquired infections

Vote: 176 Naguru Referral Hospital

Vote Summary

Issue of Concern : Reports on hospital acquired infection especially neo nates and mothers followin C/sections

Proposed Interventions

-Sterilisation of equipments and materials for use, segregation and evacuation of medical waste, train healthworkers in safe handling secreations, sharps and materials while handling patients, use of protective gears

Budget Allocations UGX billion 0.02

Performance Indicators Reduced hospital acquired infections, frequency of waste disposal , number of healthworkers trained in safe handling of secreations, sharps and materials while handling patients, Number of protective gears

Objective: I. Improve waste management at facility level

Issue of Concern : accumulated medical and non waste

Proposed Interventions

- lobby city council authorities to evacuate unclaimed bodies, intensify use of the hospital medical waste tratment machine by lobby for key man power to operate the equipment

Budget Allocations UGX billion 0.08

Performance Indicators Record of bodies evacuated, staff deployed to operate medical waste treatment machine

(ii) Payment Arrears

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

Payee	Payment Due Date	Amount (UShs Bn)
national water and sewerage corporation	30/06/2013	0.07
	Total:	0.065

escalating utility costs

(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	0.162		0.076
Rent & rates – produced assets – from private entities		0.000	0.009		0.095
	Total:	0.000	0.171		0.171

The forecast is based on the fact that NTR service is newly instituted method of revenue generation in the hospital. The funds generated are to be spent on Allowances, staff welfare, printing and stationary; Airtime for various sections; fuels and lubricants; and maintainance