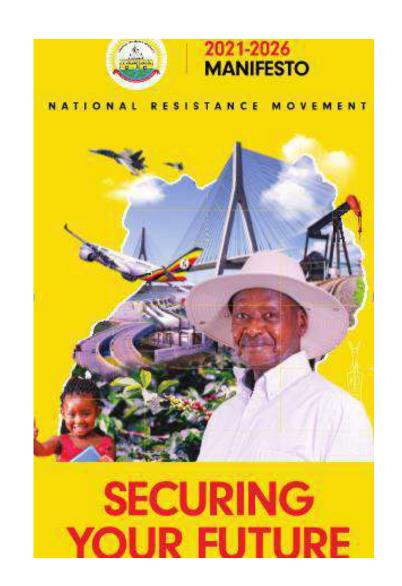




Key Achievements of the NRM Manifesto Implementation in the Health Sector

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Presentation layout

- Introduction
- Vision Mission and Goal
- Infrastructure development-achievements and challenges
- Management of emerging diseases and outbreaks
- Ambulance systems
- Human resource and welfare
- Manifesto implementation challenges
- Planned interventions





Introduction

- The aspiration of Agenda 2030 (SDG 3) and Goal 3 of Agenda 2063 call for ensuring healthy lives and promoting the well-being at all ages to which Uganda assents to.
- Uganda aspires to see her citizens enjoying a high quality standard of living by improving the health status as highlighted in the Uganda Vision 2040.
- Within the National Development Plan III, the health subprogram falls under the Human Capital Development Program Pillar and Strategic Objective 4: Enhance the productivity and social wellbeing of the population.
- The health subprogram mainly contributes to the Objective 3 of the HCDP Pillar which is "To improve population health, safety and management".



Vision, Mission and Goal





Vision: A healthy and productive population that contributes to socioeconomic growth and national development.



Mission statement: To provide high quality and accessible health services to all people in Uganda, including addressing broader determinants of health to attain socio-economic development and prosperous life.



Goal: To ensure access to adequate and quality health promotion, disease prevention, treatment, palliative and rehabilitation services in Uganda and achieve UHC target of 90% by 2030.





1.0 Key Achievements in infrastructural development

Completion of the National Medical Stores warehouse at Kajjansi, in Wakiso district.



- A State-of-the-art 30,000 pallet NMS warehouse which is the best in Sub Saharan Africa was completed and commissioned by H.E President of the Republic of Uganda on 5th November 2022
- This has increased the pallet space available from 8,000 at Entebbe warehouse.



View of National Medical Stores warehouse







Upgrading the physical and technological infrastructure at the Uganda Heart Institute



- The Uganda Heart Institute was allocated 10 acres of land at Naguru by Uganda Land Commission to construct a new home.
- Parliament approved Government to secure a loan USD 70 Million for the construction and works will start upon signing of the loan agreement.
- The Institute is able to conduct open and closed heart surgeries and other procudures leading to referrals abroad.
- There is an increase in demand for the services which necessitates expansion and increased funding to the UHI.



Construction of Regional Cancer Centres in Gulu, Mbale and Mbarara

- Construction of Regional Oncology Centre in Gulu is complete and was commissioned in December 2022
- Construction of Mbale Regional Oncology Centre is to start next FY.
- Have secured land, conducted environmental impact assessment and working on designs for the Mbarara Centre.







Gulu Oncology Centre equipped and commissioned in December 2022



- Work is ongoing at about 33%.
- New Completion date is 30th Dec. 2024





Equipping of Regional Referral Hospitals with C1 scans and MRIs.

- 14 Regional Referral Hospitals have been equipped with CT scans
 - Arua, Entebbe, Fort Portal, Gulu, Hoima, Jinja, Kabale, Lira, Mbale, Mbarara, Moroto, Mubende, Mbarara and Soroti RRHs
- Installation of the CT Scans is ongoing and will be commissioned this FY
- There is need to provide additional funding for staffing, supplies and operational costs
- MRIs not procured due to lack of funds



A computerized tomography (CT) scan combines a series of X-ray images taken from different angles around your body, CT scans are more detailed than standard X-rays.



Oxygen Supply



- All Regional Referral Hospitals (RRH) are equipped with 15cc per hour plants and currently operational.
- Government procured an additional sixteen 100cc per hour plants and four 50cc / hour plants and installation is ongoing in all RRH
- NMS has procured and installed a 60,000 litre Cryogenic oxygen* storage tank to improve supply of oxygen in the country.
- MOH is finalising the development of the National Oxygen scale up strategic plan





^{*}It is the best means of storing large volumes of oxygen with small footprints





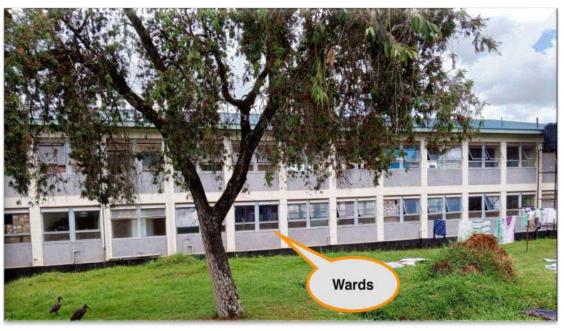
Renovation and equipping of General Hospitals

- Renovation of Gombe GH has been completed
 - This included renovation of the OPD block, administration, general ward, MCH block and construction of 32-unit staff houses
- Renovation and expansion of Busolwe Hospital commenced in October 2022 for a period of 18 months and is at about 15% completion now

 Renovation of Kambuga hospital has commenced to cost a total of UGX 32 billion. UGX 3Billion was allocated this FY

Gombe Hospital Renovation & Expansion











Upgrading of HCIVS to General hospitals



- As per the Presidential pledge, Kotido HC IV was upgraded to a general hospital in FY 2021/22 and MoH will continue providing support for the infrastructure upgrade
- Kyegegwa HC IV's infrastructure was upgraded with support from the DRDP project and upgraded to general hospitals in FY 2021/22
- Ministry of Health has also approved the upgrading of Kisenyi HC IV to a general hospital to cater for the population needs





Upgrading of HC IIIs to HC IVs



- 10 HC IIIs have been upgraded to HC IVs in various parts of the country
 - 1. Kawuanzeki HCIII and Bondo HC III in Arua,
 - 2. Bugaya HC III in Buyende,
 - 3. Palabek-kal in **Lamwo**,
 - 4. Mayuge HC IV,
 - 5. Rwebisengo HC IV in **Bundibugyo**,
 - 6. Panyandoli HC IV in Kiryandongo,
 - 7. Rugyeyo in Kanungu,
 - 8. Ruteete in Kabarole,
 - 9. Ongica HCIII in **Lira** is ongoing





Upgrading of HC IIIs to HCIVs

- In Kampala Metropolitan Area
 - Upgrade of <u>Kiira HC III</u> to IV is ongoing with funding from the UgIFT program Development Grant
 - Construction of a 60-bed maternity ward is ongoing at <u>Kiswa HC III</u> for upgrading to a HC IV on completion.
 - Construction of a theatre is ongoing at <u>Goma HC III</u> in Mukono Municipality.



Upgrading of Health Centre IIs to IIIs



- 381 (100%) target HC IIs (340 UgIFT and 41 URMCHIP) were funded for upgrade
- Under the UgIFT Program
 - 220 out of 340 (65%) upgrades are complete
 - 64 have been fully equipped and the rest be fully equipped by end of this FY
- Under URMCHIP 35 out of 41 upgrades have been completed
- Over 45 facilities have minor works ongoing and we expect them completed by June 2023;
- 32 facilities contractors were not on site for over 6 months citing non-payment of pending certificates



Pictorial show of Infrastructure upgrad of HC IIIs





Front view of maternity and wards



Twin Staff House



Outpatient Department



Sanitary Facilities





Construction of HC IIIs in Subcounties without any health facility

 Funding allocated under the UgIFT program for construction of 31 out of the 134 planned new HC IIIs and construction is ongoing

• The number of subcounties, Town Councils and Divisions has increased from 1,506 in 2017 to 2,184

 This increased the number of subcounties/TCs/ Divisions without any health facility from 134 to 678



Establish additional blood banks



- Construction of 3 Regional Blood Banks is ongoing
 - 1) Soroti RBB construction with funding from the COVID-19 Fund and is at 80% completion
 - 2) Construction of Arua and Hoima RBBs is ongoing with funding from the UgIFT Program to be completed and equipped in FY 2023/24.









Key outcomes of upgrades



- Increased the number of public HC IIIs from 1,165 in 2018/19 to 1,536 in 2022/23.
 - Mothers accessing quality antenatal care and delivery services
 - Vaccination services is now more accessible.
 - More comprehensive OPD services including laboratory
 - In-patient services
- Improved quality of healthcare services
 - Reduced walking distances 77% of population is within 3km distance of any health facility (NSDS Report 2021)
- Over 20,000 deliveries have been conducted in the in the completed facilities.



Challenges of infrastructure development



- Inflation that has affected the running contracts and cost of implementation
- Abandoned, Dragged Construction due to:
 - Delayed revoting of funds
 - Delayed Procurements
 - Inadequate Capacity of contractors
- Sustainability (Operational and Maintenance cost)
- Delayed recruitment of health workers to run the facilities





2.0 Digitalization of the heath record system







Role out of the Electronic Medical Record System

- Phase 1: All National & Regional Referral Hospitals and MoH Data Center up to July 2023
- Phase 2: All General hospitals and Regional Data Centers starting August 2023
- Phase 3: 183 health facilities IV starting November 2025
- Phase 4: HC IIIs to start in July 2028





Challenges of rolling out digitalization

- Limited functionality of System in term of modules in use
- Physical insecurity theft
- Electrical Power
- Attitude which need mindset change
- Computer illiteracy
- Personalisation of computers by staff
- Inadequate LAN
- Integration with existing systems





Non-Communicable Diseases





Prevention and control of Non-Communicable Diseases

- Scaling up services for screening of cancers of the cervix
 - Human Papilloma Virus (HPV) testing sites increased from 16 to 62 in FY 2021/22. This helps in identifying and treating those affected to reduce the risk of developing cervical cancer.
 - 25% of women aged 30 to 49 years were screened for cervical cancer.
- Immunization of young girls against cancer of the cervix.
 - Achieved 105% first dose vaccination coverage for Human Papilloma Virus for the10-year-old girls and 56% for 2nd dose (fully immunised) in FY 2021/22.





3.0 Prevention and control of Communicable Diseases





Communicable Diseases -HIV/AIDS

- HIV prevalence has reduced from 6% in 2016 to 5.5% in 2020
- The country is on track towards achieving UNAIDS targets for HIV cascade. (95% HIV positive Know Status: 95% On Treatment: 95% on treatment with Viral Suppression)
- ART coverage is 95%, ART viral load suppression 96% and ART retention 83%. Low retention is mainly due to non-adherence by adolescents and hard to reach areas
- HIV positive pregnant women initiated on ARVs 98%
- Proportion of HIV exposed infants with first DNA PCR test with in 2 months, 81%



HIV/AIDS



 The data from Uganda Population HIV/AIDS Impact Assessment (UPHIA) 2020 highlighted a much higher HIV prevalence among young people aged 20 to 24 years compared to those aged 15 to 19 years.

 This observation coupled with reported low levels of viral load suppression among HIV-infected persons aged 15 to 24 years suggest that prevention and testing interventions need to begin earlier among at-risk adolescents, particularly girls and young women.





communicable diseases - Tuberculosis

• TB prevalence reduced from 234 per 100,000 population in 2019/20 FY to 192 per 100,000 in 2021/22.

- The achievements under the TB program are largely due to;
 - Increased awareness through the Community Awareness, Screening, Testing and Treatment Campaigns held every 6 months and a total of 14,500 TB cases identified
 - Increased access to diagnostic services like the 320 Gene Xpert machines which have been placed in all National and Regional Referral Hospitals, 79 General hospitals, 123 HC IVs and 55 high-volume HC IIIs;



Communicable diseases - TB



 Community Engagements with cultural leaders are ongoing

Ministry of Health-Uganda @MinofHealt... · 6h Hon.@MargaretMuhanga led a team from MOH for an engagement on TB with leaders from Tooro Kingdom. In #Uganda, TB kills about 30 people every day and is still the leading killer for people living with HIV in the country. Approximately 91,000 fall ill with TB disease annually

• Three Mobile TB Clinics with digital x-rays procured to increase community access.





Communicable diseases - Malaria



- Malaria remains a serious public health concern in Uganda
- Malaria epidemics occurred in over 70 districts mostly in Bukedi, Busoga, Lango and Acholi sub-regions
 - Epidemic response interventions for the high burden districts included distribution of mosquitoes nets, Indoor Residual Spraying, RDTs & antimalarials
 - Seasonal Malaria Chemoprophylaxis (SMC) is conducted in Karamoja every six months
 - Indoor residual spraying was conducted in West Nile region
 - Larviciding was conducted in Kabale, Kisoro, Rubanda & Lira
- A total of 28million Long Lasting Insecticise Treated Nets are to be distributed this year 2023
- A Malaria Reduction and Elimination strategic Plan has been development





4.0 Management of emerging diseases and outbreaks





Emerging diseases and outbreaks

- The govt has been able to swiftly detect and respond to all emerging diseases and outbreaks
- This is due to the good and committed leadership by the govt
 - Including commitment of all our partners including the private sector and civil society organizations,
- Ministry of Health leadership, Local Governments and more importantly the frontline health workers
 - We have been able to managed the public health challenges with minimal shocks to routine service delivery







COVID-19 response

- Uganda reported her first case of COVID-19 in march 2020
 - Despite challenges, Uganda has been applauded as the best in responding to COVID-19 on the African continent registering fewer cases
- By April 2023, **82**% of the population above 18 years had received at least one dose and **53**% were fully vaccinated.
- This achievement is attributed to;
 - Early detection of cases using good laboratories set by the govt
 - Availability of vaccines,
 - The increased efforts by the MoH to reach the target groups through three Accelerated Mass Vaccination Campaigns
 - Reduced risk perception currently limiting uptake of vaccination.
- A COVID-19 stabilization and transition Plan was developed to guide integration of COVID-19 care and management into routine care





Ebola Virus Disease outbreak

- Uganda reported Ebola Virus Disease Outbreak in Mubende on 20th September 2022
 - Over 9 districts including Mubende, Kassanda, Kyegegwa, Kagadi, Bunyangabu, Wakiso, Jinja, Masaka and Kampala were affected
- The Ministry of Health and partners working with the District Task Forces mounted a swift and well-planned response to the Ebola outbreak
 - We were able to contain the outbreak in a record 69 days
- This was against an already strengthened healthcare system



The Minister with the EVD survivors at the end of the outbreak: 11th January 2023



Port Health Services



- Following COVID-19 pandemic, over 53 port health infrastructures have been set up at most of the points of entry
 - These help screen all incoming travellers common diseases including COVID-19
- Malaba Border Post laboratory and staff houses were completed.
- Busia at 90%, Elegu at 50%, Cyanika at 60%, Vurra at 60%.
- Construction of Entebbe and Mulago Isolation Centers was completed and are operational
- This will strengthen disease surveillance at the border points of entry.



17. Ambulance dispatch System



Establish the ambulance system with call and dispatch centres.



- 120 equipped ambulances were acquired through procurements by Government of Uganda, Development Partners and donations.
 - This was part of the COVID-19 response
- These have been deployed according to our policy of regional ambulance systems to ease coordination, maintenance, control, and accessibility.
- 2 regional hubs established at Naguru National referral hospital and Masaka regional referral hospital.







Water ambulance system



 Procured and distributed 14 Boat Ambulances for the Local Governments with islands.

 These were launched by H.E YKT Museveni









Training of EMS teams



- 860 lay first responders trained in Kampala and Masaka to respond to emergencies.
- 460 professional health workers have been trained in Basic Emergency Care.

- To strengthen the EMS system, MoH provided scholarships for training of Emergency Physicians and Emergency Medical technicians
 - Mbarara University, Makerere University and Lubaga Health Training Institute



19. Human resource welfare

Enhancing health workers' salaries and other benefits



- Health workers salaries were enhanced beginning July 2022
- The MoH is developing key performance indicators for the core cadres to ensure productivity
- Staff uniforms have been provided for most cadres
- 99 Masters and Fellowship scholarships and 41 Bachelor of Anaesthesia scholarships have been awarded to increase the number of specialists and critical cadres





Uganda National Service Delivery Survey 2021 - UBOS



- One in every ten persons (12%) reported an illness in the 30 days prior to the date of the interview which is a decline from one in every four persons (26%) in 2015.
- Fever (22%) & headaches (19%) were the most reported symptoms.
- Nine in every ten persons (87%) sought health care when they fell sick.
- Average distance to a government health facility was 5 kilo meters.
- Non-availability of medicines and supplies was the greatest concern among users of government health facilities.

Manifesto implementation challenges



Challenges



- Inadequate wage allocations. Arising out of enhancement of salaries for health workers and scientist, most institutions have registered wage shortfalls and accordingly inability to recruit to fill vacant positions.
- The greatest concern among users of government health facilities is non-availability of medicines and supplies due to stock outs. There is need to increase budget allocation for medicines as well stengthen health promotion, education and prevention services in a mulitsectoral approach.
- Inadequate funding to address the health needs

Plans for effective manifesto implementation





Plans

- Mobilize and sensitize the community for primary prevention of diseases to improve overall health of the population before any signs of morbidity.
- Investment in prevention and control of the high burden of communicable diseases especially malaria, HIV/AIDS and TB.
- To address high levels of out-of-pocket expenditure in order to protect households from catastrophic spending by broadening pre-payment mechanisms such as National Health Insurance Scheme as well as mobilizing the population to join other Social Protection Schemes.

