

KUMI HOSPITAL

STRATEGIC PLAN 2022 - 2026

Providing Sustainable Quality Patient-Centered Care with Compassion

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Foreword from the Chairman, Board of Governors

The Board of Governors, Kumi Hospital is delighted to present the new Strategic Plan 2022-2026 which outlines the historical journey of Kumi Hospital since its inception in 1929 as a mission hospital. This Strategic Plan outlines the operational context of the hospital, its vision and objectives and approaches that are aimed at addressing the priority health demands of the local communities and beyond. The participatory nature of developing this Strategic Plan gave an opportunity for key stakeholders that included staffs, clients and the board to take stock of past successes and failures of the hospital and to deeply reflect on the hospital mission and direction. vision. These reflections gave birth to new strategies that have been formulated to address the key health challenges facing today's clients. The commitment and the determination of the board to steer the hospital into a new era of excellence and high achievement will undoubtedly translate into high quality health services delivery in theso-sub-region and beyond. I am sure with the dedication of the staff, and with supportive collaboration of our affiliates and partners, namely Uganda Protestant Medical Bureau (UPMB), Kumi District Local Government, other District Local Governments in the sub-region,



Ministry of Health, friends and partners of Kumi Hospital, the mission that we have set for ourselves will in the next 5 years translate into milestones that will make Kumi Hospital a centre of excellence in the provision of quality and compassionate patient-centered care.

Rev. Robert Erone **Board Chairperson**,

Strategic Plan 2022-2026

Kumi Hospital - Strategic Plan 2022-2026

Acknowledgements from the Aq. Medical Director



The 2022-2026 Strategic Plan of Kumi Hospital represents the concerted effort of Kumi Hospital Board, staff and other stakeholders whose valuable input has been incorporated into this document. The hospital is particularly indebted to Ezan & Associates for technical guidance provided during the formulation of the Strategic Plan and eventual writing and design of the Strategic Plan Document. Special thanks goes to the Senior Management Team, heads of departments and staff who tirelessly worked with the consultants to provide information, resources and time. Without the dedication and commitment of staff, this Strategic Plan would have not seen the light of the day. implementation of the key priorities set forth in this Strategic Plan. However, what is set out to be done in this Strategic Plan will realistically be achieved with support from our partners and stakeholders. Special recognition goes to the members of the Board of Governors of Kumi Hospital who devoted time to provide input into the development of this Strategic Plan and eventually approved the final version for use.

"We Pray unto Our Father in Heaven to make our wishes and aspirations, as set out in this Strategic Plan, a reality".

The urgency to move forward with implementation of this Strategic Plan at the time of a looming health crisis occasioned by the COVID-19 pandemic and other emerging diseases cannot be underscored. Kumi Hospital management is committed to move forward with the staff and friends.

Aulile

Dr. Alinda Nicholas Owen Ag Medical Director

Executive Summary

Kumi Hospital Strategic Plan 2022-2026 is a product of an intense participatory process that involved a myriad of stakeholders, staff, clients, local officials and board members. From the Leprosy treatment centre that Kumi Hospital was in 1929, the hospital has evolved through years of success and at times low moments, this evolution process provided lots of learnings and adaption that has sustained the hospital over the years. The development of the 2022-2026 revealed a number of challenges experienced by Kumi Hospital notably inadequacy of key relevant policy documents to guide internal operations, low staffing, low financial resource base, low level of ICT use, poor infrastructure and poor performance management systems among others. These findings significantly informed the development of the Strategic Plan. An external firm was hired to steer the process with full participation of staff, board members and other key stakeholders.

The process started with an analysis of the internal and external operational environment of the hospital, review of departmental performance and thereafter reframing of the vision, mission and objectives of the hospital. An in-depth analysis of the demands and expectation of the hospital consumers, competitors, supporters and collaborators was undertaken with a revelation of changing expectations and environment overtime. Much as the need for primary and secondary health care has remained a constant over the years, the increasing raise in poverty has increased the cost of health care for the poor. Other factors noted included the emergency of a more competitive marketed oriented provision of health care that places the client at the centre of care, in the new Strategic Plan, Kumi Hospital tackles the issue of poverty and competition by improving on resource mobilization efforts and providing quality care and customer satisfaction to its clients. Poor clients are Strategic Planned for in the new Strategic Plan through institution of an equitable pricing system policy that offers subsidies to the poor. The new Strategic Plan further articulates the new hospital mission of 'Provision of comprehensive healthcare services to all based on the Healing Ministry of Jesus Christ', its ambition and approaches to change is defined as gradual, flexible, empowering to staff and empathetic to the needs of vulnerable sections of the community. Six Objectives of: 1) Increasing utilisation of healthcare services; 2) Investing in quality, patient safety and patient experience; 3) Improving financial management for the hospital; 4) Improving human resource management; 5) Expanding and furnishing hospital infrastructure and 6) Improving governance, management and operational systems of the hospital are expounded in the Strategic Plan with corresponding models/approaches and measures of success. In the next 5 years of the Strategic Plan, Kumi Hospital will adopt a balanced score-card process to measure organizational effectiveness, a balanced score-card matrix with parameters to be measured in pursuit of Kumi Hospital effectiveness and efficiency is detailed in the Strategic Plan.

The Strategic Plan furthermore sets the priorities for the next five years in terms of those that need heavy capital investments notably; strengthening management capacities, strengthening monitoring and evaluation systems, building strong people centred teams, investing in cutting edge laboratory systems and work organization. Low investment priority actions articulated in the Strategic Plan include reviewing of process indicators for mortality, morbidity and patient satisfaction, following up actions for improvement identified during routine monitoring, investigating nepotism as a cause of low staff motivation, strengthening cost and performance analysis and strengthening communication. The Strategic Plan maps risk factors envisaged in the implementation of the Strategic Plan, defines the implementation, monitoring and resource mobilization strategies.

Abbreviations and Acronyms

BCC	Behavior Change Communication
DHIS	District Health Information Systems
DHO	District Health Office
EMHS	Essential Medicine and Health Supplies
ЕМТСТ	Elimination of Mother to Child transmission
FP	Family Strategic Planning
GOU	Government of Uganda
HFQ AR	Health Facility Quality
HMIS	Health Management Information System
HRH	Human Resources for Health
HSD	Health Sub-District
IPC	Infection Prevention Control
КН	Kumi Hospital
LLIN	Long Lasting Insecticide Nets
МОН	Ministry of Health
OPD	Out Patient Department
РНС	Primary Health Care
PNC	Post Natal Care
PNFP	Private Not For Profit
PPP	Public Private Public Partnership
RBF	Result Based Financing
RRH	Regional Referral Hospital
RMNCAH	Reproductive Maternal Neonatal Child and Adolescent Health
SGBV	Sexual Gender Based Violence



KUMI HOSPITAL STRATEGIC PLAN

VISION

To be a Centre of Excellence in the Provision of Quality and Compassionate, Patient-Centered Care

MISSION

To Provide Comprehensive Healthcare Services to All, Based on the Healing Ministry of Jesus Christ.

VALUES

- Professionalism: We exhibit the highest standards in our engagements. We maintain a high level of knowledge, skills and standards as we provide health services to clients. We maintain confidentiality whilst upholding the highest standards of service at the work place.
- **Integrity:** We adhere to moral principles that include honesty, sincerity, fairness and decency, and reflect these principles in the care and service we provide.
- Christian focus: Our working is to emulate the work of Christ in order to meet the needs of patients particularly the most vulnerable
- **Transparency**: Our Staffs are Open and offer honest communication about everything in service to our clients, we accountable and trustworthy to all.
- **Respect:** We value our patients and regard them and their loved ones with acceptance, courtesy and dignity; provide the same value to those with whom we work. We promote open communication and commitment to our clients' needs.
- **Team Work:** We strive to harness individual skills and knowledge and nurture positive attitudes among staff. We promote effectiveness in our, work in collaboration and ensure excellence in health care for our patients. We work as a dependable one family, relying on one another

We are driven by Our Values (Our believes, principles etc) of

The 2017 - 2021 Strategic Plan

The Kumi Hospital 5-Year Strategic Plan 2017 to 2021 replaced the 2012 to 2016 Strategic Plan. It was realised that over the past 5 years Kumi Hospital has changed significantly and now has a new Board of Governors, new Senior Management, and a new direction. It is noted that the 2017-2022 Strategic Plan, dated November 2016, defined the new direction of the hospital with an emphasis on the objectives for the next two years, 2017 and 2018, with a 5 year outlook. This Strategic Plan focused on: specialization and branding in surgical specialties; Orthopaedics, surgery, urology, eye care, medical specialties, internal medicine, Paediatrics and child health, and establishing a training centre, for nurses, midwives, theatre assistants, intern doctors, promising to achieve the proposed objectives through empowered team leadership. Kumi Hospital had by 2017 aimed to be the top hospital in the accreditation ratings.

Brief Historical Timeline of Kumi Hospital

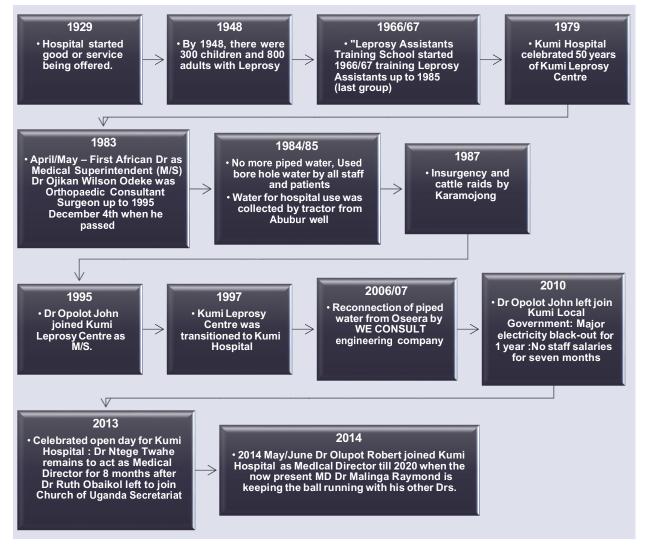


FIGURE 1: SHOWING BRIEF HISTORICAL TIMELINE OF KUMI HOSPITAL

Our Care Services

KH has consolidated its focus on the current facility-based services on offer. We provide both clinical and tertiary services, with the services rendered defining the core features of the organization activities.

Kumi Hospital endeavors to improve healthcare services which include preventive, curative and rehabilitative. The key services we offer are as below:

Current Services				
 Inpatients, Outpatients & Day Services Physiotherapy & Occupational Therapy Orthopedic Workshop and Services Laboratory services X-ray services & Ultrasound 	 Community Health Outreach Programmes Information Systems Management VCT & PMTCT Sites & ARV Programme Accommodation/Guest Wing for Visitors 	 District EMRS (Ambulance Services) Ophthalmic service Nutrition Services Child Empowerment Agro-Forestry Commercial Farming Mortuary Services 		
 Community & Home Activities Library & Research Oxygen Production (an Oxygen Strategic Plant) A school of health sciences Staff canteen 	 Proposed Development Electrical installation Mechanical Services Modern mortuary services (with refrigeration) Infrastructure expansion (in the hospital and staff housing) 	 Collaboration with NGO's & CBO's Health/Medical Services Training & Social Welfare 		

Key Hospital Departments

Hospital Departments				
■ Ante-natal	 Out Patient/Dispensary 	■ Imaging (X-ray, Ultra Sound,		
 ART Clinic 	 Technical Department/Estates 	etc)		
 Operating Theatre 	 Dental Unit 	 Medical Ward 		
(General and Gynae)	 Maternity Ward 	Pharmacy		
 Surgical Ward 	 Paediatric Ward 	 Drug Store 		
 Orthopaedic Workshop 	 Orthopaedics 	 Administration 		
 Physiotherapy 	 Laboratory 	■ TB Ward		

The Purpose of the New Strategic Plan (2022-2026)

The purpose of the present Strategic Plan is to define a useful and sustainable role for Kumi Hospital in the next 5 years, while remaining faithful to its Mission.

Kumi Hospital is a beacon in Teso Sub-region and the community, it is a vital source of safe, quality health care. We continue to take thoughtful, Strategic Planned steps to maintain future viability and grow our services to meet community need despite the unpredictability of the health care environment in which we operate. Our Strategic Plan sets our direction and defines our path.

The Preparation of the New Strategic Plan

The proposed Strategic Plan is the result of staff contributions during a 5 days' Workshop in July 2022, the focus-group discussions with Hospital staff, review by the board and senior management and about 50 individual interviews.

Situational Analysis

This section provides a situational-analysis of Kumi Hospital in form of Strengths, Weaknesses, Opportunities, Threats (SWOT) and the key priority areas for the five – year period of the Strategic Plan. The purpose of the SWOT analysis is to clearly identify the internal strengths that can be built upon, the weaknesses that need to be addressed and the external threats that require mitigation as well as the opportunities that the hospital should take advantage of. The table below summaries for each service area the strength, opportunities and focus for improvement; weaknesses and threats with the proposed mitigation actions:

Internal Environment

The environment in which the hospital is operating has significant influence on its performance. In determining its future areas of focus, various factors that impact on sustainable delivery of services were identified as being either internal or external. Several tools were used to analyze the environment. They included: SWOT Analysis, PESTIEL Analysis, Stakeholders' Analysis and Capacity Needs Assessment. The analyses were used to identify issues and helped in generating possible actions and/ or directions. Analysis of strengths and weaknesses has been used to generate possible actions the hospital can take to deal effectively with its internal environment.

Strengths

The hospital has several strengths that it will seek to build on. Governance is one of the strengths in terms of availability of a substantive board and MD to provide visionary leadership and direction for future growth. It has a committed management team, and technical medical staff who will continue to provide services and meet regularly to monitor implementation of the Strategic Plan. The hospital is ally located and fairly equipped with modern medical equipment, ability to deliver services from own premises, and good relationship with development partners. Moreover, the hospital has goodwill from the Government, development partners and clients who continue to patronize the hospital. The hospital is developing a pool of specialist doctors, as such capacity to provide specialised care. The hospital has vast for land, providing room for expansion in agro-fierce and infrastructural development, existence of private services thus enabling provision of multi-level care, improved revenue generation and improved Kumi Hospital image.

Weaknesses

The analysis of weaknesses revealed inadequate relevant policies to regulate internal operations and human resources, inadequate budget allocation, poor coordination in service provision and information sharing within the hospital, and limited interdepartmental meetings. The hospital is understaffed in various departments and units, which tends to result into inability to fully implement work-Strategic Plans. Other weaknesses include, but are not limited to: inadequate transport facilities, weak ICT portfolio-compromising service delivery, limited training opportunities, inappropriate work culture or attitude towards work by middle and low level cadres; lack of performance management system, inadequate infrastructural facilities; weak records and knowledge management; lack of service fee/pricing policy for clinic-based services, lack of monitoring and evaluation framework and lack of assets/equipment/supplies procurement and disposal policy, and dilapidated infrastructure in some wards, which is associated with high maintenance costs, staff abscondment, and absenteeism leading to poor productivity, poor service delivery, underutilization of facilities, and increased pay roll costs, poor time management hence poor productivity.

In order to minimize or overcome the weaknesses, the following actions have been proposed:

- Review available relevant policies and develop requisite new policies
- Mobilize resources from development partners
- Strengthen Strategic Planning and coordination function
- Strengthen monitoring and evaluation function
- Strengthen the use of ICT in the hospital
- Review job descriptions for all employees
- Fill vacant positions
- Institutionalize performance management system
- Provide more medical equipment
- Develop and implement assets management and disposal policy

External Environment

External environmental trends and events have had decisive influence on the hospital's ability to provide quality and affordable health care services. The purpose of environmental analysis is to enable the hospital generate actions to deal with external environmental factors and to position itself in ensuring that the hospital delivers on its mandate.

Opportunities

The hospital has had strong good will and support from development partners who supplement management efforts in serving patients and community members. As a result of this, it has benefited from technical assistance and program funds. Goodwill from the community and Government presents the hospital with an opportunity to establish a training school and strengthen collaboration and partnerships with neighboring hospitals and universities especially in sharing health sector information and research knowledge.

Threats

Limited donor base, increasing levels of poverty, unemployment and inadequate funds for expansion are been identified as threats for implementation of the Strategic Plan. Limited hospital budget has hampered implementation of Strategic Plans, slow pace of infrastructure expansion and uncompetitive remuneration for staff that continue to affect their motivation and morale.

In order to mitigate against the identified threats, the following actions were proposed:

- Seek support from development partners, which will call for development of a resource mobilization strategy
- Strengthen collaboration with neighbouring hospitals for information sharing and referral of patients
- Increase utilization of ICT and HMIS
- Support programs that address poverty within the communities
- Support community health programs

Kumi Hospital SWOT Analysis

The SWOT (Analysis, Strengths, Weaknesses, Opportunities and Threats) analysis for Kumi Hospital is summarized below.

- Clinical knowledge and skills preserved and expanding
- Dedicated staffs and expanding capacity
- Relatively affordable care
- Accommodation provided for most staffs with amenities
- Fair availability of diagnostics equipment's, Instruments and ambulance
- Good management support
- CMEs for staffs
- Team work
- Good Reputation
- Availability of land for expansion and investment in
- development projects
 Referral facility for Kumi
- district
- Functional and active board and management structures
- Availability of management tools such as: Hospital charter, Financial Manual, Human Resources Manual etc
- Established financial management systems with the required man power and tools
- Trained HMIS staffs, availability of tools and computer and website
- Availability of EMHS, controlled systems, and guidelines

- Inadequate infrastructure and space for service provision
- Gaps in ICT amongst staffs
- Inadequate vehicles to support service provision
- Poor reporting rates due to delays Inadequate tools and equipment's
- in facility as well as forestry Dilapidated housing and facilities
- Inadequate finances
- No master plan for development of vast hospital land
- Key management manuals and policies need review or development, updating and review
- Inadequate funds from user fees
 - Irregular data reviews
 - Stock out of EMHS, and poor management of expired medicines
- Non-competitive remuneration High Staff turnover
- High Staff tumover
 Lack incentives hence
- demotivated staffs
 Weak Q/QA systems
- Old infrastructure, diagnostics equipment's
- High operational costsInsufficient board and
 - management capacities in project designs, grants managements and donor lobbying
- Weak district coordinationWeak financial base for the
- hospitalInfective debt collection systems
- Increasing costs of EMHS, hence limited range of medicines

PPORTUNITY

- Support from Health Development Partners and stakeholders
- Government support and collaboration on Key HSS components
- Willingness of funders to support the hospital
- Political will to support the hospital
- Affordability of some key services by communities
- Improvements and expansion of services in Orthopedics and Eye Health
- Trainings and scholarships
- Technical support from training institutions if contacted
- Increasing demand for services
- Easy access due to proximity to main road in case of
- accidentsAssociation with UPMB for
- linkages
 Lack of a training institution in the district
- Political support from Kumi
- district leadership Support from UPMB and MoH Support from DHOs and Local
- Support from DHOs and Loc government
 Donor support for HIV, TB,
- Malaria
- Access to DHIS and HMIS
 Occurrent from Mal
- Occasional support from MoH

HREAT

- Can operate at a loss to drive away competition
 Withdraw of donors, leading to
- Withdraw of donors, leading staff turn over
 Improvements in Quality of
- services provision by competitors
- Poor communications networkPoverty in the community
- affecting payments of bills for services
- Theft and vandalism of Hospital properties
- Conflict over hospital land by community
 High expectation from
- High expectation from communities on services
 Poor road quality

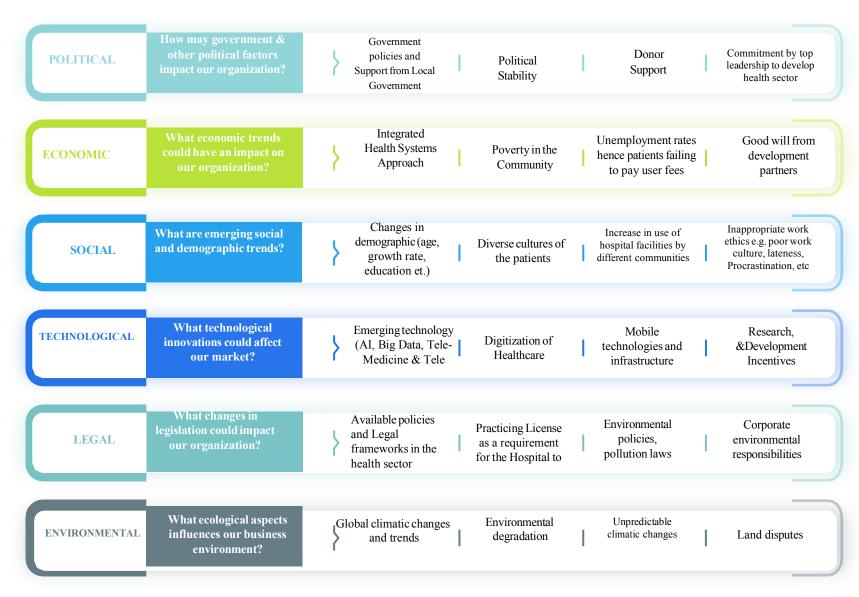
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- Attractive salaries from Government and other institutions which drains away
- skilled human resource Strong job securities in Government facilities
- Improving services in tandem with competitors in the district and sub-region
- Vertical programming such as HIV. TB, Malaria, Nutrition etc
- Low community participation in service delivery
- Low HH incomes due to poverty
 - Irregular GoU funding

FIGURE 2: SHOWING THE SWOT ANALYSIS OF KUMI HOSPITAL

PESTLE Analysis

Additional actions proposed using Political, Economic, Social, Technological, Infrastructural, Environmental and Legal (PESTIEL) Analysis is summarized in the table below:



Stakeholder Analysis

Stakeholders	What they expect from Kumi Hospital	Expectations of Kumi Hospital from them	Impact
Patients	 Quality treatment Professional care Timely provision of service Affordable services Confidentiality Respect 	 Payment of services Comply with disease management Respect staff 	High
Students	 Quality Training facilities Access to facilities Respect 	 Comply with Hospital rules 	High
МОН	 Compliance with regulations and reporting requirements Implement policies Execute mandate Prudent resource utilization Provide reports 	 Give Policy direction Provide resources Coordinate with the Local Government and other government agencies 	High
Kumi District Local Government	 Manage referrals Training in specialized courses Comply with rules and Regulations 	 Efficient primary and secondary services Comply with national referral policy 	High
NEMA	Comply with Environmental regulations	 Develop rules and regulations Provide feedback Regular inspections 	Low
Suppliers	 Timely payment for services Clear specifications Fairness Provide feedback 	 Timely delivery Quality goods and services Cost effective products 	High
Visitors	 Information 	 Comply with the hospital rules 	Medium
Staff	 Conducive work environment Competitive remuneration Training 	Perform all dutiesComply with terms of engagement	High
Other Hospitals	CollaborationFeedback on referrals	CollaborationCompliance with the referral policy	Medium
Development partners	 Funding Knowledge and skill transfers 	 Prudent use of resources Compliance with terms of engagement 	Medium

The Context

The Health Services Available Locally

The context in which Kumi Hospital is operating has changed remarkably over the last 10 years. The offer of health services, including some specialised services, has improved a lot in the region, thanks mainly to Soroti Regional Referral Hospital (RRH) and to the establishment of public and private health facilities in the vicinity of Kumi, and it is environs, rehabilitation of all the peripheral health units in the district. The demand has been increasingly sustained at a minimal percentage, especially for diagnoses and treatment of non-communicable diseases. Many patients come to Kumi Hospital from outside the region, attracted by the hospital reputation especially in orthopedic care and services.

The case-mix is expanding, with chronic conditions becoming more frequent and requiring long-term followup. At the same time, traumas due to road accidents are increasingly frequent. The changing case-mix increasingly affects the cost of care, which has also increased by the cost dynamic of all the components of the service production e.g. personnel, drugs and utilities. Breakdown and obsolescence of medical equipment are also challenges, requiring continuous investments, as does the necessary update of staff knowledge and skills.

Socio-Economic Context

The present economic context, and the Health Sector in Uganda is expanding with substantial, although with minimal, investments by the Government, international organizations and private entrepreneurs. This affects the sector's labour market that still suffers from a limited availability of higher-level professional, clinical and managerial cadres, worsened by poverty leading to poor access to healthcare by the vulnerable population.

Third Party Payers

Traditional "Third Party Payers" for health are the national health insurance; voucher schemes; result based financing; prepaid service arrangements; private health insurance and company health schemes. Service is free of charge in government units at primary level, but fees are increasingly required for higher-level services.

The National Health Insurance, still in the Government agenda, is slowly making progress. At the same time, MoH rolled out Result Based Financing (RBF) for government and PNFP hospitals that tremendously contribute to improving access to quality health services to the vulnerable communities.

Kumi Hospital is aware of the challenges that arise with "out - of – pocket" (OOP) expenditure. The growing capacity for out-of-pocket expenditure in some sections of the population may open an opportunity for reconsidering prepaid services. The offer of service to Insurers and companies could also be expanded, provided the service becomes more customer friendly.

Demand and Expectations

Local Demand and Expectations

There are varied and extended expectations regarding Kumi Hospital, by communities. The demand for primary and secondary healthcare is a constant, however due to poverty, access is hindered due to costs of healthcare services. There is a demand for the Hospital to streamline its operation and reduce waiting time, control lack of punctuality and absence of staff. Friendlier attitude by all hospital employees and more dialogue with clinical staff is a generalized request. Kumi Hospital is expected to address the issues of costs of healthcare, as it is noted by the communities to be expensive though few communities' members can still afford to pay.

Coordination and Collaboration with the DHT

There is need for Kumi Hospital to deepen it's involvement in the rural areas especially for villages that are too far from a health centre, insufficient outreach activities and scarce empowerment regarding health in some communities are pre-requisite for PHC.

The Donors

Generally, donors are more interested in financing good general care to the vulnerable or disadvantaged sections of the population, than in supporting the delivery of more advanced care to the ones who can pay at least a significant part of the cost, if not the entire cost. However, there are also donors that focus more on tackling specific health problems, usually with vertical programmes, that are mainly interested in reducing specific mortality and prevalence, and on learning lessons from their implementation.

Sustainability

Kumi Hospital has, for a very long time seeking to put in place mechanisms for institutional sustainability through improved resource mobilization strategies and internal capacities. The issue of sustainability will therefore be crucial over the next few years, and it means that the hospital must secure adequate competences for the services that the hospital intends to deliver, adapt the hospital organization accordingly and put together enough money to finance its operation without greatly reducing accessibility. These three aspects cannot be separated. Competences have a cost and they must be sustained by a functioning organization and adequate technical and support resources, which also have a cost. Therefore,

- 1. Kumi Hospital will focus on improving quality of care and customer satisfaction that will be vital for the sustainability of Kumi Hospital, and will be a deciding factor in this competitive market of health service provision.
- 2. Kumi Hospital will adopt a complementary approach to health services provision. "Complementary" will mean that while selecting which services to preserve/develop and which to subsidize, the hospital will consider the genuine needs of large sections of the population, not just sustainability.

Faithfulness to the Mission

The Mission of Kumi Hospital is:

"To Provide Comprehensive Healthcare Services to All, Based on the Healing Ministry of Jesus Christ".

The comprehensiveness of services involves providing quality health care to the needy and to fight diseases and poverty, through a comprehensive, integrated and sustainable action on health, which includes prevention, treatment, potential training and developing responsible professionals with high moral standards. Every decision regarding which service to offer, where, and preferentially to whom is rooted in the hospital mission and must be oriented towards protecting it; in this case, by choosing to which groups and activities the limited resources must be reserved.

Quality, especially in Kumi Hospital is envisioned

"To be a Center of Excellence in Provision of Quality and Compassionate Patient-Centered Care".

This is an integral component of the Hospital Mission and it is as crucial as accessibility in the preservation of the mission.

Kumi Hospital believes the Mission will be pursued by offering highly subsidized services to vulnerable groups and will improve quality in the in service delivery, to serve the rural population there. At the same time, the Hospital will offer advanced services, which are unavailable/insufficient in the region, at the lowest possible price, in respect of the financial stability of the Hospital.

Kumi Hospital intends further to invest in training of ethically oriented health workers will still be a central component of the mission by 2026.

Kumi Hospital recognises the critical role it has to play in the achievement of the regional and national agenda through provision of patient-centred comprehensive care, training and research. This Strategic Plan has outlined the key initiatives geared towards achieving the Hospital's Mission, Vision and Core Mandate.

Customer Value Proposition

The Hospital is committed to develop, retain and strengthen its relationship with patients in the provision of services based on the customer analysis. The following is the customer value proposition:

Attributes	Image	Relationships
 Quality services 	 Accountable/Transparent 	 Courtesy
 Affordability 	 Professional 	■ Caring
■ Timely	 Efficient & Effective 	 Empathetic
■ Expertise	 Consistent 	 Compassionate
■ Variety	 Impartial (Fairness) 	 Trusting
■ Safe	 Resilience 	■ Valued
Privacy	 Responsive/Receptive 	 Collaborative
 Hospitality 		 Friendliness
■ Reliable		 Confidentiality
Accessible		

Ambition

The ambition of Kumi Hospital is to be a hospital recognized for its distinguished service, preservation of dignity, compassion and empathy and a workplace to be proud of, due to the hospital's reputation and its particular attention to the needy.

To fulfil this ambition Kumi Hospital will be an accessible, patient centered, quality-oriented hospital with comprehensive services, which are well integrated into the regional health system, within a frame of consolidated organizational, technical and financial sustainability.

The hospital will guarantee preferred accessibility to mothers, children, persons with disabilities, and generally serving all patients with chronic diseases, communicable and non-communicable diseases in a non-discriminative manner. In general, special attention will be given to persons with special needs, the elderly people and to women, as they are the caregivers.

The underlying general strategy is to do much with less costs, by moving the needs of the patient gradually to the centre of the hospital organization and, at the same time, to do this in a way that members of staff feel that their professional skills and personal talents are used and recognized at best.

Approach to the Change

- Gradualism: at the beginning, there will be strong internal and external resistance to change; scaling down of a service or increasing a fee will be as gradual as possible in order to avoid inconvenience to the public and destabilization of staff (reduction of the number of employees, if necessary, will be, as much as possible through turn-over).
- Flexibility: within the limits of a few key-indicators that must be complied with, the Hospital will be flexible in exploiting all opportunities to improve quality and to gain external support, for the benefit of the community.
- **Involvement of staff at all levels in the implementation of the Strategic Plan** will be through specific actions aimed at staff understanding and appreciating its objectives and at their involvement in deciding how to achieve them.
- The main task in the implementation of the Strategic Plan will be to balance protection of vulnerable people with the need of ensuring sustainability, i.e. preserving the capacity of the hospital to continue operating to their benefit, in the best possible way.

Our Themes

The Strategic Plan focuses on three thematic areas each with a result whose successful execution will enable the Hospital achieve its Vision and Mission. These areas are:

Theme	Result
Operational Excellence	Seamless, effective and timely service delivery and efficient utilization of resources, Financial Sustainability
Provision of Quality	Excellence in clinical outcomes
Compassionate Patient Centered Care ¹	Interventions to facilitate compassion centered care for healthcare providers: Patient health outcomes, Patient satisfaction outcomes, Provider skills related outcomes and Provider satisfaction outcomes Interventions to support healthcare provider well- being and satisfaction: Provider well-being outcomes, Provider satisfaction outcomes, and Provider skills related outcomes

The Direction of Kumi Hospital for the Next 5 Years

Kumi Hospital, while appreciating that its role in the provision of health services in the region is increasingly complementary, intends to add to it the value of a renewed attention to the health and emotional needs of the patient. The Hospital intends to achieve this result with a significant, though gradual, more patient- and team-centred work organization and with the involvement of all staff, while achieving operational and financial sustainability.

Overarching Goal

The Objectives have been based on both the current needs and what was not achieved during the previous Strategic Planning period. More emphasis is put on what needs to be done to improve rather than merely continuing on the routine activities of any hospital setting.

Kumi Hospital Overarching Goal

To uplift the health standards of the community with preference to the most vulnerable ones through a sustainable comprehensive model of high quality health service delivery.

¹ **Patient-centered care is defined as** "providing care that is respectful of, and responsive to, individual patient preferences, needs and values, and ensuring that patient values guide all clinical decisions."

The Strategic Objectives of Kumi Hospital for the Next 5 Years (2022-2026)

Objectives	Measure of Success
SO1: Increase utilisation of healthcare services	MSO1 : Increased coverage and access to essential health and related services needed for promotion of a healthy and productive life in catchment areas.
SO2 : Kumi Hospital will make investments to endeavour for top decile performance in select measures related to quality, patient safety and patient experience by the end of 2026.	MSO2: All people accessing healthcare services in Kumi Hospital attain the best possible health outcomes and improved consumer acceptability and satisfaction.
SO3: Improve financial management for the Hospital	MSO3 : Kumi Hospital enables equitable, efficient and sustainable mobilization of adequate resources to finance the delivery of essential health services in line with Strategic Plan.
SO4 : Improve human resources management in Kumi Hospital	MSO4 : A developed, maintained a well-performing appropriately skilled health workforce, deployed and accessible at all levels of the health care system, providing quality health services
SO5: To Expand and furnish hospital infrastructure	MSO5 : Kumi Hospital will have a diverse health infrastructure portfolio to deliver a comprehensive and integrated service system.
SO6: Improving governance, management and operational systems of the hospital	MSO6 : Kumi Hospital competent leaders with a clear vision and the ability to motivate and mobilize other health system stakeholders to make the Kumi Hospital vision a reality.

Balanced Scorecard

A Balanced Scorecard (BSC) has been developed and shows how the themes are mapped onto the BSC perspectives, the objectives that will operationalize the themes, the expected KPI's and activities that will be put in place for successful achievement of the strategy.

Perspective	Objective	Key Performance Indicators	Target	Initiatives
CUSTOMER	Optimize customer experience	 Customer satisfaction index % customer complaints resolved 	■ 90% ■ 100%	 Conduct annual customer satisfaction survey and implement recommendations Implement customer feedback mechanism
	Enhance service delivery	 Time for reporting & dispatch of diagnostic services (Hrs.) Theatre utilization % reduction of turnaround time in A&E 	■ 12 95 ■ 10 p.a	 Audit service delivery charter and implement recommendations Develop a framework for monitoring and evaluating service level agreement and contracts. Review admission and discharge process. Develop and implement patient navigation program
	Promote & expand services	 No. of new specialized services No. of expanded services 	■ 4 ■ 4	 Create functional specialized teams Upgrade existing services
FINANCIAL STEWARDSHIP	Improve financial performance	 % increase of revenue generated 	 5 p.a 75 1.1:1 	 Contribute to negotiation with Uganda National Health

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		 % bed occupancy Rate Operating Expense Ratio (OER) % reduction in wastage 	■ 10 p.a	 Insurance for enhanced medical packages if established; Develop and implement customer recovery strategy Implement Kumi Hospital Strategic Plan Annual review of user fee Establish framework contracting for common user items. Establish a Costing Unit Implement cost management strategy
	Improve resource mobilization	 % of mobilized resources against target No. of project proposals funded 	■ 100 ■ 1 p.a	 Implement resource mobilization strategy Develop funding proposals Develop and implement framework for sharing cost of treating patients
INTERNAL PROCESSES	Improve partnering	 No. of new MoUs signed No. of new partners 	■ 3 p.a ■ 3 p.a	 Streamline process flow for MOUs and contracts Develop partnership proposals Develop and implement a framework for project Strategic Planning and implementation
	Enhance risk management	 % of high risks mitigated % increase in patient safety index 	■ 50 p.a ■ 5	 Implement security and safety strategy and by- laws Develop and implement a risk management framework Develop and implement Business Continuity Strategic Plan Conduct patient safety survey and implement recommendations
	Enhance clinical governance	 % reduction in average length of stay % reduction in mortality rates % reduction of Hospital acquired infections % reduction in documented medical errors 		 Develop treatment protocols Carry out annual SOPs audit and implement recommendations. Conduct clinical audits and implement recommendations5. Conduct monthly mortality audits Implement infection, prevention and control policy and guidelines Conduct annual surveillance for HAIs Implement the recommended mitigation measures for medical errors

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ORGANIZA- TIONAL CAPACITY	Enhance research and innovations	 % research completed and disseminated as per Strategic Plan No. of new research projects % increase in research funding No. of policy briefs No. of new innovations 	 100 p.a 15 p.a 5 p.a 1 p.a 2 p.a 	 Develop & implement a research funding tracking tool Establish a framework to support proposal writing, dissemination and implementation Implement Knowledge management and Innovation policy
	Improve performance culture	 Staff performance index Rate of absenteeism & abscondment 	• 90 • 0	 Identify and implement culture change programmes Implement rewards and sanctions policy Develop and implement a performance management system Develop and implement a framework for managing staff absenteeism and abscondment Hold monthly thematic work days Develop and implement a framework for interactive communication
	Improve automation and technology adoption	 No. of new automated processes6 No. of integrated services7 	5 5	 Undertake Business Process Re-engineering Implement the ICT strategy
	Enhance human resource capacity	 Replacement cycle time in months % of staff trained as per approved trainings % in-post against approved establishment 	■ 3 ■ 100 ■ 100	 Develop and implement Succession Plan Develop and implement a talent management policy Implement training needs assessment report Develop a framework for staff sensitization on strategies, policies and Strategic Plans Undertake a workload analysis
	Improve infrastructure and equipment	 % equipment availability Work environment index % implementation of equipment replacement Strategic Plan 	■ 90 ■ 70 ■ 100	 Implement the equipment investment and replacement Plan Implement renovation Plan Implement Kumi Hospital master Plan Implement PPMs Develop and implement green energy management framework

OBJECTIVE ONE

SO1: INCREASE UTILISATION OF HEALTHCARE SERVICES

MSO1: Increased coverage and access to essential health and related services needed for promotion of a healthy and productive life in the catchment areas.

Kumi Hospital has reviewed and realigned it vision for service delivery, strategy on people-centered² and integrated health services³ is a call for a fundamental paradigm shift in the way health services are funded, managed and delivered. This is urgently needed to meet the challenges being faced by health systems around the world. It is also essential to better prepare for and respond to health emergency crises through integrated services as became evident in the recent Ebola Virus Disease outbreak, and the current global Covid-19 Pandemic.

The 5-year (2022-2026) Strategy of Kumi Hospital is that, it has adopted a people-cantered and integrated health services approach to address issues of fragmented, inefficient and unsustainable services. We would like to adopt a people-centered and integrated health services, health systems, as evidence suggests that it will provide services that are of better quality, are financially sustainable and more responsive to individuals and communities. The common set of principles that shall underpin our services provision are:

- **Comprehensive** offering care that is comprehensive and tailored to the evolving health needs and aspirations of people and populations, with a commitment to universal health coverage
- Equitable providing care that is accessible and available to all.
- Sustainable delivering care that is efficient, effective and contributes to sustainable development.
- Coordinated ensuring that care is integrated around people's needs and effectively coordinated across different providers and settings.
- **Continuous** providing care and services across the life course.
- Holistic focusing on physical, socioeconomic, mental and emotional well-being
- **Preventive** tackling the social determinants of ill-health through action within and between sectors that promotes public health and health promotion.
- **Empowering** supporting people to manage and take responsibility for their own health.
- Goal oriented in terms of how people make health care decisions, assess outcomes and measure success.
- Respectful of people's dignity, social circumstances and cultural sensitivities.
- Collaborative supporting relationship-building, team-based working and collaborative practice across primary, secondary and tertiary care, and with other sectors
- **Co-produced** through active partnerships with people and communities at an individual, organizational and policy-level.
- **Endowed with rights and responsibilities** that all people should expect, exercise and respect.
- Governed through shared accountability of care providers to local people for the quality of care and health outcomes.

² **People-centred health services** are an approach to care that consciously adopts the perspectives of individuals, families and communities, and sees them as participants as well as beneficiaries of trusted health systems that respond to their needs and preferences in humane and holistic ways.

³ Integrated health services are health services that are managed and delivered in a way that ensures people receive a continuum of health promotion, disease prevention, diagnosis, treatment, disease management, rehabilitation and palliative care services, at the different levels and sites of care within the health system, and according to their needs throughout their life course

- Evidence-informed so that policies and strategies are guided by the best available evidence and supported over time through the assessment of measurable objectives for improving quality and outcomes
- Led by whole-systems thinking that views the health system as a whole and tries to understand how its component parts interact with each other and how the system is influenced by factors beyond it
- Ethical by making sure that care optimizes the risk-benefit ratio in all interventions, respects the individual's right to make autonomous and informed decisions, safeguards privacy, protects the most vulnerable and ensures the fair distribution of resources.

The Potential Benefits of People-Centered and Integrated Health Services

To individuals and their families	To health professionals and community health workers
 Increased satisfaction with care and better relationships with care providers Improved access and timeliness of care Improved health literacy and decision-making skills that promote independence Shared decision-making with professionals with increased involvement in care Strategic Planning Increased ability to self-manage and control long-term health conditions Better coordination of care across different care settings 	 Improved job satisfaction Improved workloads and reduced burnout Role enhancement that expands workforce skills so they can assume a wider range of responsibilities Education and training opportunities to learn new skills, such as working in teambased health care environments.
To communities	To health systems
 Improved access to care, particular for marginalized groups Improved health outcomes and healthier communities, including greater levels of health seeking behaviour Better ability for communities to manage and control infectious disease and respond to crises greater influence and better relationships with care providers that build community awareness and trust in care services greater engagement and participatory representation in decision-making about the use of health resources clarification on the rights and responsibilities of citizens to health care, to care that is more responsive to community needs 	 Enables a shift in the balance of care so that resources are allocated closer to needs Improved equity and enhanced access to care for all Improved patient safety through reduced medical errors and adverse events Increased uptake of screening and preventive programmes Improved diagnostic accuracy and appropriateness and timeliness of referrals Reduced hospitalizations and lengths of stay through stronger primary and community care services and the better management and coordination of care Reduced unnecessary use of health care facilities and waiting times for care Reduced overall costs of care per capita Reduced mortality and morbidity from both infectious and non-communicable diseases.

Model/Approach to Lead to Improvement on the Existing Range of Clinical and Nursing Services Provided and Optimize Customer Experience

To meet the fundamental challenges faced by today's health systems, the strategy proposes five interdependent directions that need to be adopted in order for health service delivery to become more people-centered and integrated. The five directions are:

- 1. **Empowering and engaging people** (Seeing people and communities as assets, Empowerment, engagement and co-production, Empowering People, Self-Management, Health Education, Focusing on the Most Disadvantaged, Engaging Communities, and Fostering co-production-recognising people as assets, valuing work differently, promoting Reciprocity, and building social network
- 2. Strengthening governance and accountability (Involves promoting transparency in decision making and generating robust systems for the collective accountability of health providers and health system managers through aligning governance, accountability and incentives at the Hospital and Partnership levels)-promote the engagement and empowerment of people and communities to participate actively and efficiently in decisions that impact on the way care is resourced, Strategic Planned and delivered, promote the engagement and empowerment of all stakeholders, including civil society, the private sector, health professionals and academics, to participate actively in dialogues, decentralize power and decisionmaking, where appropriate, ñ regularly monitor and review the effectiveness interventions, services, Strategic Plans, and be transparent and open to the public and other stakeholders in reporting, harmonize and align donor programmes with national policies, strategies, priorities and Strategic Plans of the hospital,
- 3. **Reorienting the model of care** (Reorienting the model of care means ensuring that efficient and effective health care services are purchased and provided through models of care that prioritize primary and community care services and the co-production of health). This encompasses the shift from inpatient to ambulatory and outpatient care, and the need for a fully integrated and effective referral system. It requires clear investment in holistic care, including health promotion and ill-health prevention strategies that support people's health and well-being. Reorienting models of care will also create new opportunities for inter-sectoral action at a community-level to address the social determinants of health and make the best use of scarce resources. The role of multiple sectors in an integrated manner is particularly critical for risk management for health. In this approach Kumi Hospital will ensure Care coordination, Service Substitution, Super Specialisation, Clinical governance and Accountability-Clinical governance requires integrating financial control, clinical quality and service performance.
- 4. **Coordinating services-** Coordinating services involves coordinating care around the needs of people at every level of care, as well as promoting activities to integrate different health care providers and create effective networks between health and other sectors. The core purpose of this direction
- 5. Creating an enabling environment (Leadership at all levels of the health system, so as to manage change processes, facilitate collaboration and undertake course correction where necessary, Policies and legislation that articulate the vision and mechanisms for change, and align people behind that vision, Capacity-building for health professionals, health managers, patients and communities so that all key actors are equipped with the necessary skills to strengthen health services, Innovation and spread to promote systems and organizational cultures that support experimentation and the diffusion of good ideas).

Kumi Hospital will emphasize providing integrated services that offer the many advantages of integration while incorporating the benefits of vertical services.

Sub-Objectives	Key Performance Indicator(s)	Target
Optimize customer experience	■ % annual recommendations implemented	 90% annual recommendations implemented
Improvement on the existing range of clinical and nursing services provided		 25% Increase in Access to healthcare services in a range of clinical and Nursing services in KH 90% of clients being satisfied with the clinical and nursing services in KH

Model/Approach to Strengthening Supplies Chain for Services Provision (EMHS)⁴

Effective supply management has the potential to make a powerful contribution to the reliable availability of essential medicines, which are a crucial part of the delivery of high-quality health care services. Because medicines are costly and poor management so often results in waste, good supply management is also crucial to the cost-effectiveness of providing medicines. To strengthen supplies chain and availability of EMHS, Kumi Hospital will adhere to the pharmaceutical management principles of:

- Selection involving reviewing the prevalent health problems, identifying treatments of choice, choosing
 individual medicines and dosage forms, and deciding which medicines will be available at each level of
 the health system.
- Good Strategic Planning for steady supply of medicines and health supplies
- Procurement including quantifying medicine requirements, selecting procurement methods, managing tenders, establishing contract terms, and ensuring pharmaceutical quality adherence to contract terms.
- Distribution including stock control, stores management, and delivery to user departments, over-sight
 on pharmacies and monitoring of medicines and health supplies use
- Use including diagnosing, prescribing, dispensing, and proper consumption by the patients.

Kumi Hospital will invest in a strong management support systems, including the Strategic Planning and organization of services, financing and financial management, information management, and human resource management.

Sub-Objectives	Key Performance Indicator(s)	Target		
Strengthening Supplies Chain Management for Services Provision	 Percentage of prescriptions filled, with minimum acceptable standards established Percentage of non stock-outs for specific tracer drugs, maintained at established minimum level 	minimum acceptable standards established		

Model/Approach to Strengthen Coordination of HSD Services and Collaboration with RRH in Eastern Uganda

Kumi Hospital operation is streamlined with the existence of the PPP for Health. Working with the private for-profit sector to create a balanced public private mix fosters quality, access, and efficiency.

- Closer interaction with the health and administrative authorities of the district and, to interact with the
 population, as a team.
- Pursue more interaction with the RRH to Strategic Plan together and avoid not only duplication, but also
 possibly gaps in the offer of service.

⁴ World Health Organization (WHO) defined essential medicines as those medicines that meet the needs of the majority of the population

- Build strong associations with sister hospitals/facilities for technical support (Consider monthly or Quarterly visits as capacity is built).
- Coordinate regular (quarterly) HSD performance review meetings, Strategic Planning and budgeting meeting and support supervision for the HSD
- Maintain and improve its interaction with the communities surrounding it and find ways for local society and its needs and expectations to be better represented at its decision-making level.
- Promote Strategic Planning of specialist services with Universities, Soroti and Mbale RRH and a referral/exchange system with the other not-for-profit hospitals/facilities in the region with referral increasingly becoming formal, with follow-up mechanisms and become an occasion for sharing competences.

Sub-Objectives	Key Performance Indica	itor(s)	Т	arget	
Strengthen coordination of HSD services and	Number of collaborative	activities			orative
collaboration with Regional Referral	initiated by KH		activi	ties ir	nitiated
Hospitals in Eastern Uganda			by K	H with	HSD,
			RRH		and
			Unive	rsities	

Models/Approaches to Strengthening Primary Health Care (PHC) Activities

Providing community-based Primary Health Care (PHC) that promotes active community participation, provides access to community resources, and takes full advantage of the potential of community health workers. Kumi Hospital offers effective community-focused healthcare programs that improve access to primary healthcare and specialty care, enhance prevention, enable management of chronic illnesses, and partners to address the social determinants of health. Kumi Hospital will encourage community participation in health service delivery by:

- Strengthening existing areas of clinical excellence
- Developing new services and programs, matching resources to community needs and clinical program priorities
- Maintaining and improving its interaction with the communities surrounding it and find ways for local society and its needs and expectations to be better represented at its decision-making level.
- Strengthening integrated service delivery, supply chain systems and front-line health workforces
- Strengthening the emphasis on reaching mothers and adolescents with immunization services;
- Improve presence of qualified staff in the OPD to offer integrated services
- Continuing to endorse positive practices and satisfied service users to convert their peers;
- Community leadership, including cultural, religious and opinion leaders, will be engaged and trained to address cultural barriers, and conduct effective community mobilization and BCC.
- Engaging peer groups including women groups, expert clients, and youth groups to deliver messages targeting social barriers to the adoption of healthy behaviors.
- Changing the perception among staff that OPD is a less demanding and a less qualified service, through increasing the presence of senior staff in OPD.
- Reducing waiting and service time in very service delivery area.
- Avoiding queue jumping or impression of it (divert patients who need immediate attention to Casualty).
- Speeding up service delivery so that patients do not have to come again, the next day.
- Considering expansion construction of shelter for OPD patients so that all patients are served in a day
- Ensuring the fastest possible response to critically ill and unstable patients more so at night and at the weekend. In order to promote this, Kumi Hospital intends to look for ways to measure the response time of such situations, and to monitor it strictly.
- Establishing a Baby and Young Child Emergency Clinic
- Strengthening community participation in health service delivery through VHTs

- Coordinating community health focused interventions (immunization, nutrition and health education and promotion)
- Participating in and coordinating government health programmes such as Child Days Plus and Mass Immunization campaigns, etc
- Conducting integrated community outreaches
- Conducting school health programmes

Health Care (PHC) behaviors and positive child healthy behaviors and positive child	Sub-Objectives	Key Performance Indicator(s)	Target
communities in focus areas and target focus areas and target population group	Strengthen Primary Health Care (PHC) activities	Increased adoption of healthy behaviors and positive child development practices by communities in focus areas and target population groups Number of school health programs implemented Number of Strategic Planned immunization outreaches carried out Number of community dialogues	 15% Annual increments in adoption of healthy behaviors and positive child development practices by communities in focus areas and target population groups 100 School health programmes implemented 200 Strategic Planned Immunization Outreaches carried out

MODELS/APPROACHES TO COORDINATE CONTROL OF COMMUNICABLE, NCD and NTDs DISEASES

Kumi Hospital shall be evolving on how they operate and will continue to act in a flexible way to allow us to deliver our mission in the future. We will take account of system and organisational change over time to sustain the success of our collective work with partners, whilst noting that our combined success is only as good as the delivery of each partner or partner organisation. Kumi Hospital envisions where everyone has the opportunity for a healthy life, free from the preventable suffering, stigma, disability and death caused by non-communicable diseases.

Kumi Hospital Communicable, Non-Communicable and NTD approach in this strategy is organised around six core functions that describe the breadth of our day-to-day work, and are the foundations required to achieve our organisational mission. These are not to be viewed in isolation, as each core function contributes to the success of the others. Collectively, these functions represent our core enduring offer through which our 6 priorities for 2022-2026 will be delivered.

Our intervention will focus on:

- Innovating strategies to make malaria treatment more accessible to the communities
- Conduct Health Education on Prevention and control of HIV/AIDS, TB, Malaria and Water-borne diseases
- Prevent water -borne diseases
- Identify and collaborate with other sectors and partners with an interest in disease prevention

Prevent & Protect	Detect & Control	Prepare & Respond	Build & Apply	Advise & Collaborate	Generate & Share		
against infectious diseases	Infectious and non-infectious diseases	to infectious and Non-infectious disease threats	evidence through research	with our health protection system partners	evidence and advice		
Enablers: Our enduring core offer Where we will focus our effort Systems, capabilities and activities that will ensure the delivery of our strategy							
Build, support and retain a skilled and resilient workforce							
Build our knowl	Build our knowledge of, and influence within the health protection and wider health system						
Achieve sustainable income and finances							
	Enhance our incident response, surveillance and laboratory infrastructure, and develop specialist and scientific computing capability						

Create, share, use and manage our knowledge and evidence

Procure and distribute commodities for prevention of communicable diseases, and Non-communicable diseases

Sub-Objectives	Key Per	Key Performance Indicator(s)		Target			
Coordinate control of	 Number 	s of Communic	cable, Non-		1000	Communicable,	Non-
communicable and Non-	Commu	nicable cases	managed		Comm	unicable cases	managed
Communicable diseases	successf	successfully in Kumi Hospital		successfully in Kumi Hospital		ital	

Models/Approaches Contribute to Reproductive, Maternal, Newborn, Child and Adolescent Health

RMNCAH conditions currently account for over 60% of Years of Life Lost in Uganda, and the Uganda investments case RMNCAH further notes that conditions thus constitute a major public health problem. Kumi Hospital Strategic Plans to focus on addressing the major causes of maternal deaths are preventable with the three leading causes being haemorrhage, obstructed labour and complications from abortion amongst the most affected population who face an almost 28% of maternal deaths in Uganda which occurs in young women aged 15 - 24 years.

Our Key interventions will be focused on:

- Strengthening management for improved RMNCAH outcomes in the Hospital
- Scaling up community-based service delivery;
- Developing staff capacity through skills enhancement
- Seeking for funding to support the RMNCAH through results/input-based financing mechanism.

Kumi Hospital will address the major constraints to improving RMNCAH outcomes, largely by focusing on the key cross-cutting issues in Kumi Hospital:

- Availability of essential commodity inputs such as drugs, vaccines and supplies
- Availability of human resources for the delivery of high impact, evidence based interventions
- Geographical accessibility of facility, outreach and community services to the clients
- Initial utilization of multi-contact health services that can also be influenced by the financial accessibility, knowledge and perception of the service
- Timely continuous utilization as per recommended contacts for services
- Effective, quality coverage of the population in need of an intervention who have received adequate components of that intervention in a timely and complete manner

Key to these challenges arising and affecting delivery of RMNCAH, Kumi Hospital intends to focus on investing in human resource, quality of care, supply chain management, and demand generation by ensuring mutual accountability (effective, sound public system that is responsive to people's needs, supports information sharing, permit scrutiny so that citizens can see exactly where their resources are spent), and producing data that is at the heart of accountability, Refurbishments and re-equipping, adequate resources to finance the delivery of essential health services in line with Health Sector Development Strategic Plans, increase effective pooling and strengthen purchasing mechanisms that ensure the attainment of equitable and efficient resource allocation and delivery of quality health services by 2026, strengthen existing institutional arrangements that will ensure effective accountability and transparency in resource management and use, strengthen mechanisms for harmonized and effective partnerships in financing and delivery of health services, ensuring that referral systems are functional, Employing the Reaching Every Community (REC) model to strengthen ties between VHTs and health facilities, Coordinating district focal points for various programmes (e.g., PMTCT) to ensure synergies between efforts.

Interventions and packages of services for improving maternal, newborn, child and adolescent health along the continuum of care to be delivered at all levels of care

Levels of Care	Reproductive health	Maternal Health	New Born Health	Child Health	Adolescent Health
Hospital	 Emergency care Case management for STIs/HIV Elective abortion Post-abortion care Treatment of medical conditions, side effects and/or complications 	 Emergency obstetric care Skilled care at birth Management of complications of pregnancy, childbirth and immediate postpartum period, including caesarean section, blood transfusion, hysterectomy Induction/augment ation of labour PMTCT 	 Newborn resuscitation Management of a newborn with severe problems 	 Emergency care Case management of severe illness 	 Emergency care Case management for STIs/HIV Elective abortion Post- abortion care Treatment of medical conditions, side effects and/or complications
Out-Patient Health Facility	 Counselling and provision of the full range of family Planning methods Prevention and management of STIs/HIV Elective abortion Referral 	 Monitoring of progress of pregnancy and assessment of maternal and foetal well-being including nutritional status (4 antenatal care visits) Detection of problems complicating pregnancy Referral 	 Newborn resuscitation Rooming in Exclusive breastfeeding Infection prophylaxis and treatment Immunization KMC Identification, initial management and referral of newborns with any sign of severe illness Referral 	 Integrated management of childhood illness Immunization Malaria insecticide- treated bed nets Nutrition, including vitamin A and zinc Care of children with HIV Referral 	 Youth-friendly health services providing comprehensive package of services including modern/safe contraception, prevention of HIV/AIDS, STIs, violence (and consequences), smoking, unwanted pregnancies and malnutrition Case management of common illnesses Referral
Community	 Health promotion and education Adolescent and pre- pregnancy nutrition Distribution of methods of contraception, including emergency contraception Identification of signs of domestic and sexual violence and referral Prevention of STI/HIV 	 Information and counselling Birth Planning, advice on labour, danger signs and emergency preparedness Education about clean delivery, and early care for neonates including warmth, immediate and exclusive breastfeeding 	 Promotion and support for: Exclusive breastfeeding. Thermal protection. Infection prevention. Care of a small baby. Recognition of problems, illness and timely care seeking, routine care visits. birth registration 	 Promotion and support for: Breastfeeding and appropriate complementary feeding. Recognition of problems, illness and timely care seeking. Identification and referral of children with signs of severe illness. identification and management of diarrhoea, pneumonia and malaria 	 Health promotion and education Nutrition Prevention of violence, smoking, HIV/AIDS and STIs, unwanted pregnancies, malnutrition and community support for youth-friendly health services

Uganda Minimum Healthcare Package-The core package of services to achieve the objectives are:

Packages	Direct Support at Facility	Service Support
Core package	Short term family Planning methods, Integrated Community Case Management (ICCM), immunization, Misoprostol, KMC, antibiotics for newborn sepsis, pregnancy testing, counselling and birth preparedness, focused ANC (HIV Testing, IPT, FP, LLIN distribution, Iron/Folate) and PNC	Referral for delivery/PAC/FP/adolescent care, follow up HIV exposed babies, linkages for adolescent/SGBV/HIV to BCC, sexuality and life skills education, socio-support, BDR, home visits for interpersonal communication on improving household and community RMNCAH practices (including household sanitation and hygiene)6, compliance support and tracking defaulters, counselling and birth preparedness, demand creation for family Planning, adolescent responsive services at facility, school and community level
Expanded package	All the above plus Long term family Planning methods, Integrated Management of Neonatal and Childhood Illnesses (IMNCI), PAC, Basic Emergency Obstetric and Newborn Care (bEmONC), PMTCT, portable ultrasound, Anti- Retroviral Therapy (ART), adolescent friendly package of health services to include BCC and IEC material distribution	Implement health extension and micro-Planned integrated
Comprehensive Package	cEmONC, inpatient management of severe newborn and child illnesses, permanent Contraception	Ambulance Services, Maternal Perinatal Death Surveillance and Response (MPDSR)

Our Performance Indicators

Sub-Objectives	Key Performance Indicator(s)	Target
Contribute to reproductive, maternal, newborn, child and adolescent health outcomes	 Reducing Maternal Mortality Ratio Proportion of births occurring in health facilities Proportion of pregnant women who receive a minimum of four antenatal visits Ending preventable U5 Mortality in Kumi in the Catchment Area Ending Preventable Newborn Deaths in Catchment Area Reducing Malnutrition in the Catchment areas of Kumi Hospital 	 Reducing Maternal Mortality Ratios to 70/100,000 100% of births in the Catchment areas occurring in Hospital 90% of pregnant women receive a minimum of four antenatal visits in the Catchment areas of Kumi Hospital Ending preventable U5 Mortality in Kumi Ending Preventable Newborn Deaths in Catchment Area 95% reduction in Malnutrition in Catchment Areas of Kumi Hospital

Inclusive Eye Health and Community Based Rehabilitation Services

Kumi Hospital 2022-2026 strategic Plan will focus on ensuring an inclusive community in Teso sub region and beyond in which all persons with disabilities enjoy their human rights and achieve their full potential. This is based on an overarching vision of being a Center of Excellence in Provision of Quality and Compassionate Patient-Centered Care, which is driven by over 15 principles. Kumi Hospital aims to make all of its health programmes fully accessible to and equitably inclusive of people with disabilities. Overall Kumi Hospital will be working to improve the quality of eye health and rehabilitative services in Teso subregion and beyond, by 2026.

Sub-Objectives	Key Performance Indicator(s)	Target
To improve the Quality of Eye health and rehabilitative services in Teso sub-region by 2026	 %age reduction of avoidable visual impairment and blindness by 2026 in Teso Sub-Region %age of People with disabilities are empowered to exercise their rights in Teso 	 10 %age reduction of avoidable visual impairment and blindness by 2026 in Teso Sub-Region 80 %age of People with disabilities are empowered to exercise their rights in Teso

Community Based Rehabilitation (CBR)

Persons with disability constitute the world's largest minority group and are often among the most marginalised in the community

Our overarching objectives will be to seek funding and partnerships that will support people with disabilities living in Teso Sub-Region to be appropriately supported in health/medical services access and to mobilize themselves for mutual support, to raise awareness, and to realise their rights and needs, ensure that people with disabilities and their families are able to access person-centred support that enables their participation in family, economic and community life. Our community arm promoting the creation of inclusive health, education, livelihood, and social systems, delivery of high quality emergency services in inclusive health (particularly mental health support and physical rehabilitation). Core investments in this area is required to meet the needs of PWDs in the Teso-Sub region and beyond.

Sub-Objectives	Key Performance Indicator(s)	Target
To create awareness on disability	■ Increased awareness on	■ 80% awareness on disability
rights including access to	disability rights and equitable	rights and equitable access to
health/medical services and equitable	access to inclusive economic and	inclusive economic and
access to inclusive economic and	education opportunities by	education opportunities by
education opportunities by PWDs in	PWDs in Teso Sub-Region by	PWDs in Teso Sub-Region by
Teso Sub-Region by 2026	2026.	2026

Eye Health

Kumi Hospital has a long and proud history of promoting eye health in Teso Sub-Region. Our focus in relation to universal access or universal coverage for eye health – means that all people have access to quality eye health services, regardless of their gender, disability, age, ethnicity and Socio-Economic status, at a cost which is affordable.

To achieve the mandate of promoting eye health in Teso sub-region, Kumi Hospital will strengthen partnerships and governance for eye health care and disability mainstreaming. To respond to the imperative of eliminating the burden of blinding neglected tropical diseases, Kumi Hospital will directly work with partners to scale up proven approaches NTDs, and our focus for 2022-2026 is to collaborate with partners willing to support Kumi Hospital implement projects and programmes that will aim at addressing irreversible visual impairment within the health services.

Sub-Objectives	Key Performance Indicator(s)	Target	
To reduce avoidable visual	■ %age Reduction in avoidable	■ %age of persons with visu	al
impairment and blindness in	visual impairment and	impairment and disability who receive	ve
Teso sub region by % by the end	blindness by 2026 in Teso Sub	quality curative and rehabilitative	
of 2026	Region.	services in Teso Sub-Region	

Establish Kumi Hospital School of Health Sciences (KHSHS).



Kumi Hospital intends to invest in school of health sciences. The main objective is to: provide training opportunities to students in order to enable them offer quality Health Care to the population. The goal is to produce quality, competent and dedicated health workers of various categories for the region. The proposed mission: To provide affordable, quality and sustainable training of health care professionals of high integrity in witness to the church's concern for all.

The proposed School of Health Sciences will share the same governance and ownership, more or less as the training department of the Hospital.

- 1. **School Board**: The Institute will establish a Training and Teaching Committee of the Board (School Board) who is charged with the duty of examining and reporting to the plenary on the activity and performance of the Hospital's Health training Institute, the teaching and training programmes. It also proposes to the Board policies and decisions regarding the school.
- 2. Academic Board: The Institute will establish an Academic Board which will be the internal governing body of the Institute and will be chaired by the Hospital Executive Director. Other members will be the Principal of the Institute, the Academic Registrars, the Hospital Senior Nursing Officer, the Head of the Hospital Clinical Laboratory, the Hospital Chaplain, the Senior Hospital Administrator and a Students Representatives
- 3. School Administration: The Principal of the school will be responsible person for the day to day operations of the Institute.

The hospital has invested in phase one, which has involved the renovation of the proposed school complex, using its local resources to gather some of the necessary items to complete and operationalize the training school.

To functionalise the school, Kumi Hospital intends to invest in accommodation facilities within the school premises. It is a must for all Certificate Students to reside within the school hostel, but it is optional for Diploma and Post Basic Students.

In the start, school is expected to offer four courses in Certificate in Enrolled Nursing and Certificate in Enrolled Midwifery, and progress to, Diploma Nursing, Diploma in Midwifery. Other courses will be started in due course based on availability of resources.

To functionalise the school, a structured affordable fee to be formalized by management shall be agreed upon and established.

To achieve this mandate, Kumi Hospital will collaboration with the Uganda Institute of Allied Health and Management Sciences, Mulago (Anaesthetist Officer training), and with Gulu Faculty of Medicine for training of Medical Doctors, Makerere University School of Medicine, Mbarara University and other training and accreditation institutions as well institutions of collaboration for students attachments.

Sub-Objectives	Key Performance Indicator(s)	Target
Establish Kumi Hospital School		
of Health Sciences	Kumi Hospital School of Health Sciences	Hospital School of Health Sciences

Research, Innovation and Knowledge Management

Kumi Hospital intends to invest in shaping the research agenda and stimulating the generation, translation and dissemination of knowledge. **The Key approaches to achieve this are:**

- Developing a prioritized research agenda in support of integrated and people-centred health services at global and regional levels, and mobilize resources to help support the realization of such a research agenda
- Seeking support from MoH and Universities to enable Kumi Hospital to develop and pursue their own implementation research agenda through sharing of knowledge, materials and technical assistance
- Sharing knowledge about people-centred and integrated services, through hosting regional and global meetings on the subject.
- Collaborating with partners to summarize and share emerging evidence about strategies to promote people-centred and integrated services, particularly in fragile states and low- and middle-income country contexts, where the evidence is most scarce.
- Appropriate Medicine", whereby the patient is prescribed only the investigations and the treatment that are proved to have an impact on the outcome.
- Kumi Hospital could model innovations in health service provision based on ethos and quality, good clinical and managerial approach and diversity of partnerships. Research could disseminate successful interventions across wide areas.
- Creating a web-platform to support the promotion of the strategy including access to a range of evidence, case examples, support tools and communities of practice.
- Strengthen QI knowledge management and Information sharing
- Promote and conduct operational research for evidence based decision making

Sub-Objectives		Key Performance In	ndicator(s)	Ta	ırget	
Research, Innovation	and	■ Number of	Researches		20 Independe	nt Researches
knowledge management		conducted and Management Proo by service areas	U		conducted an management proc outstanding resear services areas.	0

OBJECTIVE TWO

SO2: INVESTMENTS TO ENDEAVOR FOR TOP DECILE PERFORMANCE IN SELECT MEASURES RELATED TO QUALITY HEALTH SERVICES ACCESS, PATIENT SAFETY AND PATIENT EXPERIENCE BY THE END OF 2026

MSO2: All people accessing healthcare services in Kumi Hospital attain the best possible health outcomes and improved consumer acceptability and satisfaction.

Kumi Hospital would like to establish and maintaining the quality of services, in accordance with the World Health Organisation's definition of quality:

"...... the proper performance (according to standards) of interventions that are known to be safe, that are affordable to the society in question, and that have the ability to produce an impact on mortality, morbidity, disability, and malnutrition"

According to WHO, the quality of services can be viewed through many different lenses, depending on the priorities of different stakeholders such as:

- 1. Clients often emphasize the human aspects of care—respectful treatment, privacy and confidentiality, information, and counseling—in addition to safety, convenient locations and hours, reasonable waiting times, affordable cost, and a clean, comfortable facility
- 2. Providers tend to highlight technical competence, infrastructure, and logistical support. Managers might stress management systems—especially logistics and information systems
- 3. Policymakers and donors take the broader view, which WHO defines as "the proper performance (according to standards) of interventions that are known to be safe, that are affordable to the society in question, and that have the ability to produce an impact on mortality, morbidity, disability, and malnutrition"

Model/Approach to Improve the Quality of Care Offered in the Hospital through Adoption of: Patient Centred Care, Caring Attitude, Customer Care, and Appropriateness of Care

Kumi Hospital will make investments to endeavour for top decile performance in select measures related to quality, patient safety and patient experience by the end of 2026. Quality Care for this Strategic Plan is the care that benefits the patient, the patient is happy to receive and the caregiver happy to provide. Kumi Hospital aims at increasingly improving patient care and satisfaction; that of all patients equally, including those who access preferentially subsidised services.

Therefore, care should have first a technical quality in its selection and provision; it should be understood and accepted by the patient; it should cause as little inconvenience as possible to the patient and the inconveniences (including pain) must be reduced as much as possible. The dignity and the emotional wellbeing of the patient must always be protected.

Very many factors must be taken into account together, to achieve this result: adequate facilities, knowledge and skills, hospital organization and workflows, focused on achieving not only a favourable outcome, but also patient satisfaction. At the same time, caregivers at all levels must feel comfortable with the assigned task and enhanced by a team-work approach, which allows them to share tasks, but also earn credit for work well done. The teams should have a problem solving-approach and their combined achievement will form the institutional repository of knowledge, skills and human wisdom to be transmitted to the new generations approaching the Hospital for training, work or experience.

The Strategic Plan will elaborate on a few of the determinants of quality of care, but it is aware that producing quality will be mainly the output from team initiatives, within the limits of a strictly scientific approach. Equally important will be rigorous monitoring and the clear chain of command, which must be embedded in every health activity.

The current management of Kumi Hospital is aware that it is a long-term endeavour that goes beyond the duration of this Strategic Plan and emphasis will be more on durable trends than on immediate results. Quality of care is often identified by the public and sometimes by health workers, as more specialisation and technology, but there is much more to it. Good general patient and customer is as important as advancement in specialist services (the latter preferably to be restricted to the areas where Kumi Hospital already has a competitive advantage).

Core Approaches to be adopted are:

- Employing Results Based Financing/Performance Based Financing/Output Based Mechanism for improving the quality and increasing the use of health services by setting performance goals based on agreed-upon standards and indicators.
- The improvement collaborative approach. This methodology is designed to rapidly achieve significant—often dramatic—improvements in a focused technical area such as treatment of multidrug-resistant tuberculosis, provision of neonatal care, or management of a chronic disease
- Partnership Defined Quality (PDQ). PDQ is an easy-to-use tool that can bridge the gap in perceptions of health care providers and community members and make health care more responsive to the needs of communities. It engages communities in defining, implementing, and monitoring the quality-improvement process while helping eliminate social and cultural barriers to better health, strengthening the capacity of communities to improve health, and creating a mechanism for rapid mobilization around health priorities.
- **COPE** (client-oriented, provider-efficient services). COPE is a quality-improvement process that enables service providers and other staff at a health facility to work with their supervisors to assess their work productivity and interventions, using self-assessment services guidelines based on international standards and known best practices.
- Standards-Based Management and Recognition (SBM-R). This is a practical, proactive management approach for improving the performance and quality of health services.

Quality Improvement (QI) and Quality Assurance⁵ Framework rolled out and implemented in Kumi Hospital. Kumi Hospital will Support quality management activities and practices to achieve the highest quality of care in the country, with key intervention to address Quality of Services and Care and these are:

⁵ Quality assurance (QA) is a familiar term to most health managers and providers. It implies a planned, systematic approach with standards, protocols, and procedures that enable you, as a health manager or provider, to bring high-quality health services to your clients, continuously and within the resources available to you

- Enhance commitment and leadership capacity in governance, leadership and management for QI in Kumi Hospital
- Harmonize and integrate QI approaches into all service delivery areas and at all levels in the Hospital
- Strengthen Planning and resource allocation for QI interventions.
- Review and roll out implementation of the PIP at all departments of the Hospital
- Increase awareness on time spent and saved from quality projects and how to prioritize for return on investment
- Strengthen the supply chain management system.
- Increase availability and use of service delivery standards, evidence-based clinical standards, guidelines, SOPs and tools
- Conduct health facility assessment initiatives e.g. HFQAP, SLMTA, clinical / program assessment etc
- Improve infection prevention and control (IPC) mechanisms
- Strengthen and promote patient safety practices
- Strengthen involvement of clients and community in patient management and care
- Promote transparency and accountability of the health providers
- Strengthen monitoring and evaluation for QI interventions

Sub-Objectives	Key Performance Indicator(s)	Target
Improve the quality of care offered in the	 Improvement in Overall Quality of related 	■ <u>98%</u>
hospital through adoption of: patient	Care in Kumi Hospital in (OPD Emergency,	Improvement
centred care, caring attitude, customer	Laboratory and Imaging Department,	in Overal
care, and appropriateness of care	Operation Theatre, Anesthesia and Related	Quality of
Improve patient safety in the Hospital	Indicators, Hospital Infection Rates, Human	Related
Customer Care and Technical Quality	Resources, RMNCAH, TB/Leprosy,	Services in
	Malaria, HIV/AIDS, eMTCT, Nutrition, etc	Kumi Hospital.

MODEL/ APPROACH TO IMPROVE HEALTH INFORMATION AND DATA MANAGEMENT

Information and information exchange are crucial to the delivery of care on all levels of the health care delivery system—the patient, the care team, the health care organization, and the encompassing politicaleconomic environment. Within the development community a strong and growing emphasis on producing quantifiable results has increased attention to, and interest in, M&E. There is much discussion about resultsbased Planning, results frameworks, and results teams. It is widely accepted that health managers and service providers need better access to reliable information and better ways to use this information to monitor performance and manage services. The effective management of the entire health system depends on the appropriate use of timely and accurate information by personnel at all levels.

This use of information depends, in turn, on the ability of the HIS to generate useful information.

- Improving the quality and use of the existing Ministry of Health HIS
- Improving decision making through timely feedback on health system performance (such as through summary data dashboards or routine data review meetings).
- To strengthen HIS and improve decision making and to target different levels of the health system, including health managers, clinicians, and the community.
- Link information with improved health system operations.
- Maximize creative, multidisciplinary discovery across the research continuum, emphasizing value, data science and synergy.

Sub-Objectives	Key Indicator(Performance s)	Та	arget
Improve Health Information Systems and Data Management	 Effective data management and utilization for decision making in Kumi Hospital 			Functional data management systems and utilization for decision making

OBJECTIVE THREE

SO3: IMPROVE FINANCIAL MANAGEMENT FOR THE HOSPITAL

MSO3: Kumi Hospital enables equitable, efficient and sustainable mobilization of adequate resources to finance the delivery of essential health services in line with Strategic Plan.

The Hospital will be considered sustainable when the operational deficit of the financial year does not exceed the foreign support secured for the year (break-even), without drawing on support scheduled for later periods.

To Reduce Non-Critical Expenditure in the Hospital

To achieve the reduction on non-critical expenditure in the hospital, this will involve:

- Implementing sound accounting and financial management principles to safeguard the scarce resources and respond to changing economic conditions.
- Applying strong internal control mechanisms to guard against misuse, misappropriation or fraud.
- Ensuring compliance to well-documented and developed policies and procedures to support the workforce and demonstrate fiduciary responsibility and stewardship to funders.
- Management scanning for risks that might impact the financial health of the organization as well as for
 opportunities to generate support and funding for the organization's mission.
- Focusing financial management actions so they reflect the organization's mission- determine priorities related to generating funding, investing in staff or equipment, or managing expenses to achieve the objectives of the organization
- Aligning Kumi Hospital financial goals and expectations, operational systems, and practices with its mission and vision.
- Orienting, training and inspiring staff to comply with policies and procedures related to financial dealings, wise use of resources, and avoid conflicts of interest and unethical behavior related to financial transactions.
- Management demonstrating honesty and integrity in the use of the organization's resources as dictated by the values of the organisation
- Carrying out a variety of Strategic Planning activities, such as developing operating annual budgets for the current year and projections for future years based on the organization's Strategic Plans
- Senior Hospital Management re-organizing systems, structures, work processes and policies.
- Finance managers ensuring compliance to the established policies and practices.
- The Board and particularly the Finance Committee of the Board of Governor monitoring the financial activities of the organization, evaluating the results, and identifying needed changes to work processes and procedures, budgets, or planned uses of resources.

To reduce non-critical Reduction of non-critical expenditure in the hospital in the Hospital 100% reduce expenditure in	ion of non-critical the Hospital

To Improve Financial Management for the Hospital

- Reinforcement of administrative controls, the Hospital will aim at creating a "Social pressure" that protects the patients from subtraction of resources that are meant for them, through sensitisation initiatives.
- Appointment of a substantive Internal Auditor for the hospital
- Opening and depositing funds on reserve fund accounts for all key capital items
- Investing annual surpluses in high-return ventures (e.g. treasury bills and fixed deposit accounts)

Sub-Objectives	Key Performance Indicator(s)	Target
To improve financial management for the hospital	 Accounting package installed with a Backup systems in place Number of staff trained in use and maintenance of the installed accounting package 	 Functional Accounting package installed with a backup system 5 staff trained in use and maintenance of the installed accounting package

Increasing Local Revenues from Different Sources for Hospital Activities

The establishment of the National Health Insurance Scheme as a health financing mechanism, which is in advanced Planning stages, will gradually cover more people. For Kumi Hospital to achieve its Objectives will embark on:

- Training opportunities to specialist cadres for a fee.
- Explore if research on "appropriate medicine" and on "hospital sustainability" can attract research funds, since these topics could become central for many donors in the next few years.
- Creating an alumni group of students and professionals (both Ugandan and foreign) who have worked in Kumi Hospital, or mobilising the support of the local Clergy for a Kumi Hospital Day in the churches.
- Regularly review user fees in the hospital to ensure proper costing and revenue collection
- Ensuring full time availability of a medical officer for private ward patients on weekends.
- Soliciting for capital donations (e.g. medical and office equipment) from alumni and other local individuals and corporate friends of the hospital
- Build capacity for the hospital in preparation for the proposed National Health Insurance Scheme (NHIS)
- Advocating for an increase of the PHC Conditional Grant (PHC-CG) from the central government Establish Associations that can support the hospital such as: 1) Born or Delivered) in Kumi Hospital Ongino Association to support Maternity Services, 2) Friends of Kumi Hospital to support general services.

Sub-Objectives	Key Performance Indicator(s) Target
To increase local revenues from different sources for hospital activities	 Increasing local revenues from different sources for hospital activities 9 billion increased local revenues from different sources for hospital activities

To Create Additional Sources of Revenues for the Hospital (Income Generating Activities)

To create additional sources of revenues for the hospital, and deliver on the objectives, Kumi Hospital will:

- Develop private services within the limit of their ability to contribute to the Hospital finances and appeal, making sure that they do not subtract operational resources from the standard services.
- Improve its capacity in project management and grants solicitation and management, especially with donors that have a local or regional office through proposal writing

- Mobilize for an endowment fund for diversification and investing in an income generating venture such as students hostels or building a hospital restaurant, (Agroforestry, Chairs and Tents, Tipper trucks, cesspool emptier, bakery, conference facilities, expanding guest house, animals etc
- Identification of external partners who can support the hospital financially (to consider friends, research institutions, NGOs, charitable organizations, foreign governments, banks, bilateral and multilateral agencies)
- Soliciting for in-kind support from the government and external partners e.g. staff secondment, volunteer health workers etc.
- Reviewing the financial feasibility of taking bank loans for critical capital investments e.g. construction and expansion of the school of health
- Fast-track the establishment of an oxygen Plant not only to meet the internal needs of oxygen use by Kumi Hospital but also to produce excess for sale to other public and private health
- Fast-track the establishment of a modern mortuary Plant (with refrigeration services and capable of storing up 6 bodies) not only to meet the internal use by Kumi Hospital but also to produce to offer storage funeral services to individuals and other private funeral service providers at a few to generate income for the hospital
- To establish and affiliate health facility in Asamuk in Amuria District, with some services designated service for fees

Sub-Objectives	Key Indicator(s)	Performance	Target
To create additional sources of revenues for the hospital (Income Generating Activities)	 Additional revenues (Income activities) 	sources of for the hospital generating	

Streamlining Procurement and Contracting Procedures

To deliver optimal procurement solutions to support the effective delivery Kumi Hospital mandate in service provision. This will be achieved through effective competition among qualified suppliers and service providers based on a vendor management framework, transparency and equal treatment with due consideration for environmental and social responsibility and overall accountability. A procurement policy shall be reviewed that will drive the achievement of the current Strategic Plan with 3 pillars:

Pillar 1: Enhancing risk mitigation and compliance – To reduce the financial and reputational risks associated with procuring services by limiting the opportunity for fraud or misconduct and preventing deficiencies in quality through a risk-mitigation model. The procurement of goods and services presents minimal risk, since purchasing is centralized through the procurement officer in major offices by observing the following principles: Segregation of duties, Fair competition, Transparency, Control, and Monitoring of Qualities.

Pillar 2: Increasing cost–effectiveness – To further reduce costs and manage supply risk in the procurement of goods and services and in logistics through product category management

Pillar 3: Enhancing operational excellence – To enhance operational capability by developing and improving systems and developing staff.

Key intervention Strategies that shall be guided by the Pills are:

- To ensure the harmonized implementation of policy and strategy, Kumi Hospital will create the function of procurement policy and strategy
- Putting in place a Procurement Officer, Procurement Committee, Terms of Reference for the Procurement Committee and Procument Policy.

- Adoption of Information technology tools and business processes must be in place to facilitate the implementation of these strategies. Information technology tools will be used for automation to improve efficiency and data analysis to facilitate initiatives as well as effective communication with stakeholders.
 - Reviewing and standardizing the mandatory bidding threshold to extend the coverage of effective control
 - o Enhancing data analysis and reporting using developed technology for procurement
 - Commodity coding structure to support the business intelligence with improved data quality
 - Reducing manual interventions and judgement by imposing system controls to prevent noncompliance and oversight and to visualize exceptions
 - Exercising the principle of transparency in procurement by publicly sharing information, such as tender results, procedures, codes of conduct and business opportunities
 - Reviewing purchase prices every six months
 - o Issuing Local Purchase Orders on all purchases
 - Raising Goods Received Note on all purchases
 - Inspecting all the items purchased each time of delivery
 - Taking stock monthly
 - o Conducting medicines and supplies stock-out checking quarterly
- Reinforcing human resources and enhancing the expertise of the personnel involved in procurement activities is essential to increase procurement capacity and rebuild capability to enable procurement experts to contribute to implementing robust procurement fundamentals. This will be achieved through the following tactics:
 - Developing standardized procurement training
 - Implementing compliance network management to enhance communication among compliance functions (such as compliance units and contract review committees) in sharing experiences and best practices;
 - increasing capacity and rebuilding capability in the procurement network to enable procurement experts to contribute to mitigating risk for the procurement of services and procurement of goods

Sub-Objectives	Key Performance Indicator(s)	Target
Streamlining procurement and contracting procedures	 Tendering Committee in place Number of inspections carried out 	 1 Tendering Committee in place 20 Quarterly Number of inspections carried out in 5 Years

OBJECTIVE FOUR

SO4:IMPROVEHUMANRESOURCESMANAGEMENT IN KUMI HOSPITAL

MSO4: A developed, maintained a well-performing appropriately skilled health workforce, deployed and accessible at all levels of the health care system, providing quality health services

Staff at all levels in Kumi Hospital will be involved in the implementation of the Strategic Plan. The objectives must be explained, discussed and internalized by all hospital employees, and how to achieve the objectives should be the result of shared decisions. Ideally, the staff should see the success of the Strategic Plan as a personal challenge, thus, the Human Resources policy will be crucial for the success of the Strategic Plan.

There is a need for the hospital to have an employment manual that spells out rights and duties of the employee, and should be updated regularly to capture the changes in laws of the country and globally, so that it captures and maintains its traditional attention for staff rights and welfare.

Kumi Hospital will ensure the relationship between the Hospital and its staff will be based on clear job descriptions, fair and transparent assessment, clear and transparent explanation for job changes, and a quick and just disciplinary system, maintain the perception of the employee as a person, taking into consideration as much as possible, individual needs, and the specific living conditions of local communities.

The hospital intends to nurture the sense of purpose and of responsibility in all hospital functions, not only in clinical work, through training and a team approach.

To Improve the Working and Welfare Terms and Conditions for Staff

Kumi Hospital will adopt multiple intervention strategies and approaches which will include: Improvement of performance of health workers in rural areas, by direct support to pre-service training, in-service training, retention schemes, staff motivation, changes in skills mix, and Strengthening knowledge and skills of local health managers for implementing HRH policy and negotiation with other organisations and authorities on HRH policy and resource allocation, Lobby/advocate with respect to HRH problems and exchange on knowledge and experiences regarding HRH interventions and policies, Improve living conditions, for instance by providing housing; Address job satisfaction by improving working conditions, HRM practices, offering financial and non-financial incentives, make possible professional development, include activities and regulations to mitigate the impact of HIV/AIDS at the workplace, Develop rural training and bonding schemes; Address the needs of specific groups: allow flexible working hours for health service providers with young children or sick relatives; offer specific arrangements for HIV-positive health care providers.

Sub-Objectives	Key Performance Indicator(s)	Target
To improve the working and	 Improved working and welfare 	■ 99% Staffs report improved
welfare terms and conditions for	terms and conditions for Staff in	working and welfare terms and
Staff	Kumi Hospital	conditions for Staff

To Develop Different Skills among Staff through Specific Professional Training and Development Programmes

Kumi Hospital Human Resources department and management will adopt a performance management, continuous professional development and support supervision Senior Management and in charges to develop the skills of staffs of Kumi Hospital. The key approaches that shall be sued to are:

- Training in team development is necessary prior to developing retention strategies, in order to produce a shared vision. A capacity for innovation is also required, and diversify funding sources to support research and education.
- Implement talent management solutions as an investment in the success of our people.
- Streamline recruitment processes to address critical needs for skilled labour
- Create diversified educational tracks that cultivate the creativity of learners and trainees.
- Foster opportunities for cross-disciplinary bioscience training.
- Training needs assessment and plan to address the gaps for capacity building
- Establishing a policy on "Trans-generational" relationship between the hospital and staff (to ensure that staff are committed for a long term, and to reward staff who have been committed to the hospital in some special ways including serving the hospital for a very long time)
- Identifying and supporting children of long-serving staff in their education (e.g. with recommendation for scholarship by donors, offering them hospital scholarships, preference in recruitment as hospital staff etc.)
- Searching for and identifying short courses for which staff of the hospital can be sent, in order to develop local capacity
- Providing staff with opportunities for sharing information especially on return from courses in which they represented the hospital (including exchange visits)
- Developing a policy on mentoring for the hospital (NB: This may need training of staff in mentoring)
- Coaching of team members is required, as well as time to reflect on function and progress. Training the managers of these various cadres is necessary, so that they become coaches and facilitators and can help build and implement communication and information channels. Managers also need to accept that decision-making occurs at a lower level. Continuous provision of incentives and rewards is required in order to ensure teamwork and Continuous Professional Development (CPDs). Obtaining appropriate skills, knowledge and attitudes (professional development through training and other learning methods like is key to staffs competency requirements.

Sub-Objectives	Key Performance Indicator(s)	Target
To develop different skills among staff through specific professional training and development programmes	 Improved Competency 	 100% of Kumi Hospital Staffs have improved competency.

To Improve Staff Requirement for Kumi Hospital Basing on Actual Workload Status

The interventions that Kumi Hospital will employ to address actual work load status in the hospital are:

- Improving working practices by developing innovative roster guidelines to encompass individual needs and by introducing a framework to adapt working practices and reduce high workloads
- Implementing quality assurance (QA) or performance improvement (PI) strategies
- Improving human resources management
- Build capacity for use of Workload Indicators of Staffing Needs (WISN) methodology
- Identify and mitigate barriers that contribute to a loss of productivity across departments in the Hospital
- Assess staffing needs based on work load.

- Determining the actual staffing requirements basing on the workload levels using a suitable approach (e.g. WISN method)
- Reorganize and distribute available staff equitably on the basis of workload e.g. during roster of nurses

Sub-Objectives	Key Performance Indicator(s)	Target
To improve staff requirement for the hospital basing on actual workload status	 Increased productivity/ responsiveness Improved motivation and job satisfaction Improved accountability to clients and managers 	 98% increased productivity/responsiveness of staffs 100% of staffs are motivated and job satisfied 98% Improved accountability to clients and managers

To Improve Staff Retention within Kumi Hospital

Adequate and appropriate Human Resources for Health (HRH) recruited, retained and well managed in Kumi Hospital for health service delivery through good governance, recruitment of students from rural areas, continuing education, bonding and compulsory service and the provision of incentives.

Key Interventions to adopt shall be at 3 levels:

- Macro level: *Health system (Support system/enabling/job-related):* Strategic Planning, deployment and use of skills mix, Recruitment from rural areas, Adapting curricula and training to rural areas, Non-financial and financial incentives/ bonding system)
- Micro level: Health facility ((Support system/enabling/job-related): Improving job satisfaction, Improving physical working conditions, Improving HRM and teamwork, Providing local financial and non-financial incentives, Offering opportunities for professional advancement.
- Individual level: Health workers Health facility ((Support system/enabling): Improving living conditions, Providing security, Developing/implementing: Gender-sensitive strategies, Strategies aimed at specific age groups

Sub-Objectives	Key Performance Indicator(s)	Target
To improve staff retention within Kumi Hospital	 Increased availability Improved retention Reduced absence 	 100% availability of staffs on duty 99% of staffs retained in each year of this 5-year Strategic Plan Not more than 1% absence from duty per staff per year

Strengthening the Human Resources Management Systems

Operationalize HR Information System (HRIS) and improve planning, recruitment and deployment of health workers. The overall goal of the computerized HRIS is to contribute to availability of the right number of the health workforce with the right competencies, in the right place, doing the right job at the right time. Kumi Hospital believes that a strong human resources information system (HRIS) enables health care leaders to quickly answer the key policy and management questions affecting service delivery.

- Improve timely availability of accurate and up to date HRM data for policy, planning and management
- Track the trends in the health workforce as they move in and pot of Kumi Hospital
- Increase efficiency in the management and maintenance of Health Workforce data
- Quicken aggregation, analysis and use of Human Resource data for decision-making
- Quicken information flow and facilitate regular reporting on the health workforce
- Strengthen staff performance appraisal mechanisms, keeping this updated with developments in the health human resources sector.
- Establish a Staff Performance Review Board to advise the Management Team on staff performance.

Sub-Objectives	Key Performance Indicator(s)	Target
Strengthening the human resources management systems	 Increased availability of Health Workers Improved accessibility of the health workforce 	 80% Increased availability of Health Workers 100% Improved accessibility of the health workforce

Strengthen Cross Cutting Issues

Gender mainstreaming (Women as health care providers in the household, Women as health care providers in formal health systems, Women as consumers of health care). Mainstreaming gender equality into the health sector is therefore of particular relevance because gender plays such a key role in determining the health status of men and women and their access to health information and services. Ensuring equitable access for all people and communities, with an emphasis on addressing gender disparities and the special needs of vulnerable children, the youth women and persons with disabilities. Kumi Hospital will develop, review and implement relevant policies.

- Communication strategy
- HIV Workplace policy
- Gender mainstreaming policy
- Transport and maintenance policy
- Safeguarding Policy
- Customer Service charter
- Protection Policies
- Disability and inclusion policies
- Environmental Protection
- Human Rights Based Approach to Service Provision etc

Sub-Objectives	Key Performance Indicator(s)	Target
	 Number of policies developed, 	■ 20 Policies reviewed, developed, and
cutting issues	reviewed and implemented	implemented/complied with

Advocacy and Lobbying

Formulate and implement objective-specific advocacy strategies and Plan that will benefit the communities of Kumi based on the 3 pillars; however the Advocacy strategy will encompass: Advocacy issue 2. Advocacy goal 3. Decision-makers and influencers 4. Decision-makers' key interests 5. Advocacy opposition and obstacles 6. Advocacy assets and gaps 7. Advocacy partners 8. Advocacy tactics 9. Advocacy messages 10. Plan to measure success.

The key Pillars that will drive our advocacy work in all areas of work shall be guided by UHC Pillars:

Pillar 1: Build political support and grassroots demand for Universal Health Care Coverage in Teso sub region to motivate policies and investments that aim to leave no one behind. *(Convince more in-country, high-level policymakers, especially beyond the health sector, that UHC is a right, smart and affordable investment that yields massive social and economic returns for countries—and wins votes)- Equip Ourselves and others to convince policymakers and remind politicians that health investments and improvements are key to eradicating poverty—and earn votes and public support, Leverage influential non-government voices to help make your case, Engage key decision-makers and advocates beyond the health sector, in that health decisions involve and affect groups that may not visibly work on health.*

Pillar 2: Develop action plans, define measurable results, and celebrate steps forward (*e.g., strengthening primary health care, defining and costing essential health benefits packages, developing a health financing strategy*)- Help citizens and communities understand how UHC would personally benefit them by grounding the "right to health" in concrete realities (e.g., what services a local health center should guarantee). Engage

people that communities trust and respect to deliver the *message (e.g. community health workers, faith leaders)*, Partner with civil society organizations to organize citizens' hearings on health, create election scorecards and amplify civil society messages to reach decision-makers, and engage patient groups, physician groups, health worker coalitions, labor unions, and marginalized populations.

Pillar 3: Support a broad, inclusive and cohesive advocacy community to maximize reach, coordination and impact of UHC advocacy. (*Partner with other organizations to pool resources and promote joint advocacy strategies for mutually-beneficial policy change.*)- Share data and human stories demonstrating that investments in equitable health systems drive improvements for countries' priority health and development issues and populations, meaningfully engage with partners across health and development to learn about their priorities and agree on shared health system goals that would benefit all groups.

OBJECTIVE FIVE

SO5: TO EXPAND AND FURNISH HOSPITAL INFRASTRUCTURE

MSO5: Kumi Hospital will have a diverse health infrastructure portfolio to deliver a comprehensive and integrated service system.

Sub-Objectives	Key Performance Indicator(s)	Target
Renovation of departments infrastructure and staff quarters	 Develop a hospital renovation plan Numbers of infrastructure and staff quarters renovated 	 1 Holistic hospital development plan developed All of infrastructure and staff quarters renovated
Strengthening the equipment, Space, and infrastructure Management Systems	 Developing a Space and Housing policy for the hospital (covering issues such as acquisition, use, equitable distribution, tenancy, maintenance, master planning, location of buildings, location of activities etc) 	 Space and housing policy for the hospital in place
Develop an infrastructure & equipment Management systems	 Develop hospital Planned Preventive Maintenance Schedules for infrastructure 	 Plan for hospital preventive Maintenance Schedules for infrastructure.

OBJECTIVE SIX

SO6:TOIMPROVEGOVERNANCE,MANAGEMENT AND OPERATIONAL SYSTEMS

MSO6: Kumi Hospital competent leaders with a clear vision and the ability to motivate and mobilize other health system stakeholders to make the Kumi Hospital Vision a reality.

Good governance for health is governing done with the objective of improving, protecting, and promoting the health of the people being served—whether it is a Ministry of Health (MOH) serving a national population, or an organization serving a particular community.

To foster good governance, Kumi Hospital Management seeks at all levels to quickly become more knowledgeable about governance, and new forms and practices of governing bodies. Governance is (1) setting direction and objectives; (2) making policies, laws, rules, regulations, or decisions, and raising and deploying resources to accomplish goals and objectives; and also (3) making sure that goals and objectives are accomplished.

To Increase the Effectiveness of the Board of Governors (BoG)

Kumi Hospital in the current strategy has adopted an effective mechanism for governance adhering to 4 governing practices:

- Cultivating Accountability (thereby Foster a facilitative decision-making environment based on systems and structures that support transparency and accountability)-Underlying Principles (Accountability Transparency Legal, ethical, and moral behavior Accessibility Social justice Moral capital Oversight Legitimacy)
- Engaging Stakeholders (Identify, engage, and collaborate with diverse stakeholders representing the full spectrum of interested parties)- Principles Underlying the Practice are Participation Representation Inclusion Diversity Gender equity Conflict resolution)
- Setting Shared Direction (Develop a collective vision of the "ideal state" and a process for designing an action plan, with measurable goals, for reaching it)-with underlying principles of Stakeholder alignment Leadership Management Advocacy)
- Stewardship resources Steward resources responsibly, building capacity- Principles Underlying the Practice Financial accountability Development Social responsibility Capacity Building Country ownership Ethics Resourcefulness Efficiency Effectiveness

Sub-Objectives	Key Performance Indicator(s)	Target
To increase the effectiveness of the	 Increased effectiveness of the	 100% of the Board show high levels
Board of Governors (BOG)	Board of Governors	of effectiveness on their roles

To Strengthen the Performance of the Management Team

Key Intervention for the Strategic Plan to strengthen the performance of the Management Team are:

- Training of senior management in Health Services Management
- Governance, Management Accountability for HSS
- Weekly Management meetings
- Quarterly Health Sub District meetings
- Regular performance review meetings

- Regular support supervision functions
- Coordinated HSD Child Days activities
- Quarterly Strategic Planning and budgeting functions
- Develop and implement monitoring and evaluation system on performance of the Hospital Management Team
- Strengthen capacity for leadership and management among the senior hospital staff (including the Hospital Management Team).
- Providing exposure opportunities (e.g. through study visits, scientific talks etc.) to members of the BOG, Management Team, Managing Congregation and staff
- Establishing a mechanism for following up the implementation of Management Team decisions
- Conducting joint retreats between the BOG and Management Team (e.g. one every two years, in which the BOG emphasizes the direction of the hospital and their expectations to the Management Team)
- Conducting retreats of the Management Team members (at least once a year, for team-building and to consider and approve the annual Strategic Plan of the following year, among others)

Sub-Objectives	Key Performance Indicator(s)	Target
To strengthen the performance of	Performance Management System	100% of Management Team use
the Management Team	established and used	Performance Management System
		established

Strengthening the General Management Systems

- Expand on the electronic data management: Private ward, Finance management etc.
- Implementing fully the Human Resource Management Manual
- Establishing a Staff Performance Review Board to advise the Management Team on staff performance
- Review and update the existing hospital constitution
- Review and update the existing management hospital manuals: Employment manual; Financial management manual, etc.)
- Constituting internal support supervision teams
- Continue with and where possible improve conducting regular general staff meetings (monthly)

Sub-Objectives	Key Performance Indicator(s)	Target
Strengthening the gener management systems	I ■ Number of general management systems established	 5 general management systems established

Organisation Effectiveness

The organisation effectiveness (OE) are organised under four perspectives of the balanced score card: 1. Funding and Donor relations, internal processes, other partners and Organisation Growth and Learning. These were noted to be key enablers and also strengthen Kumi Hospital's Effectiveness and Efficiency in pursuing its vision by 2026.

			Kumi Hospital		
MISSION			VISION		
		OBJECTIVES	KEY PERFORMANCE INDICATORS	TARGETS	INITIATIVES
	To sustain our mission financially,	To reduce non-critical expenditure in the hospital	Reduction of non-critical expenditure in the Hospital	100%	Implement sound accounting and financial management principles
	what should our focus be?	To improve financial management for the hospital.	Accounting package installed with a Backup system in Place. Number of staff trained in use and maintenance of the installed accounting package.	Functional Accounting package installed with a backup system 5 staff trained in use and maintenance of the installed accounting package.	Apply strong internal control mechanisms Ensure well-documented policies and procedures Scan for risks that might impact the
		To increasing local revenues from different sources for hospital activities.	Increasing local revenues from different sources for hospital activities.	9 Billion Increasing local revenues from different sources for hospital activities.	financial health of the organization Focus financial management actions so they reflect the organization's mission Reinforcement of administrative
FINANCIAL		To create additional sources of revenues for the hospital (Income generating activities).	Additional sources of revenues for the hospital (Income generating activities).	10 additional sources of revenues for the hospital (Income generating activities) identified and generating revenue for Kumi Hospital identified.	
		Streamlining procurement and contracting procedures	Tendering Committee in place Number of inspections carried out	1 Tendering Committee in place 20 Quarterly Number of inspections carried out in 5 Years	
STAKE HOLDE RS	How should we appear to our stakeholders?	Increase utilisation of healthcare services	% Increase in Access to healthcare services in a range of clinical and Nursing services	25 % Increase in Access to healthcare services in a range of clinical and Nursing services	Empowering and engaging people Strengthening governance and accountability

		Improvement on the existing range of clinical and nursing services provided	Increased access to providers % increase in clients being satisfied with the clinical and nursing services Percentage of prescriptions filled, with minimum	 25% Increase in Access to healthcare services in a range of clinical and Nursing services in KH 90% of clients being satisfied with the clinical and nursing services in KH 100% of prescriptions filled, with 	Reorienting the model of care Coordinating services Creating an enabling environment Strengthen existing areas of clinical excellence Prevent & Protect Detect & Control Prepare & Respond
		Chain for Services Provision	acceptable standards established Percentage of stock-outs for specific tracer drugs, maintained at established minimum level	minimum acceptable standards established 100% of stock-outs for specific tracer drugs, maintained at established minimum level	Build & Apply Advise & Collaborate
		Strengthen coordination of HSD services and collaboration with RRH in eastern Uganda	Number of collaborative activities initiated by KH	20 collaborative activities initiated by KH with HSD, RRH and Universities	
		Strengthen Primary Health Care (PHC) activities	Increased adoption of healthy behaviors and positive child development practices by communities in focus areas and target population groups Number of outreaches conducted Number of school health programs implemented Number of planned immunization outreaches carried out	15% Annual increments in adoption of healthy behaviors and positive child development practices by communities in focus areas and target population groups 200 Outreaches conducted 60 School health programmes implemented 200 planned Immunization Outreaches carried out	
		Coordinate control of communicable and Non- Communicable diseases	Numbers of Communicable, Non-Communicable cases managed successfully in Kumi Hospital	1000 Communicable, Non- Communicable cases managed successfully in Kumi Hospital	
INTERNAL PROCESSES	At which internal processes should we excel to better serve our patients?	Contribute to reproductive, maternal, newborn, child and adolescent health outcomes	Reducing Maternal Mortality Ration Proportion of births occurring in health facilities Proportion of pregnant women who receive a minimum of four antenatal visits Ending preventable U5 Mortality in Kumi in the Catchment Area Ending Preventable Newborn Deaths in Catchment Area Reducing Malnutrition in the Catchment areas of Kumi Hospital	Reducing Maternal Mortality Ratios to 70/100,000 100% of births in the Catchment areas occurring in Hospital 90% of pregnant women receive a minimum of four antenatal visits in the Catchment areas of Kumi Hospital Ending preventable U5 Mortality in Kumi Ending Preventable Newborn Deaths in Catchment Area 95% reduction in Malnutrition in Catchment Areas of Kumi Hospital	Improvement of performance of health workers in rural areas, by direct support to pre-service training, in-service training, retention schemes, staff motivation, changes in skills mix, and Strengthening knowledge and skills of local health managers for implementing HRH policy and negotiation with other organisations and authorities on HRH policy and resource allocation, Lobby/advocate with respect to HRH problems and exchange on knowledge and experiences regarding HRH interventions and policies, Improve living conditions, for instance by providing housing; Address job satisfaction by improving working conditions

		Establish Kumi Hospital Ongino Schools, training programmes	Established and Functional Kumi Hospital Training School	Functionalized and accredited Kumi Hospital training school offering specialised Courses	
		To improve the working and welfare terms and conditions for Staff	Improved working and welfare terms and conditions for Staff in Kumi Hospital	99% Staffs report improved working and welfare terms and conditions for Staff	
		To develop different skills among staff through specific professional training and development programmes	Improved Competency	100% of Kumi Hospital Staffs have improved competency.	
		To improve staff requirement for the hospital basing on actual workload status	Increased productivity/ responsiveness Improved motivation and job satisfaction Reduced absence Improved accountability to clients and managers	98% increased productivity/responsiveness of staffs Improved 100% of staffs are motivation and job satisfaction 98% Improved accountability to clients and managers	
		To improve staff retention within Kumi Hospital	Increased availability Improved retention Reduced absence	100% availability of staffs when on duty 99% of staffs retained in the Strategic Plan year 1% absence form Duty	
		Strengthening the human resources management systems	Increased availability of Health Workers Improved accessibility of the health workforce	80% Increased availability of Health Workers 100% Improved accessibility of the health workforce	
		Strengthen cross cutting issues	Number of Policies developed, reviewed and implemented	20 Policies developed, reviewed and implemented	
		To increase the effectiveness of the Board of Governors (BOG)	Increased effectiveness of the Board of Governors	100% of the Board show high levels of effectiveness on their roles	
		To strengthen the performance of the Management Team	Performance Management System established and used	100% of Management Team use Performance Management System established	
		Strengthening the general management systems	Number of general management systems established	5 general management systems established	
	How should we better develop our systems to serve our	Research and knowledge management	Number of Researches conducted and Knowledge Management Products shared	20 Independent Researches conducted and Knowledge management products share	Developing a prioritized research agenda implementation research agenda
LEARNING	patients?	Improve the quality of care offered in the hospital through adoption of: patient centred care, caring attitude, customer care, and appropriateness of care Improve patient safety in the Hospital and Customer Care and Technical Quality	Improvement in Overal Quality of related Care in Kumi Hospital in (OPD Emergency, Laboratory and Imaging Department, Operation Theater, Anesthesia and Related Indicators, Hospital Infection Rates, Human Resources, RMNCAH, TB/Leprosy, Malaria, HIV/AIDS, eMTCT, Nutrition, etc	98% Improvement in Overal Quality of Related in Kumi Hospital.	through sharing of knowledge, materials and technical assistance Sharing knowledge about people- centred and integrated services Collaborating with partners to summarize and share emerging evidence model innovations in health service provision based on ethos and quality Strengthen QI knowledge management and Information sharing

Renovation of departments infrastructure and staff quarters	Space management and utilization policy in place Number of key staff housed at the hospital Number of staff houses refurbished to be more suitable for the staff Space and Housing committee in place Conducive child friendly facility	Space Management Policy in place 100% of staffs are housed in the Hospital Housing Space and housing committee in place Functional child friendly facility in Place	Enhance commitment and leadership capacity in governance, leadership and management for QI in Kumi Hospital Harmonize and integrate QI approaches into all service delivery areas and at all levels in the Hospital Strengthen Strategic Planning and resource allocation for QI interventions. Review and roll out implementation of the PIP at all departments of the Hospital Increase awareness on time spent and saved from quality projects and how to prioritize for return on investment Strengthen the supply chain management system. Increase availability and use of service delivery standards, evidence-based clinical standards, guidelines, SOPs and tools Conduct Health facility assessment initiatives e.g. HFQAP, SLMTA, clinical / program assessment etc Improve infection prevention and control (IPC) mechanisms Strengthen and promote patient safety practices Strengthen involvement of clients and community in patient management and care Promote transparency and accountability of the health providers Strengthen monitoring and evaluation for QI interventions
Strengthening the equipment	Equipment and Plant policy in place Number of up-to date departmental inventories Breakages and malfunction Reporting system in place	1 Equipment and Plant policy in place 5 Annual of up-to date departmental inventories 1Breakages and malfunction Reporting system in place	
Develop an infrastructure Management systems	Approved asset management and policy manual Approved asset register Functional procurement policy manual	1 asset management and policy manual 1 Approved asset register 1 Functional procurement policy manual	

Prioritization Requirement of the Strategic Plan

Priority Capital Developments

- Continue action on improving top management capacity in relation to middle management.
- Continue action on improving middle management capacity and include strengthening of monitoring and evaluation of their clinical, mentoring and managerial performance.
- Start an incisive and long-term project on changing attitude of personnel to patients and public and disseminate the concept of patient centred care and of teamwork.
- Solve the current challenges that affect laboratory and do not assume that digitalization alone will solve it; rapid test diagnostics in the ward could be considered.
- Improve on waiting time (work reorganization, booking and queuing systems).

Priority Actions that Do Not Need Specific, Sizeable Investment

- Reinforce the set of process indicators already in use; add some outcome indicators (mortality, morbidity and patient satisfaction).
- Enhance the impact of monitoring, making sure that evaluation is followed by improvement actions.
- Strengthen palliative care and improve pain management in general (more attention to patient's pain) through training and coaching.
- Investigate if alleged nepotism in the hospital recruitment and sponsorship really exists because it
 is often mentioned as a strong demotivating factor.
- Strengthen cost and performance analysis.
- Strengthen the communication function (human beings drive change and the human beings in Kumi Hospital must buy into the change advocated by the Strategic Plan or it will not happen).

Risk and Risk Management

Risk Framework

Creation of adequate conditions for implementation, including the design and adoption of a risk management policy, procedures, as well as duties and responsibilities of different units is the most critical step towards effective implementation of the Strategic Plan. Of importance in the effective implementation of the Strategic Plan is the whole architecture of the internal infrastructure including an effective organizational structure, quality personnel, robust budgeting processes, availability of resources, effective and timely management information systems, and monitoring and control systems that accomplish the business goals in an effective and efficient manner.

Risk Management Function

Kumi Hospital will be developing an institutional risk management Strategic Plan, which will identify responsibilities for risk management function responsible for risk monitoring and reporting to Management and the Board. The specific functions are:

- i. Identifying current and emerging risks;
- ii. Developing risk assessment and measurement systems;
- iii. Establishing policies, practices and other control mechanisms to manage risks;
- iv. Developing risk tolerance limits for Management and Board approval;
- v. Monitoring positions against approved risk tolerance limits; and
- vi. Reporting results of risk monitoring to Management and Board.

Risk Mitigation

The Hospital will employ the following risk mitigation strategies in the implementation of this Strategic Plan:

a) Business management and controls which include:

- i) A qualified board of directors,
- ii) Timely and effective communication,
- iii) Quality personnel and their on-going training,
- iv) An effective Organisation structure.
- b) An effective risk management system.
- c) Effective internal audit function.
- d) Adequate risk management policies and procedures.

Strategic Plan Implementation Risks

There are several risks to the implementation of this Strategic Plan. It is therefore prudent that these risks be analysed to ensure that precautionary measures are taken in good time to prevent failure of the Strategic Plan's implementation. One of the fundamental risks that can affect the implementation of this Strategic Plan falls in the broad category of risks. This risk is a function of the compatibility of an institution's goals, the business strategies developed and resources employed to achieve goals, and the quality of implementation of those goals. Risks can arise from two main sources: external and internal risk factors.

External Risk Factors

External risk factors are factors that Kumi Hospital has no control over, and affect or deter the realization of the goals determined in the Strategic Plan. Such factors include; Changes in the legal frameworks, economic factors and technological changes

Internal Risk Factors

Internal risk factors are those factors that Kumi Hospital has control over, and deter the realisation of the goals determined in the Strategic Plan. Such factors include; organisation structure, work processes and procedures, technology, lack of resources (financial, human), poor communication, and resistance to change/negative attitude.

Main Anticipated Risks

- Difficulty for the Management to implement changes and, if needed, improvement actions affecting higher-level staff. Mitigating factor: evident backing, monitoring and guiding by the Board through the Steering Committee (below).
- Achieving short-time sustainability only or prevalently through indiscriminate fee increments with the consequence of drastic drop in the number of patients with ineffective protection for the vulnerable groups. Mitigating factor: establishment of a set of a few core indicators for the Board, to prove that sustainability is being pursued though balanced actions without compromising longterm sustainability or hurting the Mission.
- Achieving reduction of expenditure on drugs and reagents by setting rigid caps on monthly distribution to wards, thus forcing the patients to go and buy the drugs from private pharmacies. Mitigating factors: (1) strict monitoring of correct administration of drugs in the wards, and of shortages of drugs in the wards. (2) A well-developed cost reduction plan, which must identify real inefficiencies, over-prescriptions, and other waste of resources, which must genuinely lead to reduced cost of treatment to benefit the patients.

Governance

To strengthen the perception of the role of the Board as the ultimate decision maker and that the Board backs the implementation of the Strategic Plan.

Implementation of the Strategic Plan

To implement and sustain the objectives described in the Strategic Plan, a more management-oriented approach will be progressively developed. It will aim at establishing sectorial targets, ongoing evaluation of results, as well as identification and correction of non-performing areas.

A central capacity to develop is the ability to validate and constantly monitor activity and financial data/results (global and disaggregated), enforce cost management procedures and produce a complete range of information to support decision-making.

The Steering Committee

The Strategic Plan is ambitious because it tries to achieve goals that may appear to be in contradiction among themselves (protection of vulnerable groups, sustainability, and improvement of the quality of care, as well as staff motivation and involvement). Timing and finding the right "middle ground" will be crucial.

Thus, instead of providing the Strategic Plan with a detailed action Strategic Plan and budget, which risks remaining on paper, the Strategic Plan has preferred the approach of flexibility and gradualism within the framework of verified implementation progress and budgetary responsibility.

The establishment of a dedicated body for the promotion, implementation and monitoring of the Strategic Plan can help this model to be effective.

Thus, a "Strategic Plan Steering Committee" will be established that will report directly to the Board, showing that the Board is behind the change promoted by the Strategic Plan.

The main role of the Steering Committee will be to ensure that:

- The implementation of the Strategic Plan, though gradual, does not stall
- The implementation of the Strategic Plan, though flexible, does not neglect any objective and that the advancement in implementation of the various components of the Strategic Plan is reasonably balanced
- Realistic annual Strategic Plans of action are developed by the Management for each objective containing indicators to be monitored
- Once a problem is identified and a solution devised by Management, action is taken and in the cases where it is not, specific mandate for action backed by the Committee will be given to the Management.

Monitoring and Evaluation

The hospital will make monitoring and evaluation an integral part of the entire process of implementation of the Strategic Plan. This will be done with an aim of measuring and assessing performance in order to draw lessons from the implementation experience. The findings of the monitoring and evaluation exercises will inform decision-making processes. The system will largely use the objectives and indicators that have been incorporated in the Strategic Plan detailed implementation matrix. A monitoring and evaluation system will be put in place to ensure performance is reviewed and analysed on a regular basis. This will take into account the internal and external factors that may affect the implementation of the Strategic Plan.

This Monitoring and Evaluation framework aims at:

- i) Focusing attention of stakeholders and direct efforts towards the ultimate Vision of the Hospital
- ii) Informing policy makers about progress towards achieving targets as set in the Strategic Plan.
- iii) Provide information to decision-makers to make evidence-based decisions.

In addition to the above considerations the M&E framework has been developed for effective monitoring the Strategic Plan.

Scope of Monitoring and Evaluation

The M&E will carry out three types of monitoring which will address different stages in the results chain, namely;

- i) Physical implementation monitoring: Will address whether activities and initiatives have taken place in line with timelines and target set achieved;
- ii) Financial implementation monitoring: Will addresses whether or not budgets have been released and spent in line with allocations; and
- iii) Outputs, outcomes and impact monitoring: To trace whether or not objectives are being met.

Monitoring

The areas to monitor will include, but will not be limited to: performance, utilization of resources, impact, coordination, service delivery and institutional capacity. The monitoring process will involve regular collection and analysis of information on the progress of the Strategic Plan implementation. The process will include, but will not be limited to the following:

- Check whether the implementation is on course in relation to the set objectives;
- Support documentation of the process of implementation;
- Document progress and key learning areas from experience and feedback;
- Inform hospital's future directions, decisions and Strategic Planning;
- Help in taking corrective measures if any unexpected results occur, in order to bring the activities/programs back onto target;
- Ensure that allocated resources are being used as intended, are cost effective and there is value for money.

Monitoring Tools

The hospital will use a variety of monitoring tools, depending on the nature of the activities. Some of the tools will include: work Strategic Plans, reports, visits, annual staff appraisal forms, and staff meetings. Each department will determine which tools are relevant and most suitable for their programs.

The Balanced Scorecard and strategy maps will be used as the strategy execution tool in order to effectively communicate and monitor the achievement of the stated Objectives.

Annual Operational Work Strategic Plans

The annual operational work Strategic Plans will be used to monitor the progress of the implementation of the Strategic Plan. Each department/unit will be expected to prepare detailed annual work Strategic Plans. The work Strategic Plans will provide the following information: objectives, strategies/activities, outputs, timeframe, resources required and person(s) responsible. The work Strategic Plans will be reviewed annually.

An Annual Strategic Plan performance report will be developed. The report will be validated by stakeholders to:-

- i) Obtain stakeholder insight on the information generated;
- ii) Mitigate bias through discussion of the information generated with key M&E actors and Objective owners;
- iii) Generate consensus on the findings and gaps.
- iv) Strengthen ownership and commitment to M&E activities.

Reports

The reports will include activity, monthly and quarterly progress/management reports; financial reports, audit reports and other specific reports, which may be required from time to time depending on the nature of interventions.

Management Reports (Monthly, Quarterly, Annual Reports, Etc.)

These reports will include: Strategic Planned activities for the period; achievements against the Strategic Plan; major variances; any trends (in terms of context, national or global that have or may influence the work of Kumi Hospital; constraints and challenges faced; any lessons that have been learnt; recommendations; and annexes.

Financial Report

All financial reports will be expected to be compliant with the hospital financial guidelines and generally accepted accounting practices (GAAP) and in line with the principles of cash accounting process (Accrual). In preparing the report, consideration shall be given to formats provided by CPA and any specific donors. Otherwise, the format will include the following main components: Budget allocation; expenditure for the period; accumulated expenditure; and variances, if any.

Field Visits

Administration department will coordinate regular visits to communities and within the hospital to check compliance with the health sector standards and management principles. The visits will include both Strategic Planned and spot check visits as and when deemed necessary. The personnel undertaking the visits will use check lists and prepare reports either at the site or immediately after visits, focusing on the specific issues cross-checking and verifying what is reported, compliance and fact-checks

Annual Staff Appraisal and Performance Reviews

The performance review process will be one of the key learning mechanisms in the Kumi Hospital for follow up and learning. There will be annual, mid-term and end term performance reviews and evaluations whereby:

- i) All performance reviews and evaluations will contain specific, targeted and actionable recommendations
- ii) All departments/Units will provide a response to the recommendation(s) within a stipulated timeframe, and outlining agreement or disagreement with said recommendation(s), proposed action(s) to address said recommendation(s) and timeframe for implementation of said recommendation(s).
- iii) The department or office responsible for Strategic Planning and development will maintain a tracking tool for implementation of recommendations as well as agreed follow-up arising from review and evaluation.
- iv) The implementation of the agreed actions will be monitored by the M&E Unit at all levels

The key issues that will be looked at include:

- i) Performance against agreed standards/indicators or result areas as per the job descriptions
- ii) Identification of gaps (or factors that contribute to poor or good performance) and agreement on corrective measures where necessary
- iii) Agreement on the next period's result areas/objectives.

Meetings

The hospital will hold several monthly staff and management meetings on a regular basis in order to discuss important issues pertaining to the work of the hospital and take appropriate action, where necessary. Other consultative meetings will be held with specific stakeholders of different aspects of our work to discuss progress and how the implementation can be improved. Meetings will be used for annual and biannual reviews.

Evaluation

Office of the Medical Director, supported by the Senior Hospital Administrator or as will otherwise be decided by the Board, will coordinate both internal and external evaluations. These evaluations will focus on: efficiency, effectiveness, impact, sustainability, relevance of interventions. The hospital will Strategic Plan to have two external evaluations of the implementation of this Strategic Plan: the 1st year, the mid-term review and final evaluation. The 1st year evaluation will be done just after the end of the first year of the Strategic Plan implementation in the 1st year to assess whether the Strategic Plan implementation of the Strategic Plan. A mid-term review of the Strategic Plan will be done at the end of the first phase in the 3rd year to assess the progress with a view to check whether the implementation will be conducted preferably 6 months prior to the end of the Strategic Plan period. This will be the time to take stock of the successes and challenges of the just ended Strategic Plan.

Evaluation Tools

The following are some of the tools/mechanisms that will be used during evaluations: Questionnaires, stakeholder meetings; focus group discussion guides; interview guides; logical framework matrix; observation guides; and document/literature reviews.

Responsibilities for Implementation, Monitoring and Evaluation

The following monitoring & evaluation framework will be used in order to ensure successful implementation of the Strategic Plan:

- i) An M&E technical working group shall be established to champion implementation of the Strategic Plan.
- ii) The Head of Strategic Planning Department/Senior Hospital Administrator will be responsible for the overall monitoring, evaluation and reporting.
- iii) Quarterly M&E meetings will be held to review the status of the Strategic Plan implementation.
- iv) The MD will provide quarterly reports on implementation status to the Board.
- v) Management dashboard will be developed to monitor the implementation of Key Performance Indicators.

No	Tasks	Responsibilities
1	Resource mobilization, collaboration and partnerships, receiving M&E reports, providing feedback and taking action	MD and Board of Management
2	Design M&E tools, supervise data collection, analyse data and generate M&E reports	HOD Strategic Planning/SHA
3	Implement Strategic Plan, collect and analyse data, submit to Strategic Planning Department, receive feedback, and implement decisions	All Deputy Directors, HODs and HOUs
4	M&E technical working group meet quarterly to assess the implementation of the Strategic Plan	HOD Strategic Planning
5	Make BSC and Strategy Reporting part of Management Meetings agenda	HOD Strategic Planning/SHA/MD
6	Presentation of progress reports on Key Performance Indicators during the MD's quarterly meetings	HOD Strategic Planning/SHA/MD

Resource Mobilization

Strategies for Resource Mobilization

To manage the available resources, the following measures will be undertaken:

- Optimize expenditures on operations and maintenance (O&M) and implement cost saving measures.
- Prepare Budgets that are in tandem with Strategic Planned programs and projects as provided in the Strategic Plan.
- Undertake proper costing of operations and maintenance activities and ensure that expenditures are targeted to core activities.
- Implement expenditure controls through rationalization of expenditure and enforcement of measures to minimize wastage, benchmark prices for procured store items, accounting and audit measures to militate against wastage, adhere to policy on the purchase of medical commodities and supplies, and institute measures to ensure rapid and timely utilization of donor funds.

Mobilization of Additional Resources

There is need to mobilize additional resources from external partners to supplement funding from user fees. Proposals for additional funding will be made to development partners, and NGOs. This will include those reflected in the Stakeholder Analysis. The hospital shall carry out internal audit to ensure that resources are used efficiently, effectively and in accordance with the Kumi Hospital financial regulations. The hospital will also source addition funding by:

- Preparing funding proposals to current and potential development partners
- Collaborating with National and Local Government and local NGOs/FBOs
- Enhancing networking and collaboration with non-state civil society organizations and communities

Cost Optimization

To further enhance service delivery through effective financial management, the hospital will concentrate its efforts on optimization of resource use and identification of cost saving measures to eliminate wastages in the recurrent and development budget; service delivery, Strategic Planning and budget execution through quarterly regular expenditure reviews of annual Strategic Plan and the budget.

List of Individuals who participated in the Development of this Strategic Plan

S/N	Name	Sex	Organisation	Telephone	
1	Dr. Alinda Nicholas Owen M KH		КН	0393194274	
2	Opio Charles	М	КН	787875164	
3	Alimo Sarah	F	КН	779501101	
4	Agoe Scovia	F	КН	775117047	
5	Aseku Sarah	F	КН	778153672	
6	Wauju Samuel	М	КН	782431653	
7	Dr. Malinga Raymond Joseph	М	КН	0393194274	
8	Sr. Amujal Janet Sarah	F	КН	778216849	
9	Sr. Asio Catherine	F	КН	785250361	
10	Akuku Emmanuel	F	КН	777600184	
11	Iwato Margaret Odikor	F	КН	782606537	
12	Okello Burden Paul	М	КН	772988031	
13	Ipulet Ziporah	F	КН	772438592	
14	Asekenye Betty	F	КН	772438592	
15	Rev. James Opolot	М	КН	772480826	
16	Olupot Emmanuel	М	КН	779963528	
17	Angolikin Hellen	F	КН	782654415	
18	Opolot John Gilbert	М	КН	774612049	
19	Omagor Emmanuel	М	КН	772985420	
20	Achom Rachael	F	КН	779069631	
21	Twongeirwe Benjamin	М	КН	775802410	
22	Akileng J. Michael	М	КН	775299219	
23	Asekenye Jackline	F	КН	778607143	
24	Anyait Rose	F	КН	785928888	
25	Olupot Michael William	М	КН	772519988	
26	Atworo Annet	F	КН	772475438	
27	Emesu George	М	КН	782421085	
28	Okello Daniel	М	КН	778216849	
29	James Okweny	М	KH- Lead Co-coordinator in the Dev Process	772644912	
30	Rev. Erone Robert	М	Board Chairman	772663991	
31	Rev. Okunya Charles Oode	М	Board Member	772395175	
32	Mr. Bwalatum Michael	М	Board Member	772454001	
33	Sr. Okwakol Susan	F	Board Member and ADHO, Kumi District 7725		

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34	Dr. Odiit Amos	М	Board Member	772520991
36	Rev Martin Ejiet	М	Board Member	775425733
37	Otwao Denis Geofrey	М	Board Member	772479186
38	Mr. Sam Alutia	М	Board Member	

List of Board Members and Senior Management who participated in Validation

S/N	Name	Sex	Organisation	Telephone
1	Rev. Erone Robert	М	Board	772663991
2	Rev. Okunya Charles Oode	М	Board	772395175
3	Mr. Bwalatum Michael	М	Board	772454001
4	Sr. Okwakol Susan	F	Board	772537770
5	Dr. Odiit Amos	М	Board	772520991
6	Rev Martin Ejiet	М	Board	775425733
7	Mr. Otwao Denis Geoffrey	М	Board	772479186
8	Dr. Odwar Lazarus	М	KH	772644912
9	Mr. Okweny James	М	KH	779961277
10.	Akuku Emmanuel			

Annexes

Annex 1: Detailed Costed Implementation Strategic Plan

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KUMI HOSPITAL

STRATEGIC PLAN 2022 - 2026