



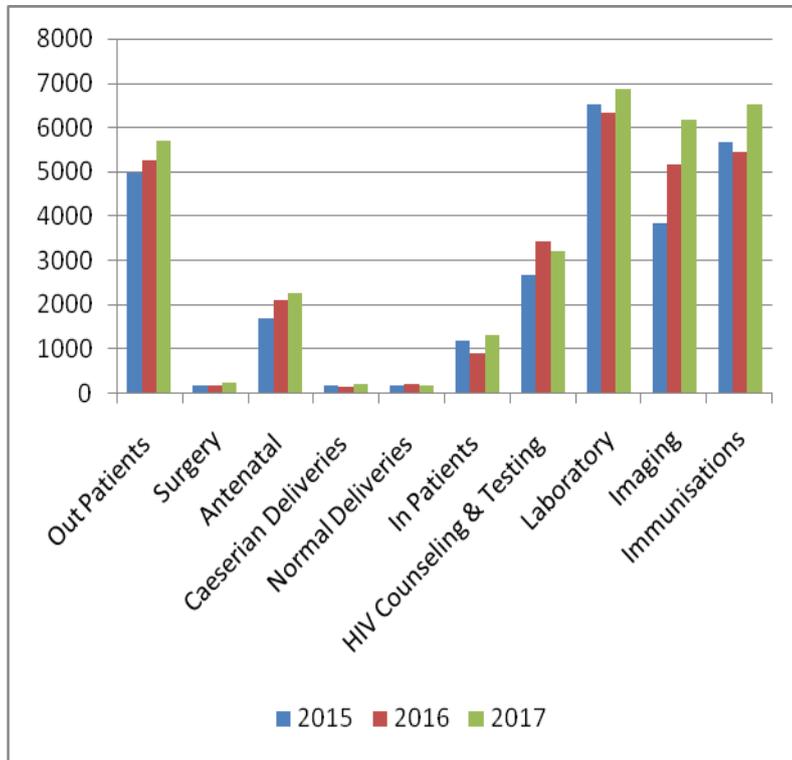
Annual report for the year 2017

KASESE COMMUNITY HEALTH AND EDUCATION FOUNDATION (KCHEF)

1-5 Stanley Street P.O.Box 411, Kasese, Uganda, Landline: 0392-843568

E:mail: bmmcentre@gmail.com, Website: www.kasesecommunity.org

HEALTH CARE



2017 had increased numbers for all the service points except for Normal Deliveries and HIV Counseling & Testing. While there are a few services that reflect fluctuating trends over the 3 years, the bigger picture is an upward trend.

We attribute this increase to especially good staff performance, equipment & system enhancement and the camps (eye and dental) that we have conducted among other things. We double our effort everyday and there is clear indication that the numbers will even grow bigger steadily; the space constraint is a big hiccup.

Our service base was expanded to include dental services which was started in April 2017

Service over 3 years	2015	2016	2017
Out Patients	4972	5262	5704
Surgery	181	198	260
Antenatal	1700	2096	2283
Caesarian Deliveries	187	165	210
Normal Deliveries	185	220	192
In Patients	1183	919	1313
HIV Counseling & Testing	2673	3445	3214
Laboratory	6532	6321	6867
Imaging	3828	5166	6167
Immunizations	5666	5455	6530

We are greatly limited by space, finances and to a lesser extent skills and have therefore not exhausted the quality or scope of services that we can offer at this facility

Our plans to do outreaches to the communities that are in hard to reach places, domiciliary care especially to mothers and HIV Aids patients, host peer group health sessions to postnatal mothers about the basic child health care have not come to pass because of the mentioned limitations

Our Asset base has grown by **UGX437, 082,105M / \$124,880**

We are exploring every opportunity to optimally utilize the solar power system so that we can make a saving off our expenditure on electricity bills. We also contracted a new internet service provider to address the challenge of limited band width and slow network. While the cost now is triple the previous many of our internet connection challenges were solved.

The **46M UGX/US \$13100** on Tiling the 3 blocks of the facility is omitted from the asset base growth because we don't own the facility

Asset Base Growth

New Ambulance (Nissan) - Donated by the CHERA	205,495,200
Computer Radiology System & UPS - Donated By the CHERA	146,836,800
Solar Power System (In-kind) - Donated By Baylor Medicines	50,000,000
Toyota Hiace Ambulance (Modification of the UAN 140)	12,200,000
True IT Internet Set Up(Switching internet provider)	5,043,600
Air conditioner Imaging(Donated by CHERA)	3,969,900
Others(Dental Chair, Dental Set, Printer , Scanner, Electronic Timer , Furniture ETC	13,536,605

437,082,105

Annual report for the year 2017

KCHEF- (Clinic) Budget Performance Summary for the Year 2017					
3650	Budgeted		Actual		
Income	UGX	USD	UGX	USD	
Grants & Donations (Operations)	89,500,000	\$24,521	89,984,700	\$24,653	101%
Grants & Donations (Capital)	1	\$0	399,738,000	\$109,517	
Income in Kind	78,000,000	\$21,370	137,824,480	\$37,760	177%
Miscellaneous Income	8,000,000	\$2,192	10,471,092	\$2,869	131%
Net Clinic Collections	982,239,411	\$269,107	1,080,749,494	\$296,096	110%
Total	1,157,739,412	\$317,189	1,718,767,766	\$470,895	148%
Expenditure					
Staff Costs	454,690,513	\$124,573	469,050,582	\$128,507	103%
Medical Supplies (Cash)	257,525,292	\$70,555	259,937,672	\$71,216	101%
Medical Supplies (In Kind)	78,000,000	\$21,370	137,824,480	\$37,760	177%
Administration & Operations	269,930,315	\$73,954	342,086,147	\$93,722	127%
Asset Acquisitions	97,593,291	\$26,738	437,082,105	\$119,749	448%
	1,157,739,411	\$317,189	1,645,980,986	\$450,954	142%

Thanks to CHERA for the grant to acquire the new Ambulance, Computer Radiology System and Infant warmer; this was a big contribution to the asset base growth in the year

Clinic Collections this year compose 85% of the Operational Income; that is a plus in view of self sustaining and growth. In 2016 clinic collections was 75% of operational income.

We received much more **Medical Supplies in Kind** than we had estimated; the uncertainty of continuity of the Partners that provide us with medical supplies in kind threatens the sustainability of the ART clinic we run because this clinic depends on these partners 90%.

There was an over expenditure in the **Administration & Operations** vote because tiling the 3 blocks and installing the 3 phase wire in-order to run enough power to accommodate the new equipment. A bit of over expenditure was incurred on the generator overhaul and lab equipment repairs

The organization's **Working Capital ratio** is still favorably above the 1:1 minimum – there is no worry over debt

Human Resource

We have an engaged, motivated & committed team of 45. In 2017 we retained up to 90% and the rate has been about the same for the last 2 years

We lost and replaced 1 Enrolled midwife, 1 Enrolled Nurse, 1 Medical Officer and the Director Medical Services. Johnson a clinical officer also got done with the ophthalmological course and is back providing eye care services limited to the available equipment

The relatively maintained number of staff against the increasing patient numbers indicates enhanced efficiency.

We acknowledge the contribution of staff to the growth of the services we offer and accordingly we will pay attention to their concerns of long working hours, commensurate remuneration and organizational strategy for academic career development with the ingredient of job security

Annual report for the year 2017

Education Program

The program has 321 beneficiaries for 2017 but only 238 students received tuition due to shortage of funds.

The beneficiaries have continued to gain from apprenticeship skills, Home visitations, Capacity building of the guardians in income generating activities, psychosocial support to both students and guardians and medical care to HIV positive beneficiaries. However due to the reduced funding most of these activities were under performed.

The Alumni and Guardians are the principal local support for the education program. They are raising financial support through membership dues and fundraising events like the one early this year that raised a net of 6MUGX / \$1714. They are participating in the school visits in effort to inspire the beneficiaries. They have also worked on a maize miller project as funding strategy for the education program in the long run.

Additional highlights

- 1) The Surveyor finally got the special title of which we have copy. The District land board has already sat so he only awaits a letter from this authority so that he can pursue the subdivision process and then transfer of ownership.
- 2) We have embraced participation in every community cause that we are aware of as an effort to measure up to community outreach program. This year we participated in save a life camp which was creating awareness on Hepatitis B. We also participated in the rotary cancer run event among others. While we have not achieved independence in executing the community outreach program we are partnering accordingly. Our weekly radio broadcast of health care is in effort towards community outreach. The grant for free clinics program in 2018 will be a big step in our outreach strategy.
- 3) Space Constraint remains our biggest challenge; It limits our expansion, compromises professionalism of our service, Inconveniences our patients and as such has a hand in dissatisfaction of our patients
- 4) We put close to 2 acres of land in Acholi Quarters to productivity with the 3500 Eucalyptus tree project. We expect the 1st yield in 2020
- 5) The maize miller project which is a self support strategy plan for the education program was embraced for support by CHERA. We are very optimistic that it will be implemented in 2018. KCHEF is also very hopeful that this will aid redemption of some beneficiaries that have recently not been able to be supported
- 6) Throughout the year we have been able to pay staff salaries on time and satisfactorily settle our operational obligations. Currently our receivables and payables off set in our favor with the former being bigger.
- 7) The last quarter of the year we experienced numerous system interferences with the Humaster 100 chemistry analyzer in the lab. We plan a back up equipment to address the issue in 2018.

Thanks to everyone that is part of the cause of KCHEF in one way or another