Bwindi Community Hospital
Uganda Nursing School Bwindi-UCU Affiliate

Annual Report
2013/2014

Vision: A healthy and productive community, free from preventable diseases and with excellent health services accessible to all.
Executive Summary from the Executive Director

Thank you for your valuable responses to our past newsletters and annual reports. It is my pleasure to welcome you to this 2013/14 annual report bringing you updates from the hospital & the school: what we have achieved together, and our future plans. I hope you will continue to be interested in receiving BCH updates.

Bwindi Community Hospital is a private, not-for-profit organization located in South West Uganda near the home to half of the world’s mountain gorillas and the minority Batwa pygmies.

For the last five years, our hospital has been recognized as the best performing healthcare provider in Uganda by the Uganda Protestant Medical Bureau. In 2011, the hospital won the prestigious health impact award, for Africa and Middle East region from the STARS Foundation (UK). This is in spite of our relatively young age and modest budget. Last year, our hospital was acknowledged by Public Opinions Uganda for its contribution towards the attainment of the Millennium Development Goals and received The Pearl of Africa Life Time Achievement Award. Again this year, we were nominated for the prestigious international Europe Business Assembly Award in the health sector.

Today Bwindi Community Hospital has grown to a 112-bed hospital caring for a local population of over 120,000 people located in Kinkiizi west constituency with a vision of attaining a healthy and productive community, free from preventable diseases and with excellent services accessible to all.

This year, we celebrated 10 years of dedicated service to the community. This coincided with the official opening of our training wing, Uganda Nursing School Bwindi- UCU affiliate. The colorful function was honored by the vice president of the Republic of Uganda, benefactors of the school, and Rotary International.

Challenges facing Bwindi Community Hospital

- Uganda is a signatory to the declaration of the United Nations on Millennium Development Goals, yet is still among the countries with the lowest health indicators in sub-Saharan Africa.
- Currently the under-five child mortality rate in Uganda is 97 per 1,000 live births while the maternal mortality ratio stands at 438 per 100,000 live births. It is unlikely that the fourth and fifth Millennium Development Goal targets of reducing the under-five mortality rate to 56 per 1,000 live births and the MMR to 132 per 100,000 will be met by 2015.
- HIV prevalence has increased from 6.4% to over 7%.
- Uganda ranks 18th in the world for highest TB rates. TB kills over 28,000 Ugandans annually.
- 100,000 Ugandans die annually due to malaria.
- Less than 5% of Ugandans have an insurance plan and 40% of the health budget is funded from out of pocket payments. Consequently, thousands are driven into poverty each year due to catastrophic health expenditure.
Bwindi Community Hospital response to these challenges

- 156 - members of staff employed by BCH (clinical and non clinical). These include an Obstetrician/Gynecologist and a pediatrician whose services will benefit 250,000 people in Kanungu district in collaboration with the district general hospital - Kambuga.
- Opened a nurses training school last year to bridge the gap of human resources for health in the region
- 100+ Babies delivered each month
- 100,000- People served by Bwindi Community Hospital in Kanungu District.
- 36% - Family planning usage in all women of reproductive age
- 7 - Days per week Bwindi Community Hospital sends a team on an outreach program.
- 50% of the population age 15 and above tested for HIV
- 1,000 clients Enrolled for HIV treatment and care
- 4.5% - Prevalence of HIV in those tested
- 100% - babies born of HIV positive mothers enrolled in our PMTCT care before delivery (2012/13) were discharged HIV-free.
- 97% - Patients with TB complete their treatment successfully.
- Over 30,000- Clients seen as outpatients each year
- 24,000- People subscribed to eQuality health insurance plan
- 30 - Emergency Caesarean sections carried out in the Operating Theatre every month
- 20,000- Children protected against malaria from subsidized mosquito nets distributed by Bwindi Community Hospital.

Bwindi Community Hospital Goals

- Becoming a specialist referral centre in the region
- Reduce maternal mortality in the Bwindi area by 25% by 2019
- Reduce child mortality in the Bwindi area by 25% by 2019
- Increase uptake of contraceptives by 20% and meet the unmet need for Family Planning services
- Increase number of people enrolled in the eQuality health insurance plan by 30% to 66%
- Produce top quality nurses from our newly established nurses’ training school.

Why do we need your support?

Only 21% of our US$1 million annual operating budget is paid through committed annual gifts, grants and user fees. This requires that our hospital engage in fund raising on a daily, weekly and monthly basis, year round. Fundraising never stops as it is the lifeblood of our hospital and the people of our community. The remaining 79% of our budget this past year came from a variety of global foundations including The Elton John Aids Foundation, Sustain For Life/Comic relief, Buy-A-net Canada, other Foundations and ongoing solicitations of tourists and visitors along with other sources of income.

We have now drafted a plan for the next five years that will be in operation starting this new financial year. This plan is majorly aimed at making BCH a center of excellence in healthcare, training and research.

This five year plan will cost us about 20Bn UGX (8M USD).
We appreciate the time you have taken to read this Annual report.

Dr. Birungi Mutahunga R
Executive Director BCH, July 2014.
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Last year in November, we achieved the nurse’s training school, an affiliate of Uganda Christian University – Mukono. The school, the only one in the district, trains registered nurses and midwives and has a total capacity of 90 students.

We have so far registered 28 students on direct and extension program and will be receiving another set of students come November this year.

On May 23rd 2014, the school was officially inaugurated at a function graced by the vice president of the Republic of Uganda, H.E Edward Sekandi, benefactors of the school, Rotary International, senior government officials and the community members. We want to produce top quality nurses and also bridge the gap of human resources for health in the region.

Achievements:

- Registered by Uganda Nurses and Midwifery Council.
- Enrolled first year students to capacity.
- Established new relationships with other training institutions abroad such as Vermont, Nevada and University of San Francisco.
- Strengthened relationships with other local nursing schools of Kagando, Kisiizi, Nyakibale, and Kabale.
- Established a relationship with the local government, Makerere and Mbarara Universities.
- Play field for football. Volley ball and netball is near completion.

We plan to:

- To create more space for future expansion.
- Continuously work with BCH to cut costs, for example, sharing human resources like IT technician among others.
- Employ preventative maintenance schedule to ensure all the infrastructure is maintained in good functional state.
- Introduce diploma in Sonography/ultra sound that would be taught alongside the traditional nursing course.
- Acquire more electronics like Ipads, desktops and kindles for effective and efficient delivery of our education program.
- Finalize terms of reference between the school (UNSB) and hospital (BCH).
- Develop a Learning resource Centre for students and staff.
- Work with UPMB to benefit from students’ scholarships and grants.
- Establish a donor database for the school.
- Market the school beyond Uganda.
- Raise more money to meet the funding gap.
- Raise funds for more scholarships for students.
Goal: To improve child health through education, prevention and high quality treatment services in a child centered environment.

This year, we attended to 1,666 admitted children (an average of 138 children per month). Children (and some adults) with severe malnutrition received home-based rehabilitation. This was made possible with the availability of therapeutic food from UNICEF and Ministry of Health that facilitated Outpatient Therapeutic Care clinic.

Children with Type 1 diabetes received free insulin and glucometers with support from Changing Diabetes in Children Program of Novo Nordisk. 2 Clinical Officers and 2 Nurses got training in care for Type 1 diabetes management through this partnership.

Aspirations

- Acquire more diagnostic equipment to support care of children along with other equipment listed on our wish list
- Further reduce neonatal mortality
- Host a symposium on pediatric and child health issues, with various stakeholders
- Receive more staff to ease the work load
- Update our policies and publish them in easy-to-use form for all cadres
- Obtain scholarships for Diploma in Pediatric Nursing
- Raise the level of Health Education on the ward

Achievements

- Neonatal Unit acquired phototherapy lights and room warmers through the generous support of partners in Switzerland and USA. These have boosted our ability to save sick newborn babies who get complications of severe jaundice.
- Received a new born incubator to teach students as well as provide warmth for premature babies.
- Received patient monitors and equipment for administering nebulised salbutamol to children with severe asthma.
- Received more resuscitation equipment such as laryngoscopes.
- Our kitchen was made safer with use of electrical cooking equipment.
- Carol’s Corner, a small children’s library and play area was created and furnished.
- We formulated a strategic plan for the next 5 years
- Health education to clients improved
- Our kitchen garden was improved
Over the previous year, this program area fared well as it received funding from Civil Society Fund which has helped scale up the area of coverage to include four new sub counties.

Over 16,437 HIV tests were done and, out of those tested, 538 (3%) were HIV positive, and were linked to HIV care. We have a total of 840 active clients in our care.

Our partnership with EGPAF (STAR-SW) ends in September 2014 and we are looking for funding to help cover the areas which will be in need.

### Achievements

- 284 clients investigated for TB, 81 patients enrolled on treatment, 38 completed TB treatment and were discharged
- Facility based EMTCT success rate at 100%
- Continued Ariel Club meetings
- Expanded our area of coverage to include 4 new sub-counties
- Conducted daily CD4 testing
- Offered HIV testing services to all clients at the hospital

### We Plan to:

- Emphasize more individualized HIV and TB prevention messages including risk-reduction counseling
- Ensure that all who test positive for HIV or TB are linked to care immediately
- Continue working closely with our partners to get enough funding to carry out outreaches to Most at risk persons
- Continue active TB care
- Continue daily CD4 testing
- Continue running a daily static clinic at the hospital
- Utilize IT department for data management, report generation and wider dissemination of our experiences.
Goal: To reduce Maternal morbidity and mortality, under fives mortality and Total Fertility Rate through quality antenatal and postnatal care, safe deliveries for all women in our catchment area, improved access to treatment for Sexually Transmitted Infections and all individuals having access to family planning.

This goal is supported by a number of partners and has been boosted by Live at Birth project funded by Comic Relief and Sustain for Life.

This year we received a Cryotherapy machine from the organization Program for Accessible Health, Communication and Education (PACE). The machine treats cervical cancer when detected in the very early stages and is benefiting women from the 4 districts of South Western Uganda.

Over 1,000 deliveries were conducted of which one-third were emergency cesarean sections. We gave family planning long term methods to 828 women and Bilateral Tubal Ligation.

Achievements
- Improved staffing with two staffs on each duty. Thanks to partners who supported training of two midwives, Racheal and Cathy.
- Delivered family planning messages at any care delivery point
- Improved attendance of expectant mothers at the Mothers hostel
- Had a training of Village Health Teams in Family planning
- Over 533 mothers came for their 1st Antenatal visit and 642 came for their 4th visit.
- Screened 240 women for cervical Cancer. 3 (1.3%) were proved to have cancer while 40 (16.7) had precancerous cervical lesions and were treated with Cryotherapy machine.

Aspirations
- Have a well equipped ward, a good practical area for students, midwives and nurses.
- Improve follow-ups for high risk pregnant mothers in our catchment area.
- Make more use of VHTs in maternal health services.
- Have Information, Education and Communication materials on the ward.
- Have cancer screening Camps monthly at the hospital and in the community.
- Have a warm room on the ward for neonates who can be managed on the ward.

Nurse Rachel, a registered midwife, attends to a mother
We had over 500 major operations, and more than 300 were emergency cesarean sections. Safe male circumcision program achieved tremendously with the largest number of minor operations.

Through continued partnership with Mbarara University Teaching Hospital and, a team of surgeons from Switzerland the hospital is a recognized Obstetric fistula centre. We continued to have orthopedic camps, general surgery camps and gynecology camps further improving the skills of the local surgeons and offering a better service to the community.

We improved patient safety in surgery by adding to the surgical team a full time anesthetist and acquired a new Universal Anesthesia Machine from Rotary club of Los Angels. This has further improved delivery of safe anesthesia

The graph below shows the number of operations that have been made possible with the support of Macaulay Foundation.

### Challenges
- Limited space in theater for recovery and sterilization
- Limited human resource in theater
- Timely delay in receiving obstetric emergencies referred other facilities
- No surgical ward as yet

### What we plan to do;
- Theatre expansion to create space in theatre for recovery and sterilization room
- Increase of human resource to expected levels
- Construction and functionalizing a maternity theatre close to the labour ward to improve waiting time
- Construction of a surgical ward

### A graph showing Minor operations conducted

#### Graph showing the number of major operations done from June 2013 – May 2014

**Goal:** Be able to offer emergency surgical care for obstetrics, trauma & non-trauma conditions at any time, as well as reducing disability through operative interventions.
Community Health and Batwa

Goal: Effective and efficient health promotion and disease prevention through health education

This year, the community health department strengthened outreach activities in the 101 villages. Each of the 101 villages has a community health nurse attached to ensure that health needs of each village are addressed as uniquely as they affect the individual villages. Every month, our community health interventions reach 14,300 people through 500 Village Health Teams (VHTs) and 7 community health nurses.

Achievements

- Immunized 1,180 children that were born at BCH.
- Conducted school health outreaches to 64 schools reaching a total of 5,000 teenagers with messages about HIV/AIDS prevention, teenage pregnancies prevention and sanitation/personal hygiene messages.
- Conducted inquiry into maternal and child death to identify avoidable factors and made recommendations to reduce all avoidable deaths.
- Conducted over 1,000 community patient follow ups in the areas of maternal health, mental health, malnutrition rehabilitation and most at risk children.
- Started a community alcohol rehabilitation program
- Started implementing the Health for All Project with an aim of reducing maternal and child mortality rates.
- Conducted teaching sessions about child nutrition/feeding during immunization sessions, on radio and during community outreaches.
- Conducted teachings on malaria at the Hospital, on community outreaches and held 6 radio talk shows about malaria.

Aspirations

- Reduce malnutrition admissions from 7% to less than 5% and increase follow up of all malnourished children in 101 villages.
- Improve sanitation and hygiene in every household including Vector control through continuous health education and promotion.
- Increase ITNs coverage in Kayonza, Mpungu and Kanyantorogo
- Immunize at least 90% of all children under 5yrs in the catchment area
- Promote adolescent reproductive health and ensure 70% of all youths have tested for HIV/AIDS status.
- Reduce maternal and child deaths by 10% in three years.
- Identify and follow up all most at risk mothers in Kayonza, Mpungu and Kanyantorogo
- Establish a sustainable community based palliative care program
- Identify and follow up neglected and abused children to reduce child abuse cases including linkage to necessary authorities
- Provide community Mental Health Services in the Sub Counties of Kayonza, Kanyantorogo and Mpungu.
- Create a sustainable community health outreach program empowering VHTs to take control of health affairs in their communities
- Start operational research to improve community health best practices.
The Health Center II’s have continued to achieve tremendously. These have been model health centers led by an exceptional team. Their work is tough, in a remote location without much backup.

**Achievements**

- Received over 4,527 OPD cases
- Received a nurse from HEAL Project who is stationed at the health unit to work with the community
- Improved sensitization of health services.
- Hosted dental clinics from BCH at least quarterly
- Started offering long term FP methods (implants)
- Offered emergency delivery cases.
- Offered antenatal and post natal services.
- Maintained immunization services.
- Offered HIV testing and counseling to every pregnant mother and other patients

**Aspirations**

- Have a staff house / accommodation.
- Buy land for access to Byumba HCII and expansion
- Have a gas fridge for vaccines
- Continue offering HIV testing and counseling
- Implement option B+ for all HIV positive mothers
- Maintain stock at the health unit
- Maintain regular teachings both at the unit and in the community
- Procure a motorcycle
- Have a visiting doctor from BCH especially to follow chronic illnesses
- Maintain immunization
- Maintain FP services (both short and long term methods).
- Maintain antenatal services

*Salvan, a nurse in-charge at Kanyashogye health centre II gets ready to carry some supplies from BCH*
Out Patient, Dental and Eyes department (OPD)

Goal: Any person with a health problem can access prompt and high quality services including health promotion and education.

OPD saw an average of 96 patients per day last year and this included HIV Clinic, dental clinic and outreach dental and general outpatient clinic. 14% were under five years and 86% were ages five years and above.

We continued to run a number of clinics and these included hypertension, diabetes, orthopedics, dental ophthalmology, epilepsy, psychiatry and palliative care at a more regular basis.

Progress made

- Emergency Patient triage criteria has been made and taught to all the staff.
- OPD runs a central pharmacy
- Trained 2 clinical officers, two nurses in pediatric diabetes education and care with the help of our partners “Changing Diabetes in Children”, Novanodisk supporting us with insulin, Glucometers and other accessories.
- Conducted ophthalmic clinic once weekly
- Partnered with Hospice Africa Uganda and Palliative care association of Uganda for mentorship and advocacy in running palliative care services.
- Patient education by expert patients, nurses and use of video clips conducted.
- Medical Officer continued to be time tabled for OPD consultations.
- OPD Strategic plan 2014/19 made.
- Implemented OPD electronic medical records system
- Hosted a group of visiting dermatologists, dentists, opticians, and orthopedic surgeons

Elly, the Public Health dental officer offers Dental care to one of the clients

Challenges faced

- Lack of some diagnostic equipments: otoscopes and Ophthalmoscope
- Old desktop computers need replacement.
- Our electronic system needs improvement to make consultations much faster and also generate more reports

OPD Under 5 Attendance
This department provides intensive medical management, medication education, and reality-based programming to improve self-awareness. This program is designed to provide the highest quality of care to patients. We had 515 males and 591 females admitted. In total we admitted 1,106 patients in the year.

The team in this department led by Dr. Hans Lokale was strengthened upon the arrival of two Scottish volunteer doctors; Dr. Hamish Foster and Dr. Rowena Neville.

**Achievements**
- Had full time medical doctors
- Modified high dependency beds for critically ill patients
- Improved audit performances which include testing for HIV, patient orientation, death audits, patient review by medical officers, X-ray audits etc.
- Developed a protocol on palliative care, updated some of the policies like referral policy, Blood transfusion, hypertension etc.

**We Plan to:**
- Increase the number of nurses
- Improve infrastructure to meet quality standards of modern healthcare
- Maintain medical doctors full time on the ward
- Extend the ward to provide for more isolation rooms and sanitary facilities

**Goal:** Any person with a health problem can access prompt and high quality services including health promotion and education.

*Dr. Hans and Nurse Diana attend to a patient on AIP*
eQuality Health Bwindi scheme is an innovative community Health program. This program continues to achieve tremendously since its inception in March 2010. It currently benefits 38% of people living in our catchment area.

**Goal:** To ensure that all people in our catchment area can access quality health care irrespective of their geographical and financial means.

**Achievements**
- 208 outreaches were conducted, reaching out to all bataka groups, mobilizing and sensitizing them about all possible benefits of eQuality Health Bwindi program.
- Continued to strengthen our collaboration and partnership with the community as our major and immediate stake holders in implementing this program.
- Attended Uganda Community Based Health Financing Association annual scheme managers meeting and shared experience with Kabale catholic diocese community health insurance and Save for Health Uganda schemes in Luwero and Nakaske.
- Maintained eQuality enrolment drop down rate below 7% registering an average annual membership growth of 4.3% compared to previous year’s scheme total enrolment.
- We scaled up eQuality program activities to the neighboring sub counties of Nyanga, Kihii, and Kihii town council enrolling over 1,053 members onto the scheme.
- We continued to give our members quality and affordable health care services throughout the year.

**Our next steps**
- Re-package and redesign our eQuality community and sensitization and mobilization strategies with particular emphasis of reaching out to every individual bataka group in the scheme catchment area to increase scheme membership by 15%.
- Continue to modify and strengthen the processes and procedures for enrollment onto the scheme to create an enabling environment for people who wish to join the scheme.
- Explore possibilities of using the C.O.U Kinkizi diocese Healthcare network to roll out community health insurance throughout the district and Arrange to produce medical access identification cards for use where electronic biometric data may not be accessed.
Good relations with all stakeholders both locally and abroad have continued to reduce. We would like to thank all of you who have walked with us throughout and touching lives of many children, women and families in this region. This year, we were pleased to receive a family donation worth 35,000 USD to fund construction of a modern incinerator, while on the other hand one of the tourists has offered to help with our fundraising publicity.

We cannot thank enough all of you for your generosity but we hold your contributions in highest regard. Efforts continue to raise more funds locally through eQuality health membership plan and the government. The outlook is promising. Over 79% of the hospital activities depend on the money raised through donations. This work is coordinated by the Communications team to ensure total accountability, timely and accurate information sharing with all our partners.

**Challenges**

- Reliance on unpredictable Income.
- Increasing number of the local organizations who are competing for tourism support.
- Maintaining a team of key hospital staff to engage in fundraising.

**Achievements**

- Realized about 80% of our expected income and the shortfall was 20%.
- Established new partnerships with Kangu, Royal College of general practitioners, Tulane University etc.
- Ensured data security of all hospital contacts and communications.
- Maintained good relations with hospital partners/supporters.

**Aspirations**

- Raise a large share of funding through grants.
- Maintain Individual donations despite the increasing challenging fundraising environment.
- Establish and maintain relationships with tour camps, organizations and other key partners.
- Develop and engage in new sustainable income generating activities.
- Raise enough funds to enable Uganda Nursing School Bwindi (UNSB) become financially self sustaining.
- Identify and establish relationships with prospective major donors.
Over the last year, some of the capital projects worked on are listed as below:

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<tr>
<td>Kanyashogye Pit Latrine</td>
<td>Completed</td>
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<tr>
<td>Compound Beatinification</td>
<td>Incomplete</td>
</tr>
<tr>
<td>Adult inpatient ward renovation</td>
<td>Completed</td>
</tr>
<tr>
<td>Land Purchase</td>
<td>Incomplete</td>
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<tr>
<td>Vegetable Garden Fencing</td>
<td>On going</td>
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However, there is need for more ward equipment including beds to offer both our clients and students a better experience.

**Achievements**
- Effectively shared information with all our stakeholders and in good time
- Ensured appropriate documentation and operationalization of working framework with all our stakeholders
- Maintained Hospital records safely and securely including all patient records through recruitment of a Records Assistant
- Ensured the completion of weekly HMIS, epidemic surveillance reports, monthly HMIS reports, annual reports to the District and UPMB and the Hospital Database for annual reporting and inventories
- Maintained and serviced Hospital assets including medical and non-medical equipment
- Successfully conducted six monthly board meetings
- Successfully held bi-weekly Executive Management meetings and reviewed every two months progress in each pro-

**What we plan to do:**
- Maintain, improve and promote the above achievements
- Redesign the structure of the incinerator to a larger capacity which can even serve the community
- Continue lobbying for Government support
- Plan the design of a modern Adult in-patients ward and start fund-raising for it
- Plan and design of one unit containing OPD, Chapel and Administration space and start fundraising for it
- Monthly meetings of Heads of departments to draw synergy from one another
- Plan and fundraise for purchase of more Hospital land to ease on congestion
- Ensure adherence to insurance standards to maintain safety of Hospital property
- Carry out risk assessment for all Hospital programs and recommend strategies to mitigate them
- Make eQuality an integral Hospital activity and extend it to the entire Kanungu District

**Challenges**
- Insufficient funding for implementation of all planned activities
- We have had challenges of recruiting a Handyman which, essentially, limits our abilities to effectively maintain Hospital infrastructure
Goal: To ensure excellent pastoral ministry and provide an environment for spiritual healing and growth among the staff, patients and neighboring communities.

We are grateful to God for the year that has ended with lots of memories of what was achieved during this period. Many thanks to the worship team and all preachers who have tremendously contributed to the success of this hospital program area. Without their involvement, very little could have been achieved. We feel very much indebted to our donors who specifically support chaplaincy in this hospital. We pray for continued support. We are committed to encouraging and improving the spiritual wellbeing of our staff, students, patients and neighboring communities. Glory be to God!!

Achievements

- We held Chapel Council and Committee meetings as planned.
- Strengthened the Good Samaritan Fund and supported over 30 needy patients to meet hospital and other associated healthcare costs.
- Our Worship team was strengthened and participated in spiritual outreach ministry to the neighbouring communities including youth rallies at Butogota C.O.U and Nyakatate Cathedral.
- Regularized 8 Staff marriages
- Routine staff morning prayers conducted with sharing of the word of God.
- Conducted regular Sunday services with Holy Communion for the hospital community.
- Regular healing prayers and counseling for patients on the ward and Mother’s Hostel.
- Regular fellowship meetings for staff and patients held.
- Bible study classes conducted and well attended.
- Thanksgiving increased and strengthened
- Staff spiritual growth realized as in their increased giving, sharing of the word and fellowship meetings.
- Received 22 Bibles from our partners for bible study classes.

Future Plans;

- Construct a chapel
- Purchase an electronic system to enable patients share in the Sunday service while on ward.
- Strengthen further the Good Samaritan Fund
- Strengthen and expand the spiritual outreach ministry to include palliative Care and Counselling services.
- Combine with the Community Health and Batwa program area to purchase a vehicle for pastoral and palliative Care ministry.
- Purchase more hymn books and prayer books.

Challenges

- Our hymn books and prayer books need constant replacement.
- Some staff members are less interested in spiritual matters.
- Our growing congregation demands more space for worship-Chapel.
- We lack enough seats for our growing congregation.
- We have no means of transport to follow up on our terminally ill patients when they are discharged for continued pastoral and palliative care.
Human Resources (HR)

**Goal:** To recruit and retain the best available staff at every level of the organization

The total workforce currently stands at 156 staff of which 13 are employed under the nursing school and, 6 doctors at the moment. We recruited an internal auditor and a human resource manager. Currently there are 7 staff benefiting from the scholarship program. Dr. Julius Nkalubo, an obstetrician has returned to BCH in July 2014 to offer specialized care in the area.

**Achievements**
- Recruited a Human Resources Manager and an Internal Auditor
- All staff members successfully appraised
- Coordinated the volunteering program at the Hospital which has immensely boosted the hospital human resources.
- Reviewed Hospital Terms and Conditions of Service
- We have had all staff salaries and other dues paid on time
- Conducted Hospital Annual Staff satisfaction Survey
- Successfully secured 7 staff scholarships
- Emphasized continuous professional development

**What we intend to do:**
- Put up more units for staff accommodation
- Liaise with UPMB to complete the WISN (Workload Indicators of Staffing Needs) analysis to establish staffing needs at the Hospital
- Review the Hospital Policy Manual
- Evolve a system where departments get to share and learn from each other.
- Computerize and synchronize staff time-tabling

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*BCH staff demonstrate the importance of team work.*
This year, we have been able to maintain quality work in the laboratory and restore confidence in our clients, a reason we have become a referral centre in the area for sample investigations. The laboratory intensively participates in both internal and external quality control at least on a weekly basis; refer some samples including Dried Blood Spots (DBS), viral loads, sputum for culture and sensitivity.

**Achievements:**
- Established and maintained an external quality control relationship with AFRIQUALAB (Dakar, Senegal).
- Made reporting of results more friendly with reference ranges.
- Registered no contradicting results for TB and HIV.
- Laboratory internal quality control systems established and maintained.
- Maintained a Minor laboratory for HIV tests, CD4 counts and essential Antenatal tests.
- Maintained blood stock.
- All our machines had service contracts, proper timed servicing, with stabilized power connection.
- The main Laboratory was renovated, properly wired, with a better lighting.
- Work force, skills, and knowledge were boosted through continuous training and Education.

**Aspirations**
- Improve Laboratory infrastructure.
- Maintain high safety levels.
- Provide high quality services to patients and other departments ensuring quality investigations and reporting.
- Maintain adequate supplies of blood and put up strategies for safe transfusions.
- Acquire both hematology (CBC machine) and Clinical chemistry (analyzer) equipments.
- Increase our test capacity to include Helicobacter pylori, TPHA, Hepatitis B and C.
- Establish an alarm system for any alarming results using upgraded electronic system.
- Procure and install a safety cabinet to ensure safety of staff and environment.
- Fully participate in research projects.
- Attain an incubator and anti human globulin reagent for complete blood cross match.

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**Radiology and Sonography**

This section falls under diagnostics. It provides clinical services in diagnostic radiology, interventional radiology, ultrasound and vascular laboratory. Several of our services are provided by unique centers of excellence formed through partnerships with other departments at the hospital.

**Achievements**
- Maintained full time coverage with well trained staff.
- 95% of all pregnant women received ultrasound services.
- Acquired 2 x-ray Machines.
- Able to do obstetric USS at our Satellite Health Centre in Byumba.
- Maintained relationship with Imaging the World.

**Aspirations**
- Train more staff in radiography.
- Be able to share our radiology with external specialists.
- Have more people trained in Sonography.
- Maintain the drier and the shaker in a good working condition.
- Improve x-ray reporting and records storage (store films electronically).
- Enough power supply to run the new X-Ray machine.
According to UNICEF report 2008 – 2012 the Uganda national stunting percentage is 33.4% (Moderate and severe) of children under the age of 5 are stunted and 42% in western Uganda, the home of Bwindi Community Hospital [BCH]. 54% of deaths in among children in Uganda are due to malnutrition

The hospital implemented a garden project supported by Sustain for Life, which has shown positive results in improving access to nutritious organic foods for consumption by targets, an aspect that has seen improved child nutritional health at the hospital.

UNICEF /USAID community connector played an important role of supplying us with Therapeutic feeds, anthropometric tools, and some drugs enabling us to do integrated management of acute malnutrition.

Achievements

- Got an award by SEED Enterprise international through Sustain for Life for having quality organic nutritious vegetable garden in Uganda which has social, environmental and economic positive impact.
- Selected by Kanungu District Nutrition community connector team to be an implementing partner of the Uganda Nutrition Action Plan (UNAP).
- Conducted nutrition education around the hospital, communities and in five Batwa settlements in the Hospital catchment area.
- Trained hospital staff, nursing students, patients and attendants in sustainable production of nutritious vegetables
- Maintained the hospital demonstration vegetable gardens

Aspirations

- Maintain health nutrition education in the hospital, communities and radio talk shows
- Maintain and expand the hospital demonstration Vegetable gardens
- Put up a cold room that will help in preserve the vegetables and act as a distribution Centre
- Promote and maintain inpatient therapeutic care and outpatient therapeutic care in the hospital and in satellite clinics
- Maintain partnership with the government and donors through sharing reports
- Increase production in the vegetable garden
- Have a steady supply of Ready-to-use therapeutic food for children with severe malnutrition in order to reduce re-admissions
- Maintain Supply of organic nutritious vegetables in and out of the season
Accounts and Finance

**Goal:** Effective involvement in raising financial resources for the hospital, their effective management and quality financial reporting

We have realized about 80% of our expected income and spent close to 86% of the budgeted expenditure. Our income has majorly been contributed by Sustain for Life/ Comic Relief, BAN-CIDA, Kellermann Foundation, Civil Society Fund, Crown Family Foundation, Star SW (EGPAF), Stars Foundation and Nursing School funders Jameson and Steve to mention but a few. The operating expenditure is 79% of the total expenditure and the nursing school is 33% of the capital costs this year.

### Operating Expenditure by Category

- Human resource cost: 48%
- Administration costs: 21%
- Medication & Patient care costs: 18%
- Outreach & comm'ty Engg'nt costs: 13%

### Operating Income

- Appealed for / Solicited over the year: 35%
- Tuition Fees: 1%
- eQuality Membership Fees: 10%
- Sustain for Life: 9%
- Government: 4%
- Patrick Spearman: 2%
- User Fees: 10%
- STARS FOUNDATION: 5%
- Delloite Multi Donor-CSF: 4%
- Macauley Foundation: 1%
- Horner Rolston: 2%
- BAN-CIDA: 10%
- EGPAF: 5%
- Recurrent Donations: 2%

### Challenges

- The need for unrestricted funds to cover the funding gap
- Acquiring funds for our planned capital projects
- Maintaining a reserve worth 3 months of operating costs
- Decline in the funds inflow
Information Technology Department

Information Technology (IT) has been instrumental in transforming data collection and management. This department has enhanced monitoring and evaluation of our programs. GIS mapping and enforcing electronic consultations in OPD are some of last years’ accomplishments. This department will continue working to ensure timely sharing of accurate information within the organization and our partners.

Achievements

- Designed and Implemented HEAL Project Database.
- Captured GPS Coordinates for all households in Kanyantorogo sub-county.
- Maintenance of internet service throughout the entire Hospital.

Challenges

- Documentation of our IT system recovery protocols needs improvement.
- Costs of acquiring IT Equipment is high
- Our Market is full of counterfeit equipment

Aspirations

- Use of Handheld devices, like Tablets and PDAs in Health care management
- Develop BCH’s data into a highly valuable research asset.
- Support telemedicine linking the hospital with other health facilities in the area
- Support teleconferencing plan of the Uganda Nursing School Bwindi with other schools both local and international.
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