



Health Care Numbers Service

Annual Performance Comparison

Services	2018	2019	%age
Imaging	7084	7908	112%
In Patients	1278	1409	110%
Out Patients	7013	7682	110%
Surgery	354	387	109%
Laboratory	7093	6958	98%
Normal Deliveries	245	232	95%
Antenatal	2543	2306	91%
Caesarian Deliveries	183	166	91%
Immunizations	8529	7118	83%
HIV Counseling & Testing	3217	1627	51%

The comparison with 2018 numbers indicates an increase of number of people served in the imaging, In-patients, Out Patients and surgery departments. The numbers for the laboratory services remained about the same. There is a slight drop in the numbers for the maternal health departments and the big reason for this is the subsidized charges at the neighboring health facilities. The detest for “dormitory wards” ranks high for many mothers who choose to deliver at other facilities. We offer free antenatal services and our facility has quality equipment & services that a

pregnant mother requires. “No cost / Free service” is a big factor in the big antenatal care numbers but we still noted with concern the non-responsiveness of mothers to the call of seeking early antenatal care services in the early terms of the pregnancy. By the close of 3rd quarter only 100 mothers (60%) had attended the 4th antenatal. Our radio health talks for 2020 will intensify the sensitization on antenatal care in the early months of pregnancy.

As a facility we align our performance with set performance targets and guidelines. We pay attention to tracking 4th antenatal visits, awareness of HIV status of pregnant mothers, Suppression of viral load for our clients on the ART program, Adhering and active clients on our ART program, educating our clients on disease preventive measures to mention but a few

The HIV counselling and testing numbers reduced but this is in compliance with target testing which is the current WHO guideline / standard. Stigma and disclosure challenges still stands out as a big hindrance to adherence for PLWHIV which in turn is a big stumble in the way for achieving the target of suppressing viral load to undetectable = un-transmittable levels. Community Client Led Art Delivery (CCLAD), Stepping Stones and Assisted Partner Network(APN) *to mention but a few*, are all interventions aimed at eradicating stigma and disclosure challenges as they enforce adherence Notably, 43(72%) out of the 60 children on our program registered a negative PCR first test

Moving forward we will focus on creating awareness and enforcing testing for teens and pregnant mothers. This follows the data indicators that of the 392 active HIV clients on our program, 63 are



adolescents and 60 are children below 12 years. On the other hand, in the 3rd quarter of the year 250 pregnant mothers out of the 590 did not know their HIV status at the time of coming for antenatal care

The maternal health and immunization numbers do not include the 1500+ women and the 1650+ children registered in the Safe Motherhood in Busongora. These numbers accessed comprehensive antenatal care services and immunizations offered by KCHEF team however, they were reported through the respective health structures from the area of implementation.

We also conducted 1 dental camp and 2 eye camps in partnership with visiting practitioners and Ruharo Eye hospital respectively.

Our newly acquired Patient Management Information System (Stream Line) enriched the parameters of our data and the speed at which information can be customized and retrieved for a variety of purposes. Since its inception, we now manage our patients and their information in a more effective and efficient manner. Thanks to CHERA

Supporting Orphans and Vulnerable Children;

With the CHERA fund of \$35000 in 2019, KCHEF was able to support 226 Orphans and Vulnerable Children with tuition dues. We also conducted routine school and home visitations to provide psychosocial support and continuously empowered them to cope with the challenges of growing up. By close of year 23 had completed and graduated from various tertiary institutions.



We have also implemented the Accelerating Epidemic Control(AEC) in fort portal program funded by Baylor Uganda. This program supports 1633 Orphans and Vulnerable Children infected or/and affected by HIV Aids. For these children, we link to health facilities for care, provide nutritional services and provide scholastic materials for those going to school. The nutritional services include trainings for the guardians and food supplies to those families that have cases of severe malnutrition and are not suppressing the viral load.



The monthly \$300 malnutrition fund from a well-wisher family in Mississippi has salvaged at least 23 children from the peril stage. Tracy (in this picture) is one of our many success stories. She was severely malnourished weighing only 2.5kgs when she was abandoned at 14 months. She had multiple infections. This fund supplemented the Support from the AEC in Fort portal and her life was revived. Today she has suppressed the viral load and is living a normal life.



Sustainability Strategies; KCHEF so far has a few strategies for the cause of sustainability; We are working out ways to maximise resourcefulness of the maize mill project from which we target to yield 8Million UGX annually to support the education program. This amount can support at least 8 students with tuition for a year.

We do levy user fees on the services at the medical Centre to generate operational funds and support our free programs to the less advantaged communities.

The Alumni of the Education program formed an association 1n 2017 for the purpose of supporting the organization through financial subscriptions and participating in the implementation of organizational activities.

Our outreach program is delivered alongside a network of a variety of social and health workers within the villages where we operate. We emphasize training and empowering the local community through health talks both in interface sessions and radio talk shows. Involving the local community in implementation activities is one way to propel the health agenda further and longer.

A structure that draws from the local community at both governance and implementation level is a big contribution to the sustainability of the organizations agenda.

We are as open to every opportunity of potential partnership that supports our cause as we are to any other strategy that affirms sustainability

Human Resource; We accomplished so much with our 52 staff. Our team includes 2 medical officers, 3 clinical officers, 12 nurses and 3 midwives. 4 of our staff upgraded and attained higher qualifications while the others have continuously received mentorships and support supervisions from a variety of partners to ensure updated skills. We live with the threat of an affirmative government policy on offering better terms to health care professions. Fortunately, 2019 played in our favor and we registered a retention rate of 100% for our health workers. Ensuring we retain our staff is key on our agenda

Financial Performance for the year 2019. The clinic collections in 2019 increased by 6% (65MUGX / \$18K); this is a crucial milestone that checks the organizational capacity to meet its recurrent operational obligations. As an organization we envisage being able to support our operations 100% by the year 2023 and only look to our funding partners for capital investment. The donations (majorly from CHERA) aided the SMB outreach program and enabled acquisition of big assets. The capital expenditure for the year amounted to 490M UGX / \$135K. With this money we acquired (among other assets) a new land cruiser for the SMB program, a new Mantrac generator and an anesthetic machine. These 3 are the big items that consumed 76% of the fund. We truly appreciate every stake holder that enables KCHEF pursue its vision of an enlightened, health, educated and self-sustaining community. Together we continue to achieve.