

Medical Supplies Project

23rd November – 18 December 2020



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“ Ensuring Safety and access to healthcare for all requires understanding the history of healthcare in Uganda and relating that to countries with similar history and where they are. The directions New governments are taking have not envisioned access for the poor and this is why we are experiencing insufficiency in healthcare for all.”

- Dr. Titus Busonga



Ikumbya Village: Ikumbya Health center III Projects
Uganda Korea Medical Camp 2018 © Real Health Uganda 2018

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EXECUTIVE LETTER

Dear Friends,

The COVID-19 pandemic has left us helpless and the political situation in our country has only worsened the situation. On top of the massive deaths due to Malaria between 2019 and now, healthcare facilities have completely failed to meet the needs of our people and some have been shut down to avoid further infection. The remaining facilities do not have the medicines and supplies required.

Resources that RHU would provide to facilities for a year are now only required for a few weeks. On a brighter note, support from The Third Doctors came in handy to move RHU through December 2020 and January 2021, a time that has been critical to treatment and care as we continue to lose more people to COVID-19. The pandemic has also killed so many people with more than 80% of the cases not reported because they cannot reach the health facility.

Every member of the RHU team on this project has been exposed to COVID-19, in-fact the entire staff at Ikumbya Health Center III were diagnosed with COVID-19 and the facility was operating in reserve mode with temporary staff as it could not close because of the services it provides in the region. Our members have had to go into isolation several times and those costs have not yet been calculated.

For that matter we are grateful to our supporters. Thank you for supporting us and ensuring that our inventories have at least some medicines. The way these saves lives is unexplainable. We therefore ask you to continue supporting our work and empowering us with wisdom and knowledge to continue resilient support and to ensure that the services so needed by our people continue. We hope to work with you is a privilege and one of the things we look at as an institution to effect the growth and development of our health sector.

We look forward to more engagements and we hope you participate and support our 2021 plans and activities.

Kind Regards


Eliezah Titus Busonga
Chief Executive Officer



PROJECT IN REVIEW

Dr. Noh After Making Transactions for the Project in Daegu Korea
© Real Health Uganda 2020



Approximately Ushs. 43,176,000 has been spent on medicines as a COVID-19 relief package to our network hospitals across Uganda. **By July 2020 we had requests that would move the quarterly budget from Ushs. 26,197,000 to Ushs. 71,186,200 and by October 2020 that budget had hiked to Ushs. 109,083,000.**

Today, (reporting time) Requests for medical supplies support continue to grow with limited resources for us to cut them short. **By the end of January 2020, we had requests totaling to Ushs. 78,101,000** and we could not even facilitate any of those to date.

On November 11 and 12 2020 we received financial assistance from The Third Doctors to supplement our efforts in extending the much needed medical supplies to all facilities possible under our network to continue free treatment of people. **The support that came in twice consecutively through western Union merged through different exchange rates as \$5,000 was sent occasionally, one at a \$3,542.22 and another at \$3536.36.**

At the End, Ushs. 35,392,900 was processed and banked at the Equity bank Kawempe branch on our Consolidated Bank Account to begin the re-budgeting process. On November 16th, the Re-budgeting meetings commenced and decisions were made.

Implementation commenced with purchases of medicines starting 23rd November since the quotations had been submitted on 20th November to

Christa Pharmacy LTD, RHU Contracted Supplier of Medicines and supplies.

Pick up for some of the medicines were done on 24 and packing of drugs commenced. Some of the requisitions were to be picked up later after being packed properly. Branding of medicines was done especially for emergency medicines that were to be distributed within the week to Ikumbya Health Center, Nabweru Health center and Seguku Health center respectively.

Other supplies packed were to be picked up by the remaining 13 health centers that were chosen out of the 97 facilities that had requested for supplies. Although out of the 97 only 56 had satisfied the requirements of applications for supplies, the executive had allowed with provisions of another 18 facilities based on the challenges their regions had faced during the pandemic.

Although the support provided by The Third Doctors was not the required amount needed to facilitate those supplies requested for, we were able to agree to utilize all the funds provided to us to solely purchase medicines. The rest of the money required was to be solicited from our board members. An extra Ushs. 7,783,100 was added to purchases while, Ushs. 677,350 was spent on fuel, Ushs. 412,000 on food, and Ushs. 1,623,000 On food and supplies for the orphanages

For this report, will however focus on how the Ushs. 35,392,900 was spent. This is aimed at providing accountability for Our Partner and donor, The Third Doctors.

DELIVERIES

Deliveries provide RHU with assurance that the exact medicines reached the health facility and gives RHU staff a chance to evaluate previous support and its effectiveness.

RHU Staff And Volunteers make deliveries at Ikumbya HC IV in Nov 2020
© Real Health Uganda 2020

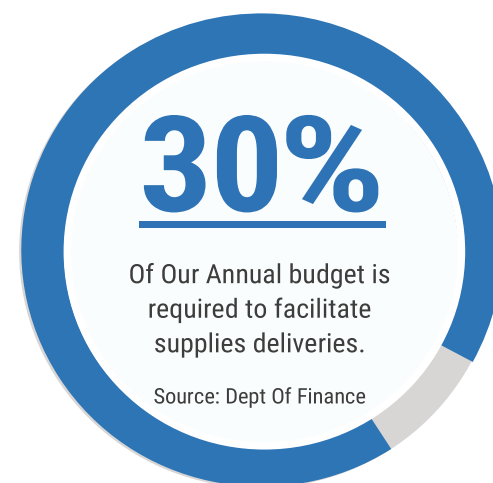


The Hired Van Delivers Medicines in December 2020
© Real Health Uganda 2020

Major Obstacle: Deliveries Transport

Moving medicines and supplies to our network facilities is very challenging especially considering the Cost of transportation since RHU has only one van to support all the deliveries across all the regions in Uganda. **Our mandatory timeline of procuring and delivering within 14 days cannot be attained** in this regard and in many cases hiring extra transport is recommended for urgency.

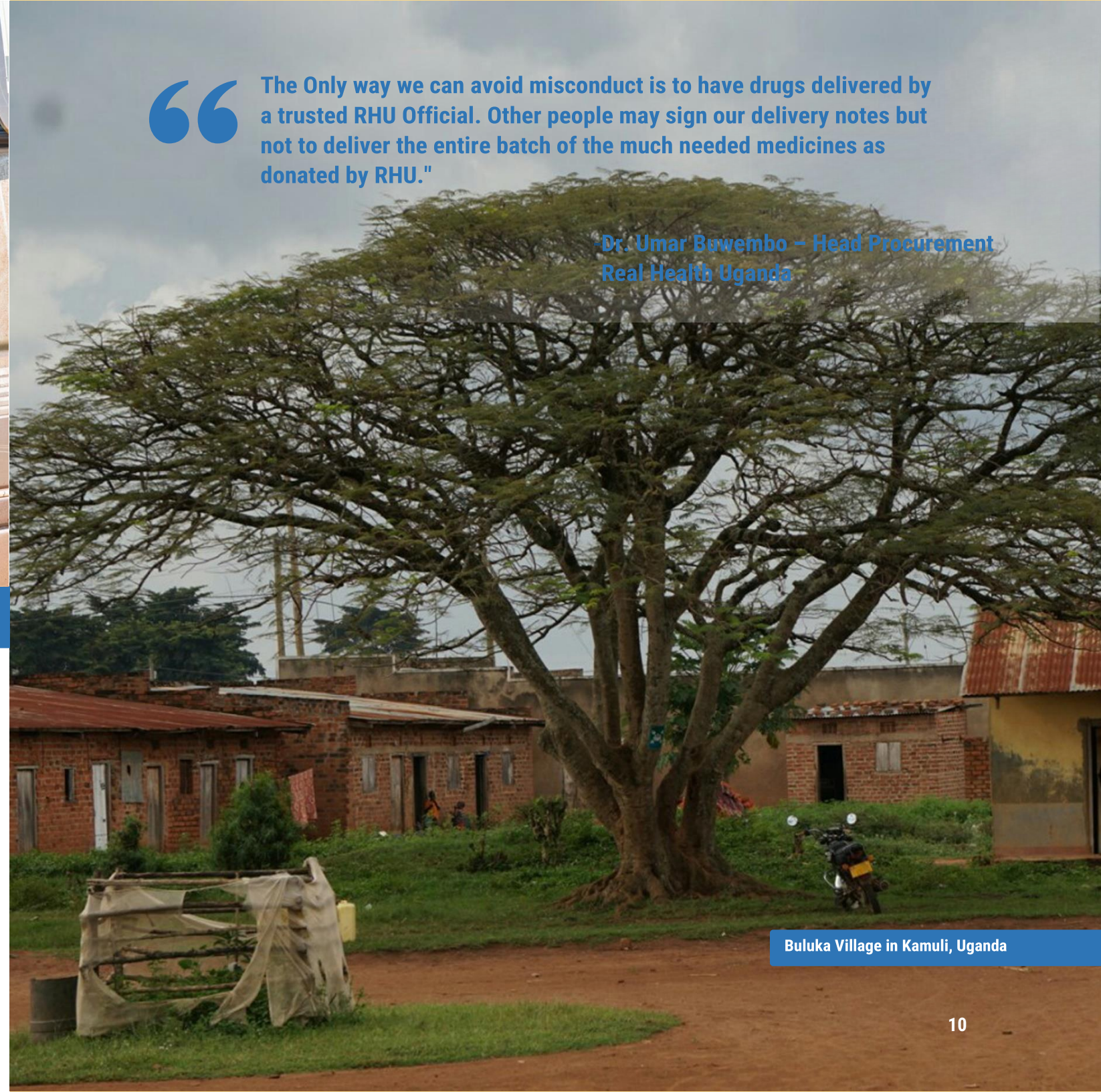
More than 31% of our annual budget could be spent on deliveries transport alone and hence the changes in strategy of support to ask network members to facilitate their staff to pick medicines from RHU offices or the regional hubs within their locations where possible.



“

The Only way we can avoid misconduct is to have drugs delivered by a trusted RHU Official. Other people may sign our delivery notes but not to deliver the entire batch of the much needed medicines as donated by RHU.”

Dr. Umar Buwembo – Head Procurement
Real Health Uganda



Buluka Village in Kamuli, Uganda



State of Hospitals In Uganda (Left) and An elderly woman waiting for RHU supported treatment at a facility in Luweero

In the Project Period, around Uganda:



1,700+

People received Medical care services at supported facilities thanks to The Third Doctors



16

RHU-supported health centers Received and used all Supplies.



12,000+

Eligible patients requested for RHU supported Services at their facilities to no avail

Every quarter RHU receives requests from patients to support them in accessing services. Numbers range between 7,100 to 7,900 patients per quarter. **During the pandemic, between 12,513 to 12,798 patients could not be supported by RHU at their respective facilities per quarter.** Some of these facilities receive support and its consumed before they could satisfy their patient intake.

We work with more than 97 health facilities across the country. These are part of the network and they have pledged to support their communities have access to free services. During this reporting period we could not facilitate all the facilities under the network even when they qualify, instead we chose facilities with critical challenges in access to services because of the emergency situations they are experiencing. However, **out of those 16 supported facilities that received part of this support from TTD, 1,793 patients received free services by the end of January when the facilities reported shortages in supplies.**

At the end of December and between July 1st and December 30, requests for mental health services support tripled. **The Already strained health sector was heavily affected by the COVID-19 lock down in Uganda and the continued partial lock-down through February 2021.** Cases of suicide have increased and the ability to access healthcare services became harder for the poor.

Working with these facilities, we hope to bridge gaps on this issue. **Uganda Operates one Mental Health Hospital in Luzira. It is believe that 6 in 10 Ugandans have experienced psychological breakdowns in some way and 4 out of the 6 needed psychosocial support.**

We look forward to supporting efforts that address these eminent issues as we have done in the past with support from our partners.



Marcus Kasoma benefited from the Support from TTD and RHU



RHU Team Inspects Ikumbya Health Center III In Luuka District after delivery of Medicines and Supplies
© Real Health Uganda 2020

Ikumbya Health center is located in the Eastern Part of Uganda with a population of more than 978,000 People who access services here. It serves as a referral center for the mid-region with a distance of 78Kms from the regional Referral hospital of the eastern region in Jinja Municipality.

Many people that would access services at Ikumbya Move by foot as there's almost no other means apart from riding a bicycle or a motorcycle, something that is not owned by many as the entire population depends on less than a dollar a day. Healthcare in Uganda remains the biggest challenge of all times and access to treatment is even worse.

RHU's Journey with Ikumbya started in 2014 with support that saw a significant lift of the center's level from level two to level three. As of this year, **we've provided Ikumbya with supplies and support worth Ushs. 8,189,600**, this includes both supplies and equipment.

Considering the population served by Ikumbya and over the years, and at every quarter, **Ikumbya is eligible for Ushs. 71,130,000 in supplies every year combined with the support they receive quarterly from the Ministry Of Health** in order to meet the needs of our people in the area they serve.



Ikumbya Health Center received supplies on 25th November 2020. Coordination had been made through Our regional Coordinator for Eastern Region, Ms. Evelyn Kabuule. Contributions from TTD catered for supplies while Eng. Rehema Offered her vehicle for transport and Dr. Busonga contributed to gas, lunches for staff and commissions

Dr. Busonga Arrives to inspect and donate to Ikumbya Health Center in November 2020

Other Facilities that received deliveries include Seguku health Center II and Nabweru health center IV. The Reason for these choices for deliveries lays in the number of patients that these facilities treat quarterly.

Seguku alone, serves a population of 3,740,000 people living in Sabagabo and the nearby counties.

There are 5 health centers, all at level two within the same vicinity but they are all not operational.

The Under facilitation by government is recognized by the residents and they gather every weekend to chart

way forward on how to keep the only public health facility in their area operational. The continuously requests to RHU to continue the support come in every month. And on average, **217 residents call in with medical supplies requests every month from this specific area but our support remains at Ushs. 4,181,000 for Seguku Health center.**



Dr. Busonga Hands Over Medicines to the assistant In-charge of Seguku HC II
© Real Health Uganda 2020

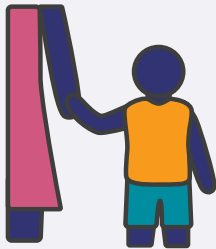


A rear View Of Nabweru Health Center III

Nabweru health center serves a population of 3,675,000 and is the highest referral facility serving Nansana municipality, Nabweru Sub county, Nangabo Sub county and Kawempe Division

RHU has worked with this facility since 2012. **The crowds at the reception of this facility tell the burden of treatment that this facility faces.** Basing on documentation, **Nabweru treats more than 3000 patients at possibility in one week.** It is important to note that the medical staff at the facility is only eligible to fully diagnose only a few patients a day.

At Nabweru Health Center:



1,148
Children Visit the center to access treatment. More than 40% of these visit are malaria related.

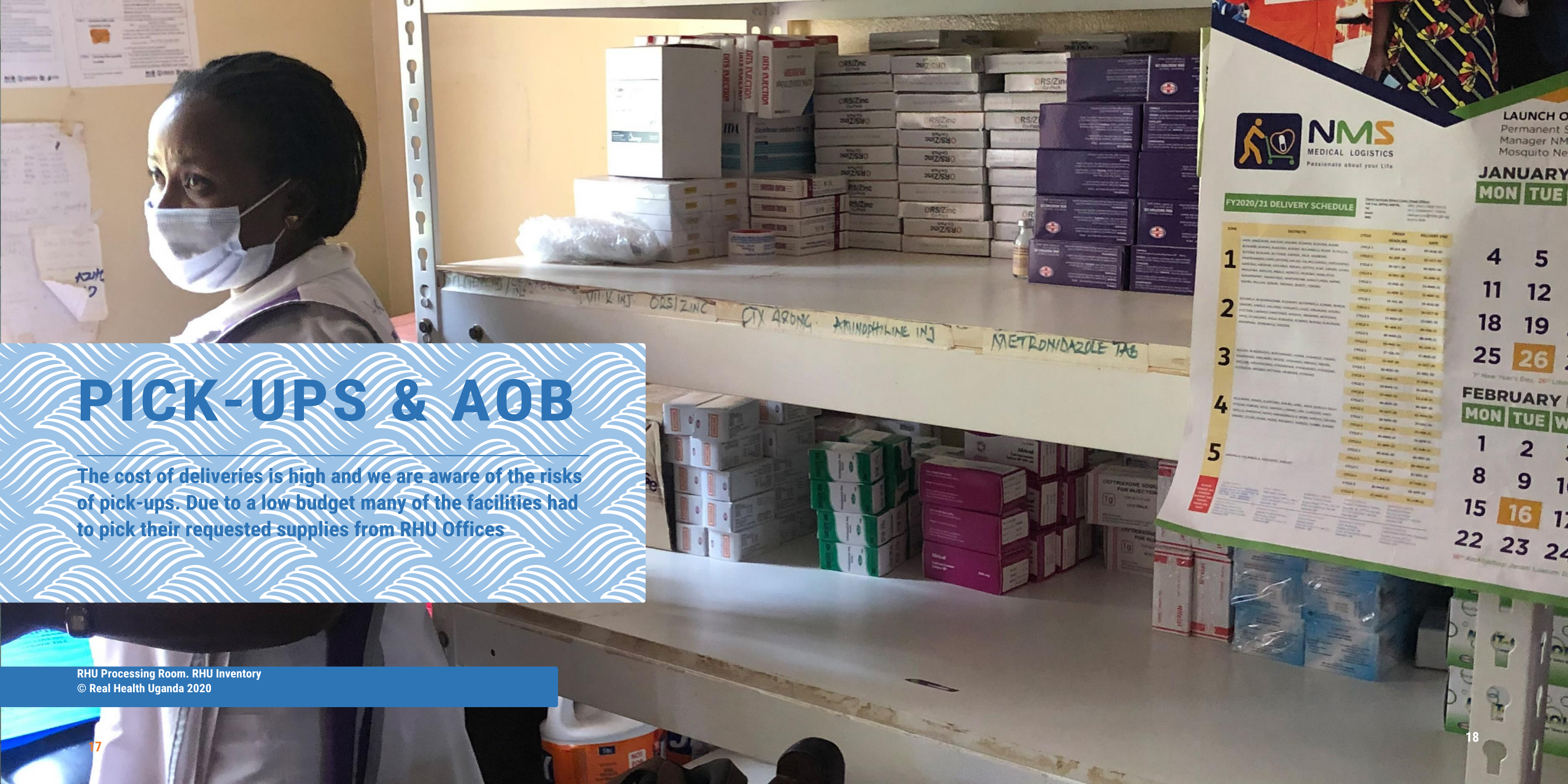


nearly 2,000
Adult patients from Kampala and Wakiso districts access medical treatment from this center every week.

The maternal wing of the facility is even more crowded. There are limited beds and mother are seen giving birth on the floors of the maternity ward.

Our efforts to equip the maternal ward of the center solely depends on the response to the letters issued to, the Government of Uganda, and our partners The Third Doctors. **At least \$36244 is required to fully facilitate equipment required by the center.**

RHU spends only Ushs. 14,620,000 on this facility that would require more than Ushs. 100m in medicines every year to satisfy its patient base.



PICK-UPS & AOB

The cost of deliveries is high and we are aware of the risks of pick-ups. Due to a low budget many of the facilities had to pick their requested supplies from RHU Offices

“

We will Make Available a team to ensure that anyone who is receiving medicines and supplies can easily pick them up at all Our Hubs and Offices."

- Dr. Felix Tenywa Director General Of Health
Real Health Uganda

Our Procurement Volunteers Worked Day and Night to Ensure Pick-ups are not delayed. Rosemary (L) James (M) and Eunice (R) © Real Health Uganda 2020

Pick-ups were recommended during this time because of the dire need of drugs and supplies yet our resources couldn't facilitate all the travels to deliver medicines and supplies.

The risk of facilities not receiving the medicine is high considering the dire scarcity of medicine and medical supplies in the entire country. **13 out of the 16 facilities picked their medicines from different locations as were directed by the secretariat.**

7 picked their medicines and supplies from the RHU office in Najeera while 6 picked from Jinja, Arua and Hoima districts respectively. At these pick up points drugs were delivered by the RHU hired vehicles with support from Dr. Busonga's family.

Because of the fear of receiving less than the sent batch, RHU has waited for reports from these facilities for the time mandated in the Network facility manual to log complaints but none has come through.

At the reporting time, reports continue to trickle in on the way the supplies picked and delivered were used and what the current demand are. Our hope is that we can get resources that are so much required during this period to address the needs of our network facilities and the communities they serve.



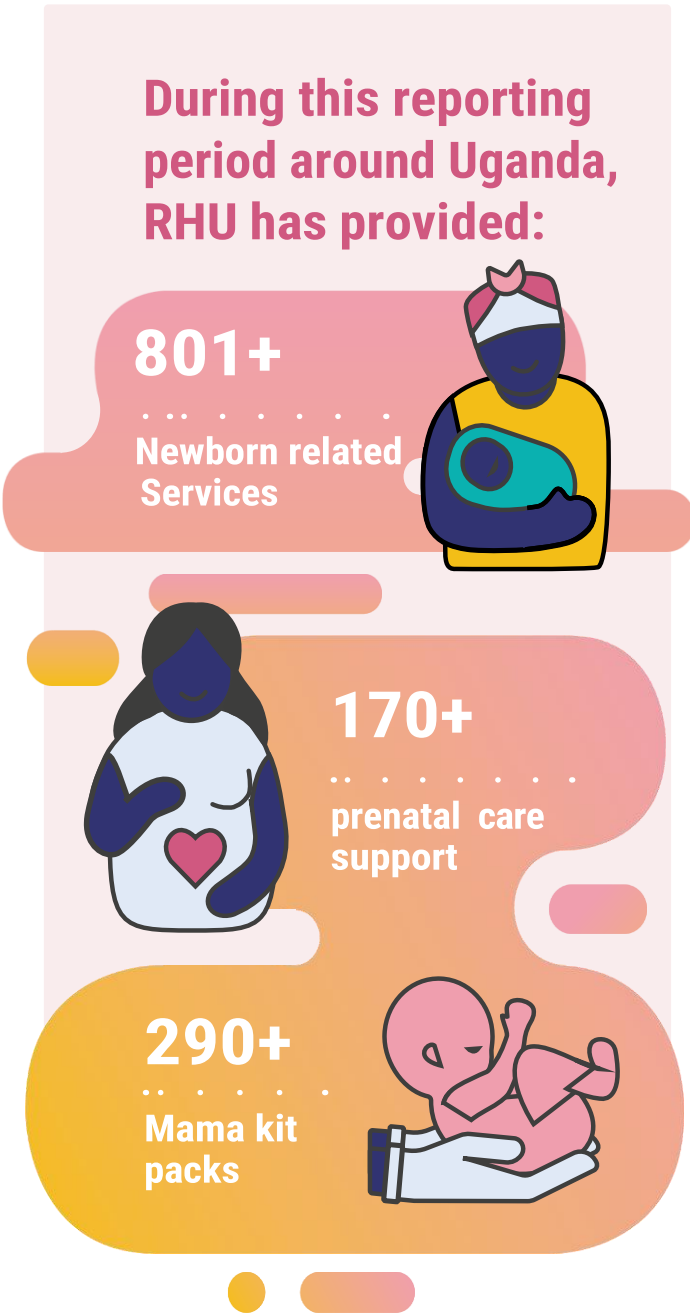
A Motor cycle delivers Food and Supplies on Behalf of Real Health Uganda to Orphans in Ntinda Suburb Of Kampala. © Real Health Uganda 2020

In We want to believe that children and women consume a larger part of the services provided by RHU supported facilities and besides that is our major aim. Through patient records for this period, it is estimated that **73.7 % of the patients who accessed medicines and supplies were women and young girls. 3.1% were men and young males while the rest were children below 10 years.** Although some few supplies are available and we await reports from other 4 facilities that received the relief support, we know that these numbers will only increase for women and their children.

We therefore, think that our focus should strongly address women and children’s issues especially those that address sexual reproductive health, Malaria, HIV and Maternal health. It is time that we started reviewing supplies based on the statistics of the facilities that are provided in their reports (if any).

Our purchases on mama kits, malaria RDT kits, Single Malaria treatment pills and all the maternal related services were given less than 2% of the total project budget. This was because the requests were weighed depending on the amount of money that had been released. Continuing support here on should either provide approved request entirely or avoid items to supplement more items directly benefiting women and or their children.

Network facilities are in the process of ensuring that their registries reflect The Third Doctors Engagement and contributions in order to maintain Records for local government consumption and evaluation of RHU engagements by the line government ministries.



Susan, Mariam and Sophia go through the lists for mothers waiting to receive mama kits
© Real Health Uganda 2020

RHU has over the years worked with TTD teams to support orphans in various locations around Wakiso and Kampala Respectively. Although there was no delegation from the TTD's grant dedicated towards orphans, Dr. Busonga contributed food and other supplies to orphans at the Bwayise and Kakiri orphanages. COVID-19 has a way it affected access to services and or resources for everyone but even more for the orphanages. **We continue to receive letters from these orphanages asking for food, medicines, and other resources required for them to survive.** They have faced the pandemic in all ways unimaginable and have lost some of their members to COVID-19. RHU Continues to ensure that all preventive measures are implemented at these orphanages to protect the children and their care takers

We have continued to link orphanages directly with Doctors and Nurses at facilities closer to them and we continue to try to support those facilities to ensure that the orphans will find supplies when they need them. Distance to these facilities however remains another problem. In Kakiri, Kalibville can now access health services at the center they proposed to us.

RHU and Kakiri Health center III are working together to provide services for over 87 children living at Kalibville Community Orphanage. Two years after their request they managed to apply for medical supplies and received their first batch in October 2020. They also benefited from the TTD grant that sent supplies to the facility in December 2020 ad a COVID-19 Relief package.



RHU's Emmanuel Butanaziba Delivers COVID-19 Relief food to Widows in Nakasongola © Real Health Uganda 2020



Balibona Angella was the first patient to benefit from a batch delivered to Kakiri Health Center III after waiting for three weeks.
© Real Health Uganda 2020

We are also receiving a lot of chatter on Mental Health issues that have hiked during the COVID-19 lock-down country wide, Since children are out of school and many locked in at home, their mental health has significantly deteriorated.

We are now in session to discuss way forward on how to support our network facilities to address challenges related to mental health. Ideas are still trickling in and decision will be reached by the end of May 2021. Cases so far reported include psychosis, bipolar disorder, and depression.

It is important to note that Butabika Hospital in Luzira is the only Psychiatric facility responsible for 47 Million Ugandans.

Its capacity to contain that number is up for debate considering its state and the number of staff it engulfs. We will lobby you our partners to support our causes this year including this one.



TRANSPORT

We only have 1 Van that is now 5 years Old. It Does deliveries of both emergency patients and support services or equipment that is required. It also serves as transport for all volunteers and visitors

The SOMI BUS Supports RHU Patient Emergency Transport and all RHU activities
© Real Health Uganda 2020

“ Our people depend on us to deliver, our challenges limit us to deliver. The health facilities are ready to support the process and our leadership is resilient but our communities do not have a voice.”

-Rehemah Nyanzi, Contributor
RHU Activities.



Eng. Rehemah Nyanzi's Vehicle was used to deliver medicines to Ikumbya HC III



Donors who supported the purchase of the SOMI BUS in 2016 Ms Kwon So Mi (left) and Ms Rehemah N (right)

We have imagined our work without the SOMIBUS, Overwhelmingly impossible. We have imagined our work without the support of people with private cars to support the integration of communities, impossible.

Our gratitude goes to Dr. Busonga for support towards the maintenance of the SOMI BUS. Without it, patients would not be picked from impassible roads, support services within RHU would fail but most of all, no means of transport would be available for

volunteers to carry on the work we do in communities.

We appreciate the contributors of the SOMI BUS. **We have gone back to the same people and asked them to help us with resources to purchase an extra vehicle and although we haven't received feedback, we hope that it comes right in time to address the challenges we have** because the SOMIBUS is always in repairs now considering the magnitude of the road networks in Uganda and where it goes for deliveries and or support services.

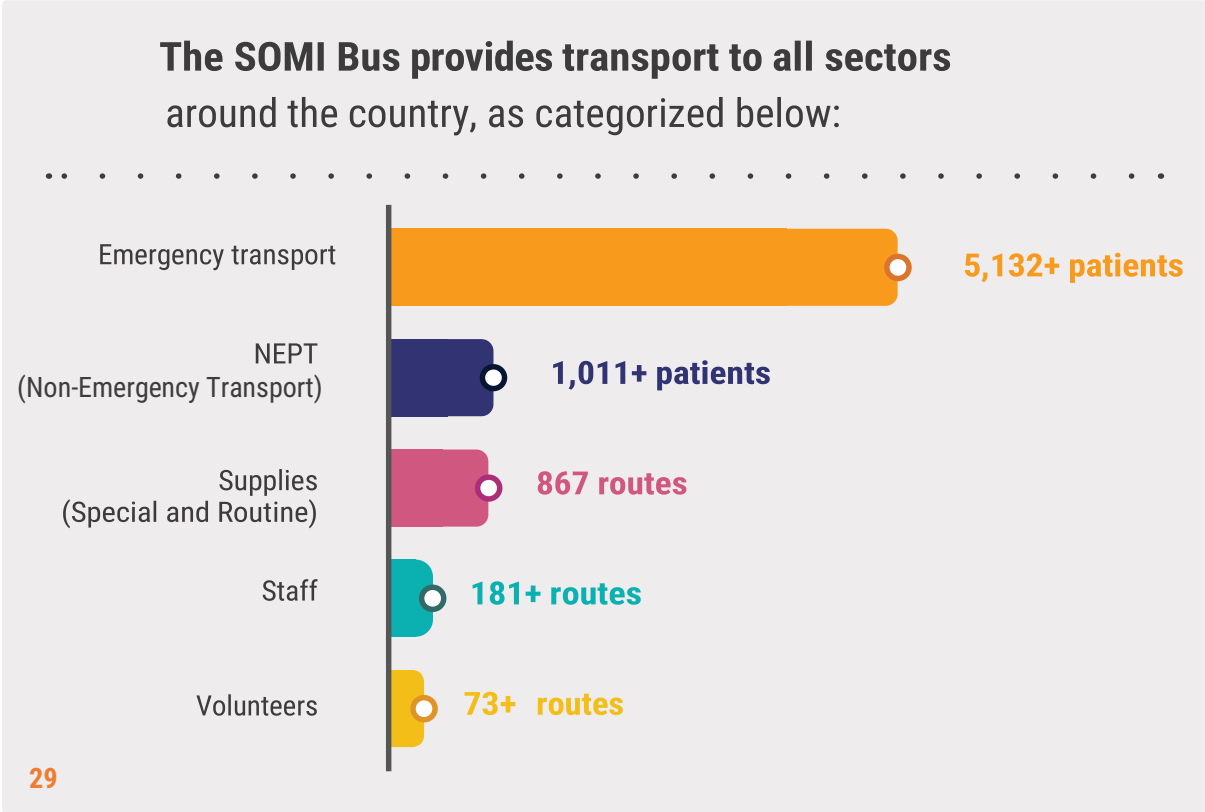
Patients that use the SOMI Bus make up 1.1% of the total patients so far treated through RHU Network facilities. Since 2016, the SOMI Bus has provided Emergency and Non-Emergency patient transport to 6143 patients .

Mileage to health centers is challenging but most of all the cost of healthcare in Uganda is becoming worse. Ugandans are now required to pay money to public facilities in order to receive medicines or even treatment. Our hope remains in ensuring that those medicines required are available and transport is one major factors that could guarantee deliveries.

The SOMI Bus transports volunteers and staff to various places and does not only delivery supplies for facilities but also supports orphanages activities around the country.

We therefore request that within the requirements supported, TTD considers funding us to purchase another vehicle to supplement deliveries and reduce on the time spent in order to save lives.

Moderate Vehicles (Vans or SUVs) in Uganda are sold between \$16000 to \$37000. These care vehicles that can withstand the terrain and support activities like those RHU executes



The SOMI bus delivers utilities for Orphans in kakiri’s Kalibville Community Orphanage in 2018
© Real Health Uganda 2018

WORKING TOGETHER

RHU has supported 558,454 patients in Uganda between 2012 and 2020. This could not have been possible without the support of volunteers, staff and our partners. We appreciate guidance and support provided by The Third Doctors, Ministry of Health and other Ugandan government departments and we aim at a more inclusive and informative systems that directly and positively impact our people.

That spirit of working together has made great impact to our people and created a network of people and institutions that believe in a system they have created themselves. **Engagement from here on should focus on increasing financial resources and volunteer engagements** especially to equip our network facilities with major emphasis on those treating huge populations.

The requirements of government towards civil society are to be reviewed and met but with limitations to avoid interference with agreements and or deeds to our people and partners. **We continue to face corrupt officials who try the extortion card in our work, we have learnt how to address and or report these issues.**

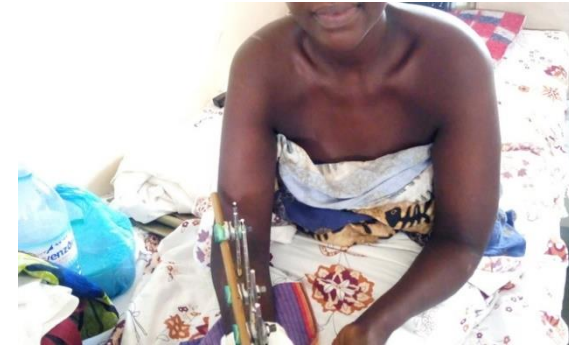


We want to Bolden our relationship with The Third Doctors and have a system that works for both of us. We value their contributions and want to make sure that those contributions are fully utilized to benefit our people with the most effective way possible. We cannot execute this if we don't develop a road map for such support. We would therefore like to develop a roadmap or schedule to know when and how which activities are to commence.



The System that we are currently Using to ensure that everyone working with RHU adheres and executes the duties assigned has the ability to ensure that resources are well managed and systems are well in place to protect the interests of our people and partners.

We have come from far, working hand in hand and ensuring that the Ugandan people can at least feel a sense of health care within their communities and we wouldn't stop support all efforts to ensure that happens. In fact we have engaged all government institutions and the executive body of this government to focus on healthcare and we need your help to ensure that we meet our end of the bargain in the restoration of hope for our people in communities that are fighting to survive in their own country.



A series of issues have emerged in our communities during the COVID-19 pandemic. We do not have any help and yet this is the time that we need it the most. Cases of mental health are increasing and Uganda has only one mental health hospital to serve 47 million Ugandans.

We therefore decided to start a mental health programme first at the RHU headquarters in Najeera and then through our network facilities across the country to provide emergency mental health services. Our Knowledge on mental health has increased over the years but the number of people seeking these services even at the RHU office is quite high and may require to hire extra staff before we involve healthcare facilities.

A review of agreements with network facilities will reflect the provision of Metal Health services especially for patients at the risk of suicide. Between March and December 2020, network facilities have registered 62,356 requests for mental health services and hospital records show up to 4,196 deaths to suicide. Please bear in mind that many cases do not reach the hospital.

We are also concerned about the time we take to re-engage and work directly with community

members. **The Uganda Korea medical camp provides an opportunity for RHU to directly provide treatment to people in different areas for a specific period of time. This engagement is rich with supplies, patient information, social services and most of all, a monitored system of healthcare services delivery but it's never consistent.**

RHU is requesting TTD to support us annually with minimal resources to carry out treatment in specific areas. During this activity, with possibility we would prefer members of the Korean team with expertise to be around but if not possible for them to be simply engage through other means



The UKMC proposals for 2021 have been concluded and discussions are ongoing. We hope that sharing these with TTD will struck a beginning of a journey that sees more patients access services directly through our teams.

Propositions aim at ensuring that the dates for UKMC become known to people in regions where the camps will be held on time, meaning that commitments should always come in early if there is any agreement to hold medical camps at all.

2. Expenditure account of Support payment

Revenue	Expenditure
Seo Jaehwan ₩ 1,000,000	₩ 3,686,130 for medicine
Cho Yuchan ₩ 1,000,000	₩ 300,000 for surgical tools
Noh Bonggeun ₩ 1,000,000	₩ 740,000 for sleeping bag
Ahn Hee ₩ 1,000,000	₩ 218,000 for mattress
Bae Eunjeong ₩ 500,000	₩ 120,550 for stationery and food
Kim Seonja ₩ 500,000	
₩ 5,000,000	₩ 5,064,680

FINANCIALS

Donations expenditure and financial summary

STATEMENT OF ACTIVITIES

Ushs.

Revenue

Dec 2020

Contributions And Grant	
Individuals (individual Members)	2,712,350
Charities And Foundation (The Third Doctors)	35,392,900
Gifts in Kind and Contributed Services (car maintenance)	728,000
Other income (RHU Consolidated)	7,783,100
Total revenues	46,616,350
Operating Expenses	
Programme Services (Medical Supplies Project Nov 2020)	44,799,000
General And Administration	1,089,350
Other Costs	728,000
Total operating expenses	46,616,350
Operating Surplus (deficit)	-

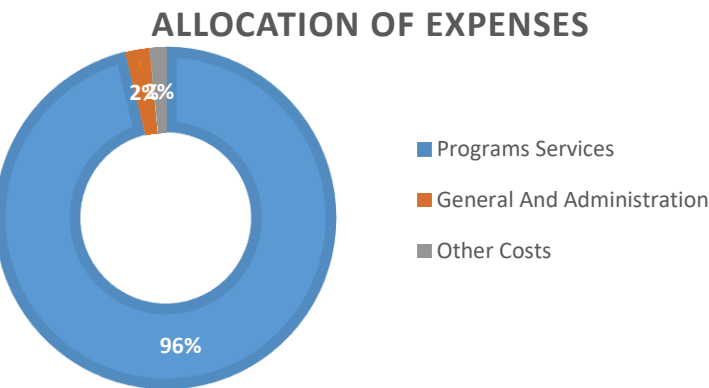
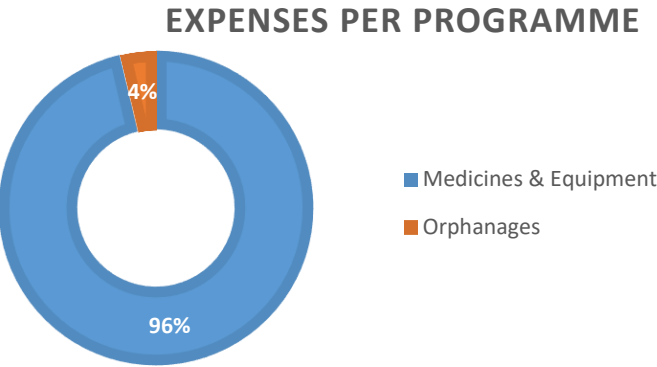
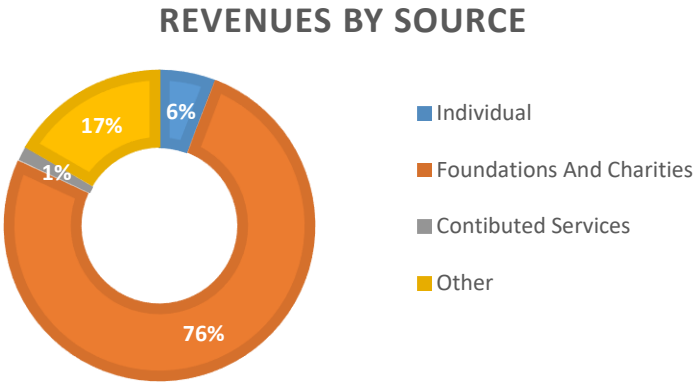
STATEMENT OF FINANCIAL POSITION

Ushs.

Assets

Dec 2020

Cash (still Available)	0.00
Receivables (from a member expected to clear their pledge)	316,000
Deposits And Inventories (medicines available)	753,000
Property And Equipment (Medical Equipment)	239,500
Total Assets	1,308,500
Liabilities and Net Assets	
Liabilities	
Money owed to project	0.00
Deferred Income	0.00
Total liabilities	0.00
Balances (net assets)	
With restriction	0.00
Without restrictions	0.00
Total balances	0.00
Total liabilities and net assets	0.00



Revenues

In project period, RHU received Ushs. 46.6 million in revenue. The revenue was comprised of Ushs. 2.7 million from individual donors (5.8% of total revenue), and Ushs. 35.3 million from The Third Doctors (76% of total revenue). In addition, RHU received Ushs. 728,000 in gifts in kind and contributed services (1% of total income), and Ushs. 7.7 million in other income 17% of total revenue).

Expenses

Our expenses continue to focus on catering for medicines and medical supplies. For this project, 96% of the total project costs were spent on Medical Supplies while 4% went to orphanages.

Surplus (deficit)

For purposes of reporting to TTD, a deficit of Ushs. 11,223,450 as extra expenses to the project.



LEADERSHIP

Ssenkya Collins (L) Busonga Eliezah (M) and Lyton Ndawula (R)
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Real Health Uganda Structure

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Irene Kalibbala	Enock Okello Otim
Lytton Ndawula	Alice Mpagi Bahegaine
Busonga Eliezah Titus	Ssenkya Collins
Nathan Nsereko	Jude Felix Tenywa

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Quality and Safety Committee

Hudson Ndugwa
Mahad Kalungi
Musa Ssemakula

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Latifah Nasuuna
Sheila Ssendawula
Agnes Nabadda

Audit, Risk & Finance Committee

Shamila Shuhaib
Nakitende Rehemah
Walter Evans Mayambala

Executive Committee

Nalumansi Josephine
Umar Buwembo
Prossy Muguluma
Annet Luyombya

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Chief Executive Officer
Jude Felix Tenywa
Chief Of Health And Human Services
Chief Strategist
Nathan Nsereko
Chief Financial Officer
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Chief Communications Officer
Tamalie Ssengabadda
Chief Development Officer
Peter Paul Opiro
Chief Medical Officer
Phiona Katugume
Chief Policy & Partnership Officer
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Umar Buwembo
Chief Community Networks
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General Counsel
Mariam Mukiibi
Chief Operations Officer

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Fahad Sekamanya
Central Region
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