### THE UNITED REPUBLIC OF TANZANIA

### PRESIDENT'S OFFICE

### REGIONAL ADMINISTRATION AND LOCAL GOVERNMENT



### KIGOMA REGIONAL SECRETARIET

### MAWENI REGIONAL REFERRAL HOSPITAL

## **COMPREHENSIVE HOSPITAL OPERATIONAN PLAN (CHOP) 2017/18**

Regional Commissioner's Office Health and Social Welfare Section P.O. Box 16 KIGOMA

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March, 2017

# TABLE OF CONTENTS

BASIC INFORMATION	ii
LIST OF MEMBERS OF HOSPITAL PLANNING TEAM	iii
ACKNOWLEDGEMENT	iv
ACRONYMS	V
EXECUTIVE SUMMARY	vii
CHAPTER 1: BASIC INFORMATION OF RRH	
1.1.List of RRHMT Members	
1.2.Hospital Profile	1
1.3 Hospital Layout	4
1.4 Hospital Organization	5
1.5 HRH inventory (numbers by cadres)	7
1.6 Assets information, Infrastructure and Utilities	11
1.7 Top Ten Diseases	17
CHAPTER 2: REVIEW OF PREVIOUS YEARS PLAN	
2.1. Hospital Income and Expenditures, 3 Years Trends	17
2.2. Hospital Unpaid Claims, Debts, Waiver and Exemptions	20
2.3. Annual financial and Technical Reports	23
2.4. Out of Pocket (Cash) Collection and GoT HoMIS)	28
2.5. Key Performance Indicators	
CHAPTER 3: CHOP OF THE YEAR	38
3.1. Strategy of the hospital	38
3.2. Problem Prioritization / Priority Areas	39
3.3. Costing of Planned Activities (Budgeting)	
CHAPTER 4: PLAN OF ACTION	60
CHAPTER 5: MONITORING AND EVALUATION PLAN	65
CHAPTER 6: RISKS AND ASSUMPTIONS	
REFERENCE AND BIBLIOGRAPHY	

# **BASIC INFORMATION**

Name of the hospital	Maweni Regional Referral Hospital		
<b>Hospital Code (Facility ID)</b>	108713-9		
Financial Year	2017/18		
Physical and postal address of	Lumumba Road, Maweni Area		
the Hospital	P. O. Box 16, Kigoma		
Responsible person for the	Name: Dr. Fadhili Kibaya		
Plan	E-mail: fadhili.kibaya@kigoma.go.tz Signature		
	Mobile: 0754-651498		
Approval from Assistant RAS	Name: Dr. Paul Chaote		
	E-mail: health@kigoma.go.tz	Signature	
	Mobile: 0755-696855		
	Date of approval:		
Approval from MoHCDGEC	Name:		
and PORALG	E-mail:	Signature	
	Mobile:		
	Date of approval:		
Date of Development (mm/yy)	March, 2017		

## LIST OF MEMBERS OF HOSPITAL PLANNING TEAM

Table P1: List of Members of Hospital Planning Team

S/N	NAME	TITTLE	POSITION
1	Dr. Fadhili Kibaya	Acting MOI	Chairperson
2	Elice Temu	HoD Administrative Services	Secretary
3	Josephine Nsanzugwanko	HoD Nursing Services	Member
4	Dr. Lucas Swagara	HoD Clinical Services	Member
5	Masaka C. Samson	HoD Pharmaceutical Services	Member
6	Dr. Boniface Kahulananga	HoD Diagnostic Services	Member
7	Hanzuruni Kasule	HoD Finance and Procurement	Member
8	Leonarda Mulishi	HoD HMIS and ICT	Member
9	Kulwa Makono	HoD EHTS	Member
10	Dr. Juma Msallenge	HoD Health Insurance and QIT	Member
11	Nice Msendo	RHMT Representative	Member
12	Dr. Samuel Kikaro	Private/NGO Representative	Member
12	Samwel Z. Tenga	Regional Planning Officer	Member
13	Cefilia Peter Kalima	Service user representative	Member

**Note**: Ideally there should be a representative from hospital board, but because the board has been expired, therefore board representative was replaced by service user representative.

**ACKNOWLEDGEMENT** 

On behalf of Maweni Regional Referral Hospital planning team, I would like to thank the

Regional Secretariat (RS) and Regional Health Management Team (RHMT) members for their

support on developing Comprehensive Hospital Operational Plan (CHOP).

I convey my sincere thanks to Ministry of Health, Community Development, Gender, Elderly

and Children (MoHCDGEC), and President's Office Regional Administration and Local

Government (PORALG) whom under their support, both technical and financial made us

possible to develop this plan that focus on improving health services at Kigoma Region.

I am indebted to Development Partners (DPs) for their continuing financial and technical support

in provision of quality health services for all. These DPs include; World Bank through East

Africa Laboratory Network program, THPS, Thamini Uhai, IOM, VSO and others.

Special thanks to RRHMT members for their tireless efforts and endeavors to make sure that the

work is completed in time, without forgetting the important work done by the secretary, drivers,

office supervisor, clerk assistants and office attendant; to all of them I convey my gratefulness.

Lastly but not least, my special appreciation goes to all hospital staffs for their extended

cooperation especially in providing the required information necessary for the planning process.

Dr. Fadhili Kibaya

Acting Medical Officer Incharge

Maweni Regional Referral Hospital

**KIGOMA** 

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### **ACRONYMS**

AIDS Acquired Immune- Deficiency Syndrome

AMO Assistant Medical Officer
ANO Assistant Nursing Officer

CDH Council Designated Hospital

CHOP Comprehensive Hospital Operational Plan

CO Clinical Officer

CTC Care and Treatment Clinic

DC District Council
DH District Hospital

DP Development Partner

DQA Data Quality Assessment

DRC Democratic Republic of Congo

EHTS Environmental Health and Technical Services

ENT Ear Nose and Throat

FBO Faith Based Organization

GoT HoMIS Government of Tanzania Hospital Management Information System

HIV Human Immuno-deficiency Virus

HMIS Health Management Information System

HoD Head of Department

HC Health Centre

HRH Human Resource for Health

HTC Hospital Therapeutic Committee

ICAP International Centre for HIV/AIDS Care and Treatment Program

ICT Information communication Technology

ICU Intensive Care Unit

IOM International Organization for Migration

IPD In Patient Department

IRC International Rescue CommitteeISS Internal Supportive Supervision

KCMC Kilimanjaro Christian Medical Centre

KPI Key Performance Indicator

MC Municipal Council
MO Medical Officer

MOI Medical Officer Incharge

MKUKUTA Mkakati wa Kukuza Uchumi na Kupunguza Umaskini Tanzania

MNCH Maternal Newborn and Child Health

MoHCDGEC Ministry of Health, Community Development, Gender, Elderly and Children

MSD Medical Store Department

NGO Non Governmental Organization

NHIF National Health Insurance Fund

NICU Neonatal Intensive Care Unit

NO Nursing Officer

NSSF National Social Security Fund

OC Other Charges

OPD Out Patient Department

PE Personal Emolument

PORALG President's Office Regional Administration and Local Government

PMTCT Prevention of Mother to Child Transmission

QIT Quality Improvement Team

RHMT Regional Health Management Team

RRH Regional Referral Hospital

RRHMT Regional Referral Hospital Management Team

RS Regional Secretariat

SWNS Social Welfare and Technical Services

TC Town Council

TANESCO Tanzania Electrical Supplies Company

THPS Tanzania Health Promotion Support

VCT Voluntary Counselling and Testing

VSO Voluntary Service Overseas

### **EXECUTIVE SUMMARY**

This is Maweni Regional Referral Hospital (RRH) CHOP for the year 2017/18. The process of developing this plan involved RRHMT members and all key stakeholders. This plan involved various sources of fund with a focus on addressing three service areas of RRH (clinical services, support services and research and training) and 10 functions of RRHMT (Planning, Monitoring and reporting, Human resource management, Finance management, Material resource management, Information management and research, Referral system, Supportive supervision, Health promotion and disease prevention and Emergency preparedness and response). The National Health policy 2007, Kigoma RHMT strategic plan and other health guidelines have been utilized during developing this plan and hence make it comprehensive

In the year 2015/16, RRH planned to conduct 18 activities, up to the end of the year, four activities were fully implemented, nine were partially implemented and five were not implemented, because fund was not released as planned. It has the following financial status;

**Table E1: Financial Status of Previous Year (2015/16)** 

Source of Fund		Annual Budget	<b>Opening Balance</b>	Fund Received	<b>Funds</b>	Expenditure	Closing Balance
					Available		
	PE	2,840,709,000	0	2,742,918,400	2,742,918,400	2,742,918,400	-
Block	DEV	796,500,000	0	-	-	0	-
Grant	OC (Others)	152,250,000	0	66,083,060	66,083,060	66,061,160	21,900
	OC (On call)	180,000,000	0	119,080,000	119,080,000	118,285,000	795,000
	User Fee	240,000,000		301,159,293			
	NHIF	324,000,000		270,284,309			
Cost	NSSF	17,600,000	25,878,039	8,487,500			
Sharing	Others (IOM, IRC, AAR, TANESCO)	18,400,000	23,676,037	7,994,580	613,803,721	552,702,838	61,100,883.00

ICAP/THPS	38,501,520	0	29,900,774	29,900,774	30,207,574	(306,800)
East Africa Laboratory	60,000,000	0	0	-	-	-
Receipt in Kind (MSD)	280,132,450	-150,639,858	193,195,139	42,555,281	207,143,200	(164,587,918.61)
Total	4,948,092,970	(124,761,819)	3,739,103,055	3,614,341,236	3,717,318,172	(102,976,936)

During that year, the following achievements were made; accreditation to one star to Hospital Laboratory as per WHO/AFRO standards, RRH managed to conduct internal supportive supervision monthly in all 15 departments and 2895deliveries were conducted. The hospital submitted monthly HMIS reports timely and conducted one session on data quality management. The status of tracer medicine and supplies is good, as evidenced by availability of all tracer medicine and supplies. In addition; 105 staffs attended training on various health issues. Generally hospital managed to accomplish its mission that is providing quality health services.

In the first eight months of 2016/17, hospital managed to install GoT HoMIS to reception, cash collection point, dispensing and pharmacy. This resulted into increasing amount of out of pocket collection by 51%. The future plan is to install the system in all remaining hospital sections by June 2018. In the past three years, the amount of out of pocket collected is increasing from one year to another.

In the year 2015/16 RRH faced challenges that affected implementation of the planned activities. The approved OC budget did not correlate with the actual needs of the hospital, which caused by 39.5% reduction of the OC budget. In addition, RRH faced the challenge of late or none release of fund. In that financial year, it received 43% of the approved budget for OC (others), 66% of on call allowance and 69% of the approved budget for medicine and supplies that is deposited at MSD. This made the Hospital to procure medicine and supplies at MSD on credit, resulted negative closing balance. Hospital failed to cover most of running costs as required; this including payments of suppliers and employees statutory such on call allowance, post-mortem, uniform allowance, leave, medical and dental refunds, training fees and housing. Currently; the hospital is facing with challenges of late payment of bills from health insurances companies, up to 31st December 2016, it has cumulative unpaid claims amounting to Tshs.93,517,474. Decreasing and non release of fund from Central Government resulting into hospital

to have cumulative debts amounting Tshs.298,643,066 up to 31st December 2016. In addition, rehabilitation of pharmacy (supposed to be completed by June 2014) is not completed to date; therefore negatively affect storage of medicine.

In addressing those challenges, the following measures were put forward; implementing KAIZEN theme for increasing revenue collection from cost sharing (both out of pocket and insurance); through establishing electronic payment system (GoT HoMIS), improving availability of medicine and timely submission of claims. Solicit other sources of fund such as from development partners, NGOs and community. In addition, the reminding letter was written to debtors.

In the year 2017/2018, RRH plans to implement 22 activities amounting to Tsh **5,548,477,560**. Sources of fund and its distribution are shown in the following tables;

Table E2: Estimated Budget for the Year 2017/18

	Source of Fund	Annual Budget
	PE	2,823,027,960
Block	DEV	799,000,000
Grant	OC (Others)	250,000,000
	OC (On call)	104,000,000
	User Fee	480,000,000
Cost	NHIF	600,000,000
Sharing	NSSF	24,000,000
	Others (IOM, IRC, AAR, TANESCO)	96,000,000
THPS		65,108,400
East Afri	ica Laboratory	60,000,000
Receipt i	in Kind (MSD)	247,341,200
Total		5,548,477,560

**Table E3: Budget Distribution** 

_		Block Grant					East Africa		% of
Department	P.E	OC	Development	Cost Sharing	MSD	THPS	Lab	Total	the total
Administrative Services	2,823,027,960	349,750,000	454,000,000	224,020,000	-	-	-	3,850,797,960	69.40
Pharmaceutical Services	-	-	300,000,000	721,000,000	247,341,200	-	-	1,268,341,200	22.86
Clinical Services	-	-	-	-	-	65,108,400	-	65,108,400	1.17
Diagnostic Services	-	-	-	12,000,000	-	-	60,000,000	72,000,000	1.30
EHTS	-	1,000,000	-	142,600,000	-	-	-	143,600,000	2.59
SWNS	-	3,250,000	-	33,300,000	-	-	-	36,550,000	0.66
Nursing Services	-	-	-	1,900,000	-	-	-	1,900,000	0.03
Finance and Procurement	-	-	-	3,100,000	-	-	-	3,100,000	0.06
Health Insurances and QIT	-	-	-	11,400,000	-	-	-	11,400,000	0.21
HMIS and ICT	-	-	45,000,000	50,680,000	-	-	1	95,680,000	1.72
Total	2,823,027,960	354,000,000	799,000,000	1,200,000,000	247,341,200	65,108,400	60,000,000	5,548,477,560	100.00
Percentage of the total	51%	6%	14%	22%	4%	1%	1%	100%	

Implementation of these activities will enable the hospital to accomplish its mission, hence addressing Regional health challenges including MNC health, epidemics, communicable disease and non communicable diseases; therefore clear the way towards improved socio-economic status of the people in Kigoma Region.

Dr. Paul Chaote Regional Medical Officer

**KIGOMA** 

**CHAPTER 1: BASIC INFORMATION OF RRH** 

#### 1.1. List of RRHMT Members

No	Name	Designation	Contact Address
1	Dr. Fadhili Kibaya	Acting MOI	0754-651498
2	Elice Temu	HoD Administrative Services	0759-898091
3	Josephine Nsanzugwanko	HoD Nursing Services	0756-328567
4	Dr. Lucas Swagara	HoD Clinical Services	0754-070353
5	Masaka C. Samson	HoD Pharmaceutical Services	0752 649784
6	Dr. Boniface Kahulananga	HoD Diagnostic Services	0754-331444
7	Hanzuruni Kasule	HoD Finance and Procurement	0754-390607
8	Joseph Kafywimbi	HoD Social Welfare and Nutritional Services	0753-528030
9	Leonarda Mulishi	HoD HMIS and ICT	0717-143295
10	Kulwa Makono	HoD Environmental Health and Technical Services	0756-209703
11	Dr. Juma Msallenge	HoD Health Insurance and QI	0756-238444

### 1.2. Hospital Profile

### 1.2.1. Catchment area, population and referral system

Maweni Regional Referral Hospital is the Regional Referral Hospital of Kigoma Region. It was opened in 1972, aimed at providing health services to people of Kigoma urban. It is now serve as level II health facility which receives patients from all Councils in the Region and it is a referral centre for refugees from Democratic Republic of Congo (DRC) and Burundi.

Kigoma Region is located in the Western Part of Tanzania. It share borders with four Regions and two Countries: Kagera Region and Republic of Burundi to the North; Katavi to the South; Tabora and Geita to the East and Democratic Republic of Congo to the West. It lies between latitudes 3.6 and 6.5 degrees and longitudes 29.5 and 31.5 east of the Greenwich.

The Region covers 45,087 square kilometres and is divided into six Districts and eight Councils. The Councils are Kakonko DC, Kibondo DC, Kasulu DC, Kasulu TC, Buhigwe DC, Uvinza DC,

Kigoma DC and Kigoma/Ujiji MC. Further the Regional is divided into 21 divisions, 139 Wards and 482 Villages/Mitaa. It has a population of 2,361,883 and three Council Hospitals, which are Kibondo District Hospital, Kasulu Town Hospital and Baptist Council Designated Hospital (CDH). Five Councils have no District Hospital; therefore they depend on either Regional Referral Hospital or nearby Council Hospitals. In addition, the Region has other two Hospitals which are owned by Faith Based Organizations (FBOs); these are Kabanga Referral Hospital and Heri Mission Hospital. Generally, the Region has 278 health facilities, which are 6 hospitals, 32 health centres and 240 dispensaries.

Maweni Regional Hospital was granted Referral Hospital certificate through Government Gazette No. 828 of 12 November, 2010. The hospital is a public health facility fully owned by the Government. It is under the Ministry of Regional Administration and Local Governments and is directly governed by the Regional Administrative Secretary.

The hospital has a bed capacity of 300 beds (but available is 159, because 3wards has been closed because they are not in good condition, they need rehabilitation) in 11 wards and has a total number of 232 staffs. The hospital is managed by Hospital Management Team, consisting of 11 members. In addition, it has two sub teams/committee, which are; Hospital Therapeutic committee and Quality Improvement Team (QIT).

RRH receives referral from the following facilities; Baptist CDH, Kasulu Town Hospital, Kibondo District Hospital, Kabanga Referral Hospital, Heri Mission Hospital, Ujiji Health Centre (HC), Bitale HC, Mwamgongo HC, Ilagala HC, Buhingu HC, Kalya HC and Nguruka HC. Moreover, it refers the patients to Bugando Medical Centre, Muhimbili National Hospital and Kilimanjaro Christian Medical Centre (KCMC).

Table 1.2.1: Catchment, population and referral system

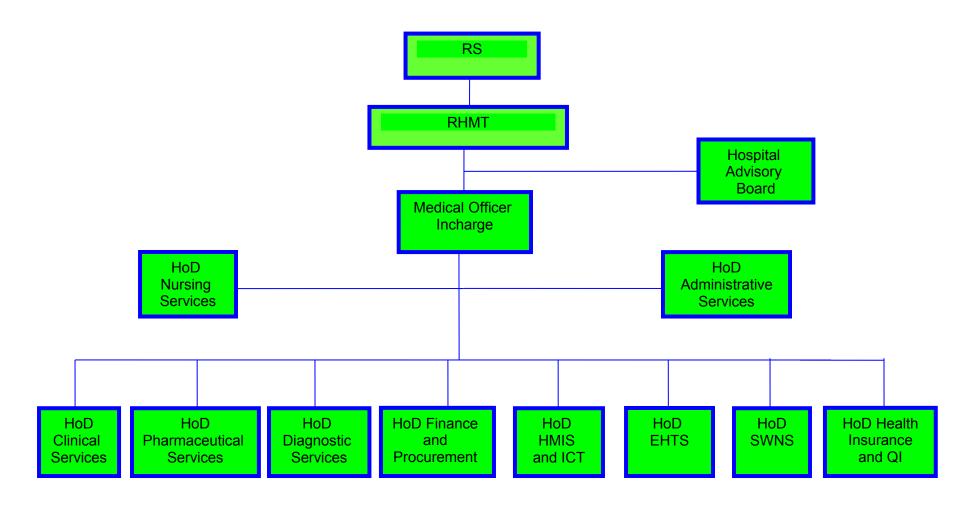
Items to check	Data and Information
Hospital catchment area	45,087 Square Kilometres
Population in catchment area	2,361,883
Number of Council Hospital in the Region	3
Brief explanation of referral	The referral system is from Dispensaries to
	Health centres to district hospital up to
	Regional Referral Hospital. The hospital
	received referral from district hospitals and
	health centres this is because some of the
	council have no district hospital.

# 1.3 Hospital Layout



## 1.4 Hospital Organization

## 1.4.1 Hospital Organogram



# 1.4.2 Department and Sections

Table 1.4.2.1: Sub Departments, sections and units in the hospital

	Department/Sub Department	Sections / Units	Yes	No
1	Out Patient	Casualty		V
		Internal medicine clinic	V	
		Surgical clinic	V	
		RCH clinic		V
		Diabetic clinic	V	
		CTC (VCT, PMTCT etc.)	V	
		TB / Leprosy	V	
		Dental clinic	V	
		Eye clinic	V	*
		ENT clinic		V
		Others: General OPD	V	
2	Surgery	Operating Theatre	V	
		CSSD		V
		Male Surgical Ward	V	
		Female Surgical Ward	V	
3	Internal medicine	Male medical Ward	V	
		Female medical Ward	V	
		ICU		V
4	Paediatric	Paediatric ward	V	
		NICU		V
		Neonatal ward	V	
5	Obstetrics and Gynaecology	Labour room	V	
		Antenatal ward	V	
		Postnatal ward	V	
6	Orthopaedic	Orthopaedic		V
		Physiotherapy	V	

	Department/Sub Department	Sections / Units	Yes	No
7	Psychiatric	Psychiatric ward	V	
8	Pharmacy	Dispensing	V	
		Pharmacy store	V	
9	Radiology	CT scan		V
		Ultra sound	V	<del></del>
		X-Ray	V	
10	Laboratory	Clinical laboratory	V	
		Mortuary	V	
11	Administration	Medical record and registry	V	
		Accounting	V	
		General Store (procurement)	V	
		Workshop (Medical		V
		engineering)		
		Workshop (others)		V
		IT		V
		Hospital Outside	V	
		Environment		
12	Kitchen		V	
13	Laundry		V	
14	Health Care Waste management	Incinerator	V	
		Placenta-pit	V	
15	Hospital Environment Office		V	
			1	

# 1.5 HRH inventory (numbers by cadres)

Table 1.5.1: HRH Inventory

No	Cadres	Required	Available	Deficit
1	Specialist	21	2	19
2	Medical Officer	29	5	24

No	Cadres	Required	Available	Deficit
3	Assistant Medical Officer	22	10	13
4	Dental surgeon	2	1	1
5	Assistant Dental Surgeon	3	0	3
6	Dental Therapist	2	1	1
7	Occupational Therapist	1	1	0
8	Optometrists	2	2	0
9	Nursing Officer	30	4	26
10	Assistant Nursing Officer	77	40	37
11	Nurse	91	57	34
12	Health Laboratory scientist	1	0	1
13	Health Laboratory Technologist	8	2	6
14	Assistant Laboratory Technologist	6	6	0
15	Dental Laboratory Technologist	2	0	2
16	Radiographer	1	2	+1
17	Assistant Radiographer	2	0	2
18	Bio Medical Engineer	1	0	1
19	Bio Medical technologists	1	1	0
20	Pharmacist	1	0	1
21	Pharmaceutical technologists	3	3	0
22	Assistant pharmaceutical Technologists	5	2	3
23	Physiotherapist	1	1	0
24	Assistant Physiotherapy	2	0	2
25	Nutritionist	2	0	2
26	Environmental Health Officer	1	0	1
27	Assistant Environmental Health Officer	2	5	+3
28	Technologist/Technician(Prosthetic)	1	0	1
29	Assistant Technologists	2	0	2
30	Epidemiologist	1	0	1
31	Economist/ M & E Specialist	1	0	1

No	Cadres	Required	Available	Deficit
32	Social Welfare Officer	5	1	4
33	ICT Technician	1	0	1
34	Data Clerk	1	0	1
35	Medical Record Technician	2	0	2
36	Medical recorder	1	0	1
37	Mortuary Attendant	3	0	3
38	Medical Attendant	97	65	32
39	Health Secretary	1	1	0
40	Personal secretary	1	0	1
41	Accountant	1	1	0
42	Assistant Accountant	1	0	1
43	Accounts Assistant	2	0	2
44	Procurement & Supplies Officer	1	1	0
45	Assistant Procurement & Supplies Officer	1	0	1
46	Cook	2	0	2
47	Kitchen Attendant	2	1	1
48	Drivers	8	4	4
49	Security guard.	12	1	11
50	Clinical officer	0	6	+6
51	Electrical Technician	0	1	+1
52	Plumber	0	1	+1
53	Assistant records management	0	3	+3
54	Assistant office management	0	1	+1
55	Laundry	0	0	0
	Total	466	232	234

**Source**: Hospital HRHIS reports

**Analysis**: Shortage of HRH at the hospital is 50.2%. It affects negatively capacity of the hospital to provide referral services at Regional level.

Table 1.5.2 Staff Turnover Rate

Year	Cadre	Move in (No)		Move out	
1 cai		No	Comment	No	Comment
	Health secretary	1	New employment	-	
	Dental therapist	1	New employment	-	
	Assistant nursing officer	1	New employment	2	Retirement
	Assistant dental officer	-	-	1	Retirement
2013/14	Medical attendant	-	-	1	Death
2013/14	AMO	-	-	1	Retirement
	Clinical officer	-	-	2	Retirement
	Nurses	-	-	2	
	Medical attendant	-	-	3	
	Sub total	3		12	
	Health officer	1	New employment	-	
	Assistant medical officer	1	New employment	-	
	Nurse	20	New employment	-	
	Assistant nursing officer	11	10 New employment and 1 transfer in	1	Transfer out
	Medical Officer	2	New employment	1	
	Medical attendant	1	New employment		
2014/15	Radiographer	1	New employment		
	Assistant dental officer	-	-	1	Death
	Dhobi	-	-	1	Retirement
	Supplies officer	-	-	1	Retirement
	Assistant health officer	-	-		Retirement
	AMO	-	-	3	2 retirement, one resignation
	Medical attendant	-	-	1	Retirement
	Sub total	37	-	9	

Year	Cadre	Move in (No)			Move out	
1 ear	Caure	No	Comment	No	Comment	
	Assistant nursing officer	1	Transfer in	-		
	Nurse	1	Transfer in	1	Transfer out	
	Medical attendant	-	-	1	Death	
	Assistant medical officer	-	-	1	Death	
	Clinical officer	-	-	2	1 death, 1 resignation	
2015/16	Specialist (physician)	-	-	1	Resignation	
	Assistant Nursing officer	-	-	5	Retirement	
	Medical attendant	-	-	4	Retirement	
	Nurse	-	-	6	Retirement	
	Accountant	-	-	1	Retirement	
	Medical attendant	-	-	1	Retirement	
	Sub total	2		23		
	Grant total	42		44		

**Source**: Hospital HRH reports

**Analysis**: Number of staffs moving out is higher (44) compared to number of staffs moving in (42). The condition is worse in case of clinicians (specialist, MO, AMO and CO) where 10 were moving out compared to 4 moving in; it negatively affect health services delivery in the hospital.

## 1.6 Assets information, Infrastructure and Utilities

Table 1.6.1: Information of assets

No	Type of Assets	Quantity	Current status	Recommendation
1	Generator	5	3 functional, 2 not	Repair of generator and
			functional	procure/ repair of
				automation
2	Vehicles	2	Functional	One is old, procurement of
				new vehicle is needed

No	Type of Assets	Quantity	Current status	Recommendation
3	Ambulance	1	Functional	It is in good condition.
4	Washing Machine	5	3 functional and 2 not	Repair the two broken
			functional	machines
5	Drying machine	1	Functional	
6	Mortuary	2	Functional	They are not enough and
	Refrigerators			they are too old
7	X ray machine	2	Functional	They are in a good
				condition
8	Ultra Sound Machine	2	1 functional, 1 not	Repair of broken machine
			functional	
9	X ray film processor	2	Functional	Unrepaired, procure a new
				one
10	CR machine	1	Functional	Regular PPM
11	Dental chairs	4	Three are working and	Repair of broken dental
			one not working.	chair
12	Dental machine	1	Functional	Regular PPM
13	Light cure machine	2	Functional	
14	Amalgamator	2	1 functional, 1 not	Need repair
			functional	
15	Examination lamp	4	3 functional, 1 not	Need repair
			functional	
16	Suspension mortor	1	Functional	Regular PPM
17	Operating light	3	Functional	Regular PPM
18	Operating table	4	Functional	Need maintenance
19	Suction machine	13	12 functional, 1	Repair of broken machine
			functional	
20	Oxygen concentrator	17	Functional	Regular PPM
21	Autoclave	9	7 functional, 2 not	Repair of broken machine
			functional	

No	Type of Assets	Quantity	Current status	Recommendation
22	Anaesthesia machine	5	3 functional, 2	Repair of broken machine
			functional	
23	Patient monitor	2	1 functional, 1 not	Repair of broken machine
			functional	
24	Ventilator	1	Not functional	Repair of broken machine
25	Diathermy machine	2	Functional	Regular PPM
26	Fiber optic light	1	Functional	Regular PPM
	source			
27	Pulse oximeter	2	Functional	Regular PPM
28	GeneXpert machine	1	Functional	Regular PPM
29	Haematology analyzer	4	2 functional, 2 not	Repair of broken machine
			functional	
30	Full chemistry	1	Functional	Regular PPM
	analyzer			
31	Chemistry analyzer	1	Functional	Regular PPM
32	BD FACS count	2	Functional	Regular PPM
33	Bio safety cabinet	1	Functional	Regular PPM
34	Fume guard	1	Functional	Regular PPM
35	Lab incubator	1	Functional	Regular PPM
36	Water bath	1	Functional	Regular PPM
37	Centrifuge	2	Functional	Regular PPM
38	Microscope	1	Functional	Regular PPM
39	Laboratory	2	Functional	Regular PPM
	refrigerator			
40	PH meter	1	Functional	Regular PPM
41	Dry heat sterilizer	2	Functional	Regular PPM
42	Haemo control	2	Functional	Regular PPM
43	Vortex mixer	1	Functional	Regular PPM
44	Lab rotator	1	Functional	Regular PPM

No	Type of Assets	Quantity	Current status	Recommendation
45	Dry heat sterilizer	5	Functional	Regular PPM
46	ECG machine	1	Functional	Regular PPM
47	Operating eye microscope	1	Functional	Regular PPM
48	Slit lamp	2	Functional	Regular PPM
49	Infant warmer	2	1 functional, 1 not functional	Repair of broken machine
50	Incinerator	2	1 functional, 1 not functional	Repair of broken machine
51	Cryotherapy machine	2	1 functional, 1 not functional	Repair of broken machine
52	Computer	12	Functional	Regular PPM
53	Printer	9	Functional	Regular PPM
54	Photocopy machine	1	Functional	Regular PPM

Table 1.6.2: Information of Infrastructure

No	Type/Name	Current Status	Recommendation
1	Administration building	In good condition	Maintaining PPM
	(RHMT)		
2	Administration building	Not in good condition	Need rehabilitation
	(RRHMT)		
3	Eye clinic	In good condition	Maintaining PPM
4	OPD	Outdated and small building	Construction of new
			building that will also
			accommodate
			emergency medicine
			department
5	Dental	Not in good condition	Need rehabilitation

No	Type/Name	Current Status	Recommendation
6	Vaccine store, pharmacy store	Pharmacy store was crossed	Completion
	and conference hall	since 2014 for rehabilitation, up	rehabilitation of
		to date, it is not completed	pharmacy store
7	Laboratory	In good condition	Maintaining PPM
8	CTC	Inadequate space	Needs expansion
9	Mortuary	Inadequate space	Needs expansion
10	General store and laundry	Not in good condition	Needs rehabilitation
11	Kitchen	Not in good condition	Needs rehabilitation
12	Theatre and radiology	Not in good condition	Need rehabilitation
13	Physiotherapy and	In good condition	Maintaining PPM
	orthopaedic workshop		
14	Ward 1	Good but inadequate space and	Building a new
		no operating theatre	maternity block
15	Ward 2A	In good condition	Maintaining PPM
16	Ward 2B	In good condition	Maintaining PPM
17	Ward 3	In good condition	Maintaining PPM
18	Ward 4	In good condition	Maintaining PPM
19	Ward 5	In good condition	Maintaining PPM
20	Ward 6	Not good and crossed	Needs rehabilitation
21	Ward 7	Not in good condition	Needs rehabilitation
22	Ward 8	In good condition	Maintaining PPM
23	Ward 9	In good condition	Maintaining PPM
23	Ward 10	Not good and crossed	Needs rehabilitation
24	Electricity system	Old and not in good condition	Needs rehabilitation
25	Water system	Old and not in good condition	Needs rehabilitation
26	Sewage system	Old and not in good condition	Needs rehabilitation

**Analysis**: Majority of hospital buildings need rehabilitation. For rehabilitation of hospital buildings and infrastructure, almost Tsh.1,850,000,000 is needed.

Table 1 6 3 Main Utilities

Utility	Brief Description
Electricity	The hospital is connected to TANESCO power supply and it has five
	standby generators, three are in good condition.
Water	It is connected to Municipal water network with reserve tank of
	almost100,000 litres.
Sewage	It has sewerage system that is connected to septic tank and soaks away
	pits locally made. In Kigoma/Ujiji Municipal, there is no municipal
	sewerage system and waste stabilization pond.
Communication	There is intercom connection, land line and mobile telephone. No
	internet connection

**Comments**: There is no Sewerage system and waste stabilization pond in the Municipal, hence increasing the cost of sewage management

Table 1.6.3 Bed Capacity

Available Beds	Required Beds
159	300

**Analysis**: The number of available beds is lower compared to the required beds. This is because of the following reasons; some wards have been closed due to wear and tear, shortage of beds for ward 9 and lack of orthopaedic ward, ICU and emergency medicine wards

# 1.7 Top Ten Diseases

Table 1.2.5: Top Ten Diseases

No	DESEASE	M	F	Total	DESEASE	M	F	Total
	OPD				IPD			
1	Malaria	1525	1801	3326	Malaria	1120	1425	2545
2	Diabetes mellitus	871	1100	1971	Anaemia	439	419	858
3	Upper RTI	803	968	1771	Pneumonia	269	229	498
4	Hypertension	572	743	1315	Neonatal septicaemia	181	168	349
5	UTI	330	791	1121	UTI	106	120	226
6	Pneumonia	534	569	1103	Hypertension	73	137	210
7	Anaemia	446	555	1001	Diarrhoea diseases	86	167	167
8	Diarrhoea	404	471	875	Diabetes Mellitus	68	75	143
9	Peptic Ulcers	335	345	680	Fracture	93	46	139
10	Neonatal Sepsis	186	224	410	Sickle Cell	64	45	109

Source: HMIS reports 2016

Analysis: Malaria is leading disease both outpatient and inpatient; seven diseases occurred both in outpatient and inpatient

## **CHAPTER 2: REVIEW OF PREVIOUS YEARS PLAN**

# 2.1. Hospital Income and Expenditures, 3 Years Trends

Table 2.1.1: Hospital Income and Expenditure, 3 Years Trends

Financial Year		Source of Fund	Annual Budget	Fund Received	Expenditure
	D1 1	PE	1,737,636,000	1,737,636,000	1,737,636,000
	Block Grant	OC (Others)	329,013,000	140,079,722	140,079,722
	Grant	OC (On call)	1,737,636,000 1,737,636,000 1, 329,013,000 140,079,722 333,240,000 177,678,220 250,192,000 229,818,861 201,180,456 204,000,000 5,005,000 10,724,300 21,148,640 21,139,519 59,996,670 280,132,450 141,546,291 3,215,358,760 2,724,805,039 3, 2,840,709,000 2,742,918,400 2, 796,500,000 119,080,000 119,080,000 240,000,000 301,159,293 324,000,000 270,284,309 17,600,000 8,487,500 17,600,000 7,994,580 38,501,520 29,900,774 60,000,000 0 280,132,450 193,195,139	177,678,220	
		User Fee	250,192,000	229,818,861	
	Cost	NHIF		201,180,456	551 507 607
2014/15	Sharing	NSSF	204,000,000	5,005,000	551,527,607
		Others (IOM, IRC)		10,724,300	
	ICAP		21,148,640	21,139,519	21,139,519
	East Afric	ea Laboratory	59,996,670	59,996,670	59,996,670
	Receipt in	Kind (MSD)	280,132,450	141,546,291	338,480,473
	Total		3,215,358,760	2,724,805,039	3,026,538,211
		PE	2,840,709,000	2,742,918,400	2,742,918,400
	Block Grant	DEV	796,500,000	-	0
		OC (Others)	152,250,000	66,083,060	66,061,160
		OC (On call)	180,000,000	119,080,000	118,285,000
		User Fee	240,000,000	301,159,293	
	Cost	NHIF	324,000,000	270,284,309	
2015/16	Sharing	NSSF	17,600,000	8,487,500	552,702,838
		Others (IOM, IRC, AAR, TANESCO)	18,400,000	7,994,580	
	ICAP/TH	PS	38,501,520	29,900,774	30,207,574
	East Afric	ea Laboratory	60,000,000	0	-
	Receipt in	Kind (MSD)	280,132,450	193,195,139	207,143,200
	Total		4,948,092,970	3,739,103,055	3,717,318,172

		PE	2,823,027,960	1,247,393,651	1,247,393,651
	Block	DEV	300,000,000	-	-
	Grant	OC (Others)	300,000,000	150,000,000	150,000,000
		OC (On call)	357,240,000	-	-
		User Fee	240,000,000	220,225,265	226,791,800
2016/17 UP to	Cost	NHIF	324,000,000	93,280,006	
31st December 2016	Sharing	NSSF	17,600,000	-	
2010		Others (IOM, IRC, AAR, TANESCO)	18,400,000	2,901,000	
	THPS		38,501,520	30,256,480	27,058,640
	East Africa	a Laboratory	60,000,000	45,955,450	28,399,893
	Receipt in	Kind (MSD)	247,341,200	154,442,264	103,499,800
	Total	·	4,726,110,680	1,944,454,116	1,783,143,784

**Source**: Hospital CHOPs quarterly implementation reports

**Analysis**: The trends show that cost sharing revenue collection is increasing from one year to another. It was Tshs. 446,728,617, Tshs. 587,925,682 and Tshs. 316,406,271 in 2014/15, 2015/16 and the two quarters of 2016/17 respectively. In some source of funds such as MSD, there is over expenditure, because of hospital made procurement on credit. In case of cost sharing (2014/15) expenditure is high compared to amount received, opening balance fund was used. For ICAP/THPS 2015/16, because RRHMT uses the same account with RHMT, therefore RHMT fund was used.

Table 2.1.2 Medicine, Dental, Medical Equipments, Diagnostic and Hospital Supplies Expenses

Financial Year	Source	, , ,	Amount (Tshs)		
	Receipt in k	Kind (MSD)	338,480,473		
2014/15	Cost Sharin	g	273,841,736		
	Total		612,322,209		
	Receipt in k	Kind (MSD)	207,143,200		
2015/16	Cost MSD		149,916,200		
	Sharing	Private	141,458,586		
	Total		498,517,986		
2016/17 (Up to 31st	Receipt in k	Kind (MSD)	103,499,100		
December 2016)	Cost	MSD	113,779,912		
	Sharing	Private	59,270,500		
	Total		276,549,512		

**Source**: CHOP quarterly implementation report **Analysis**: Value of medicine needed per year is Tshs. 4,577,367,000. The amount budgeted/consumed is Tshs. 1,658,181,395

## 2.2. Hospital Unpaid Claims, Debts, Waiver and Exemptions

Table 2.2.1: Unpaid Claims (up to 31st December 2016)

No	<b>Particulars</b>	Amount (Tshs)
1	NHIF	22,552,974
2	NSSF	8,487,500
3	IOM	58,729,600
4	IRC	3,131,600
5	TANESCO	615,800
	Total	93,517,474

Source: CHOP second quarter 2016/17 implementation report

Analysis: IOM has large amount of unpaid claims and TANESCO is the least. The reminding letter has been sent to debtors.

Table 2.2.2 Hospital Debts, 3 Years Trends

			Financial Year	r	
No	Particulars	2014/15	2015/16	2016/17 (up to 31st December 2016	Total
1	Leave	19,268,400	6,638,200	6,638,200	32,544,800
2	Medical expenses	14,741,200	12,297,700	11,781,100	38,820,000
3	Training	5,409,000	0	0	5,409,000
4	On call allowance	0	65,005,000	47,357,000	112,362,000
5	Uniform allowance	0	12,720,000	0	12,720,000
6	Postmortem allowance	0	13,650,000	0	13,650,000
7	Electricity charges	0	33,313,880	0	33,313,880
8	Water charges	0	14,668,631	0	14,668,631
9	MSD	0	31,954,755	0	31,954,755
10	Security	0	3,200,000	0	3,200,000
	Total	39,418,600	193,448,166	65,776,300	298,643,066

Source: Hospital CHOPs quarterly implementation reports

**Analysis**: The hospital has large amount of debts in 2015/16 compared to other financial years; this is because it received 43% of OC (others), 66% of on call allowance and 69% of amount budgeted for procurement of medicine and supplies at MSD. 2014/15 and 2015/16 debts has been recorded in Government debts account. On call allowance debts has been submitted to PORALG.

Table 2.2.3 Waiver and Exemption Waiver and Exemption 2015/16

Catagory	Services										
Category	Registration	Medicine	Laboratory	Radiology	Admission	Surgery	Dental	Ophthalmology	Physiotherapy	Others	Total
Pregnant	7,080,000	26,496,300	4,856,300	2,626,000	2,660,000	19,950,000	116,000	0	18,000	0	63,802,600
Under five	1,755,600	5,255,800	1,212,000	165,000	502,000	250,000	0	0	70,000	0	9,210,400
Chronic Diseases	8,117,000	24,482,620	1,850,000	1,375,000	540,000	450,000	175,000	0	12,000	0	37,001,620
Poor	1,803,000	9,988,700	693,300	306,000	860,000	930,000	120,000	0	32,000	0	14,733,000
Elderly	1,814,000	6,747,900	727,000	349,000	182,000	1,220,000	133,000	0	28,000	0	11,200,900
MVCs	0	0	0	0	0	0	0	0	0	0	0
Prisoners	1,154,000	2,050,500	214,000	106,000	128,000	250,000	328,000	0	0	0	4,230,500
Total	21,723,600	75,021,820	9,552,600	4,927,000	4,872,000	23,050,000	872,000	0	160,000	0	140,179,020

Waiver and Exemption 2016/17 (Up to 31st December 2016)

Months	Department											
Months	Reception	Pharmacy	Laboratory	Radiology	Theatre	Dental	OPD	Physiotherapy	IPD	Ophthalmology	Others	Total
July	1,917,000	4,436,500	743,000	270,000	2,100,000	169,000	0	62,000	518,000	0	0	10,215,500
August	1,315,000	3,209,900	255,000	635,000	3,225,000	35,000	0	68,000	804,000	0	0	9,546,900
September	4,067,000	1,709,700	236,000	160,000	165,000	90,000	51,500	0	117,000	0	0	6,596,200
October	4,228,000	2,197,000	445,500	114,000	0	135,000	87,000	12,000	266,000	60,000	18,000	7,562,500
November	3,743,000	2,236,140	598,000	228,000	75,000	45,000	14,500	17,000	42,000	30,000	12,100	7,040,740
December	4,684,000	2,531,770	745,000	246,000	210,000	85,000	36,500	12,000	0	0	11,700	8,561,970
Cumulative to Date	19,954,000	16,321,010	3,022,500	1,653,000	5,775,000	559,000	189,500	171,000	1,747,000	90,000	41,800	49,523,810

Source: Hospital CHOP report

Analysis: 6,000 patients are attending hospital monthly, among them 45% (2,700) are exempted/waived.

## 2.3. Annual financial and Technical Reports

## 2.3.1- Previous Year Budget, Actual Income and Expenditures

**Table 2.3.1: Financial Status of Previous Year (2015/16)** 

Sour	ce of Fund	Annual Budget	Opening Balance	Fund Received	Total Funds Available	Expenditure	Closing Balance
	PE	2,840,709,000	0	2,742,918,400	2,742,918,400	2,742,918,400	-
Block	DEV	796,500,000	0	-	-	0	-
Grant	OC (Others)	152,250,000	0	66,083,060	66,083,060	66,061,160	21,900
	OC (On call)	180,000,000	0	119,080,000	119,080,000	118,285,000	795,000
	User Fee	240,000,000		301,159,293			
	NHIF	324,000,000		270,284,309		552,702,838	
Cost	NSSF	17,600,000		8,487,500			61,100,883.00
Sharing	Others (IOM, IRC, AAR, TANESCO, TRA)	18,400,000	25,878,039	7,994,580	613,803,721	552,752,555	01,100,000.00
ICAP/TH	HPS	38,501,520	0	29,900,774	29,900,774	30,207,574	(306,800)
East Afri Laborato		60,000,000	0	0	-	-	-
Receipt i	in Kind	280,132,450	-150,639,858	193,195,139	42,555,281	207,143,200	(164,587,918.61)
Total		4,948,092,970	(124,761,819)	3,739,103,055	3,614,341,236	3,717,318,172	(102,976,936)

**Source**: CHOP fourth quarter report 2015/16

Analysis: The hospital has negative opening and closing balances, this is because it made procurement at MSD on credit

# 2.3.2- Progress of Activities in Previous Year

Table 2.3.2: Progress Report on Planned Activities in Previous Year (2015/16)

Department	Activity No	Planned Activities	Status of Implementation	Achievements (%)	Comments
Administration	1	To provide routine administrative, logistics and managerial costs for effective management and coordination of health services at the Regional Referral Hospital by June 2016	Salaries were paid to all 245 staffs. Office consumables (stationeries), diesel, food for patients and computers were procured. Security services	70	OC fund was not released as planned
Administration	2	To conduct PPM to vehicles, generators, buildings, fire extinguishers, office and medical equipments by June 2016	were paid.  PPM to buildings, office equipments and medical equipments was conducted	70	
Administration	3	To facilitate HIV/AIDS interventions at the Regional Referral Hospital by June 2016	Nutrition support was provided to 10 staffs living with HIV/AIDS in nine among twelve months	75	OC fund was not released as planned
Administration	4	To conduct Hospital Board meetings quarterly by June 2016	Hospital board meeting was conducted in first quarter only	25	OC fund was not released as planned

Department	Activity No	Planned Activities	Status of Implementation	Achievements (%)	Comments
Administration	5	To conduct planning session of CHOP	Planning session of CHOP	100	None
		2016/17 for 10 days by June 2016	2016/17 was conducted in the		
			third quarter.		
Administration	6	To conduct supportive supervision to	Monthly supportive		
		Regional Referral Hospital monthly by	supervision was conducted in	100	None
		June, 2016	all twelve months		
Administration	7	To conduct operational research on	Proposal developed, the		
		services at Regional Hospital by June	remaining work will be	50	
		2016	completed in 2016/17		
Administration	8	To install computerized hospital	Computer procured and		Fund not
		management system at Regional	consultation fees paid. The		released as
		Referral Hospital by June 2016	remaining work will be	50	planned
			completed in 2016/17		
Administration	9	To conduct rehabilitation of old	Not conducted		Fund not
		Regional Referral Hospital by June		0	released as
		2016			planned
Administration	10	To conduct preliminary works for	Not conducted		Fund not
		construction of new RRH by June 2016		0	released as
					planned

Department	rtment   Activity   Planned Activities		Status of Implementation	Achievements (%)	Comments
Administration	11	To conduct HMT meeting monthly by June 2016	HMT meetings were conducted in all twelve months	100	None
Pharmacy	supplies, diagnostic/laboratory and supplies, diagnostic/laboratory and medical equipments quarterly by June medical equipments quarterly by June		Medicine, dental, hospital supplies, diagnostic and medical equipments were procured	70	
Internal Medicine	13	To conduct rehabilitation to psychiatric ward (ward 9) at Regional Referral Hospital by June 2016	Rehabilitation is still on progress. It will be completed in 2016/17	75	
Internal Medicine	14	To facilitate HIV and AIDS interventions at the Regional Referral Hospital through ICAP/THPS support by June 2016	Salaries to two staffs and extra duty allowance to 10 staffs were paid; stationeries and OIs medicine were procured.	100	None
Laboratory  15 To facilitate laboratory services at the Regional Hospital through East Africa Laboratory Network program by June 2016		Not conducted	0	Fund not released	
Laboratory	16	To facilitate blood donation interventions at the Regional Referral Hospital by June 2016	Not conducted	0	OC fund was not released as planned

Department	Activity No	Planned Activities	Status of Implementation	Achievements (%)	Comments
Environment	17	To facilitate environmental health and	Cleaning services was paid and		
Health		sanitation at the Regional Hospital by	procurement of cleaning	90	None
		June 2016	supplies and equipments was	70	TVOILE
			done		
Dental	18	To conduct minor rehabilitation to	Not conducted		No fund
		dental clinic at Regional Referral		0	
		Hospital by June 2016			

#### 2.4. Out of Pocket (Cash) Collection and GoT HoMIS)

GoT HOMIS is system which was developed by Tanzanian information technology specialists, and started to be used at Tumbi hospital. Due to its efficiency and effectiveness, PORALG decided to be scaled in all health services delivery facilities in October 2016. Maweni RRH started to use it in September 2016 in the following department/sections; reception (medical record), sales (cash collection point), dispensing and main pharmacy. The plan is to install it to all hospital departments, which will make the hospital to become paperless. Up to 31<sup>st</sup> December 2016, on job training on GoT HoMIS was conducted to 65 hospital workers. The hospital has been connected to optical fibre cable (net work). In order to make the hospital paperless, Tshs. 93,180,000 are needed for procurement of 35 computers and other accessories that has been budgeted in this plan.

Installation of the system (GoT HoMIS) associated with close supervision by RRHMT resulted into increasing of amount of out of pocket collection as evidenced with the following tables

Table 2.4.1A: Out of pocket collection in 2015/16

MONTH	AMOUNT
July 2015	17,786,500
August 2015	17,160,400
September 2015	15,864,300
October 2015	17,028,500
November 2015	19,802,900
December 2015	24,204,300
January 2016	24,711,700
February 2016	21,962,900
March 2016	26,182,900
April 2016	21,011,800
May2016	18,479,300
June 2016	23,648,900
TOTAL	247,844,400

Table 2.4.1B: Out of pocket collection in 2016/17

MONTH	AMOUNT
July 2016	23,541,700
August 2016	30,834,800
September 2016	29,841,640
October 2016	34,125,835
November 2016	33,624,725
December 2016	31,487,080
January 2017	36,833,610
February 2017	29,605,420
TOTAL	249,394,810

Source: Hospital CHOPs quarterly implementation reports

Analysis: Average out of pocket collection per month has been increased from Tshs.20,653,700

in 2015/16 to Tshs.31,174,351 in 2016/17 (51% increase)

### 2.5. Key Performance Indicators

Table 2.2: KPIs for RRHs

A: Basic Information and data for KPI calculation (October – December 2016)

No ·	Basic Information for KPI calculation	Unit	Remarks	Information/ Data collected
1	Total number of days in the quarter	Day		92
2	Total number of OPD days in the quarter	Day	Total number of days	92
3	Total Population (Regional population)	Person	Last year (2016)	2,361,883
4	Number of Beds	Bed	Available beds	159
5	Number of Doctors	Person	Specialists, MO, AMO	18

No	Basic Information for KPI	TT ·	n I	Information/
	calculation	Unit	Remarks	Data collected
			and CO	
			Surgeons or doctors	10
6	Number of surgeons	Person	perform surgical	
			intervention	
7	Number of Nurses	Person	NO, ANO and Nurse	102
8	Number of Nurses currently	Person		101
0	in duty station	Person		
9	Total number of Admission	Person		2,278
10	Total number of discharge	Person		2,171
11	Total number of in-patients	Person		10,958
12	Total number of out-patients	Person		17,107
13	Total number of Major	2022		211
13	Surgery	case		
14	Total number of Minor			64
14	Surgery	case		
1.6	Total number of Caesarean		At the leaguite!	103
16	Section	case	At the hospital	
17	Total number of under 5	Dargan		512
17	admitted	Person		
18	Total number of infected	Damaan	At the hospital	85
10	neonates	Person	(Neonatal sepsis at IPD)	
10	Total number of live babies		A + th a haggital	613
19	delivered	case	At the hospital	
20	Total number of hospital	2022	At the heggital	156
20	deaths	case	At the hospital	
21	Total number of Maternal	0090	At the hegnital	3
21	deaths	case	At the hospital	
22	Total number of deliveries		Number of women who	626

No	Basic Information for KPI	Unit	Remarks	Information/
	calculation	Unit	Kemai Ks	Data collected
			delivered	
23	Total Number of under five			732
25	admitted			
24	Total number of under 5	case	At the hospital	46
21	deaths	Cusc	Tit the hospital	
	Total No of stock out days		10 items (unit will be	0
25	from tracer medicine	Day	days/item)	
	&Supplies		days/telli)	
26	Number of written complaints	case		21
20	received and acted upon	Case		
27	Number of RRHMT meetings			3
28	Number of Hospital Board		Hospital board expired	0
20	Meetings			
	Number of OPD& IPD			7,173
29	patients exempted from	case	number of exemption	
2)	payment	Case	forms issued	
			Amount	283,387,758
30	Total income	TZS	disbursed/received	
			directly to hospital	
			Total amount disbursed	120,128,539
31	Total amount allocated for	TZS	at MSD from	
	procurement at MSD	IZS	MoHCDGEC and Cost	
			sharing	
	Total amount of cost of		Total cost of medicine	66,801,000
32	purchase for medicine and	TZS	and supplies received	
	supplies at MSD		from MSD	
33	Total cash revenue collection	TZS	Revenue from out of	99,237,640

No	Basic Information for KPI	Unit	Remarks	Information/
•	calculation		Tema Ko	Data collected
			pocket collection	
34	Total cost sharing revenue	TZS		192,110,658
35	Total NHIF revenue	TZS	Amount paid by NHIF	58,705,763
	collection	125	7 mount para by 1 min	
36	Total amount of Out-of-	TZS		99,237,640
	Pocket collection	IZS		
37	Total health services revenue	TZS	Total fund received	1,027,270,323
38	Total health services expense	TZS	Total expenditure	889,957,468
39	Total expenditure	TZS		
40	Food service cost	TZS	Amount paid for	4,708,900
40	1 tood service cost	123	purchasing food	
42	Total amount spent on repair	TZS	Amount paid on repair	14,924,440
42	and maintenance	123	and maintenance	14,924,440
	Total amount of cost of		Cost of medicine and	115,019,912
43	purchase for medicine and supplies	TZS	supplies purchased from	
13			MSD and private	
	заррнез		vendors	
44	Total Recurrent Expenditure	TZS	Total expenditure of OC	267,110,658
177	Total Recuirent Expenditure	125	and Cost sharing	
45	Total Recurrent Income	TZS	Total income of OC and	160,540,150
73	Total Recuirent meome	125	Cost sharing	
	Total amount of cost Sharing			48,218,912
46	used for Purchase Medicine	TZS		
	and Supplies			
	Total amount of cost of			66,801,000
47	purchase medicine and	TZS		
	supplies at MSD			
48	Total received referral cases	case	the number of referral	2,395

No .	Basic Information for KPI calculation	Unit	Remarks	Information/ Data collected
			forms	
49	Total sent referral cases to the upper level	case	the number of referral forms	223
50	Total feedback sent to the lower level	case	the number of feedback forms	0

# **b.** Key Performance Indicators

No	KPIs	Unit	Calculation formula	Indicator
KPI	s for Hospital Efficiency	and Effe	ctiveness	
1	Medicine stock out	Day	Total No. of stock out days from	0
	days of tracer		tracer medicine &Supplies (unit	
	medicine and supplies		will be days/item)	
2	% neonatal sepsis to	%	Total No. neonatal sepsis cases	14
	babies delivered in		x 100	
	hospital		Total No. of live babies delivered	
3	% Maternal deaths	%	Total No. of Maternal deaths	0.5
			x100	
			Total No. of deliveries	
4	% of under 5 deaths	%	Total No. of under 5 deaths	6
			x100	
			Total No. of under 5 admitted	
5	% C/section	%	Total No. of C/Section	16
			x100	
			Total No. of deliveries	
6	Number of feedback	case	Number of complaints received and	21
	complaints received		acted upon	

KPIs	Unit	Calculation formula	Indicator
Average number of	Person	Total No. of in-patients	119
In-patients per day			
		Total No. of days	
Average number of	Person	Total No. of out-patients	186
Out-patients per day			
		Total No. of OPD days	
		Av no of in-patients per day	
Bed occupancy rate	%	x100	75
		Total number of beds	
		Total number of in-patients	
Average of length of	D		~
stay	Day	(No of admission+No. of	5
		discharge)÷2	
Average Number of		(Average No. of OP /day)	
Out-patients per	Person		11
day/doctor		Number of Doctors	
Average Number of		(Average in- patients /day)	
in-patient days	Person		2
/Nurses		Number of Nurses	
Average Number of		(Average in- patients /day)	
in- Patients day	Damaan		2
/Nurses currently in	Person	Number of Nurses currently in duty	2
duty station		station	
Average number of		Total number of major surgary	
Major Surgeries per		Total number of major surgery	
Surgeons (or doctors	Case	Number of Surgeon (or deaters	22
perform surgical			
intervention)		perform surgical intervention)	
	Average number of In-patients per day  Average number of Out-patients per day  Bed occupancy rate  Average of length of stay  Average Number of Out-patients per day/doctor  Average Number of in-patient days /Nurses  Average Number of in-Patients day /Nurses currently in duty station  Average number of Major Surgeries per Surgeons (or doctors perform surgical	Average number of In-patients per day  Average number of Out-patients per day  Bed occupancy rate  Average of length of stay  Average Number of Out-patients per day/doctor  Average Number of in-patient days /Nurses  Average Number of in-Patients day /Nurses currently in duty station  Average number of Major Surgeries per Surgeons (or doctors perform surgical	Average number of In-patients per day  Average number of Out-patients per day  Bed occupancy rate  Average of length of stay  Average Number of Out-patients per day/doctor  Average Number of in-patients per day/Nurses  Average Number of in-patients day  Average in-patients day  Number of Nurses  Average in-patients /day)  Number of Nurses  Average in-patients /day)  Total number of Nurses  (Average in-patients /day)  Number of Nurses  Average in-patients /day)  Total number of Nurses  Average in-patients /day)  Total number of Nurses  Average in-patients /day)  Total number of Nurses currently in duty station  Average number of Nurses currently in duty station  Average number of Surgeon (or doctors perform surgical intervention)

No	KPIs	Unit	Calculation formula	Indicator
15	% of Minor Surgery in total surgery	%	Total No. of Minor Surgeryx100 (Total No. of minor + major surgeries)	23
KPI	s for Hospital Governar	ice and M	lanagement	
16	Number of RRHMT meetings		No. of meetings held in the quarter	3
17	Number of Hospital Board Meetings		No. of meetings held in the quarter	0
KPI	s for Finances			
18	% of OPD &IPD Exemption	%	No of OPD+IPD patients exemptedx100 Total No. of OPD+ IPD	37
19	Average NHF revenue collection/day	TZS	Total NHF revenue collection  Total days in the quarter	638,106
20	Average cash revenue collection/day	TZS	Total cash revenue collection   Total days in the quarter	1,078,670
21	% of cost sharing in total income ( Cost sharing, OC, and Receipt in Kind)	%	Total cost sharing revenuex100 Total income	68
22	% of health services expense to health services revenue	%	Total Health services expensex100 Total health services revenue	87

No	KPIs	Unit	Calculation formula	Indicator
23	% of recurrent expense to current income in 90 days	%	Total recurrent expense x100 Total recurrent income	60
24	Food service costs per in-patient per day	TZS	Food service costs Total number of In-patients per day	39,571
25	% of amount spent in repair and maintenance expense in Total recurring expenses	%	Total amount spent on repair and maintenancex100 Total recurring expenditure	9
26	% spent on procurement of medicine and supplies from Cost Sharing	%	Total amount of cost of purchase for medicine and supplies from CSx100  Total amount of Cost Sharing revenue	25
27	% spent on procurement of medicine and supplies from MSD	%	Total amount of cost of purchase for medicine and supplies at MSD x100  Total amount of allocated for procurement from MSD	56
KPI	s for Referral system			
28	% of referrals received	%	Total received referral casesx100 (Total No. of OPD and Total No. of admission)	12

No	KPIs	Unit	Calculation formula	Indicator
29	% of referred cases to the upper level	%	Total sent referral to the upper levelx100 Total number referral received	9
30	% of feedback sent to the lower level	%	Total feedback sent to the lower level x100 Total number of referral received	0

#### **CHAPTER 3: CHOP OF THE YEAR**

#### 3.1. Strategy of the hospital

Maweni RRH has the following strategies to improve provision of quality and safety of health services in line with national health policy, health sector strategic plan, programs and initiatives as well as local needs.

Table 3.1: Strategy of the hospital for improvement of hospital services

No.	Strategies for Improvement of hospital services
1.	Improve availability of medicine, equipments, reagents and supplies
2.	Improve availability of skilled HRH
3.	Strengthen cost sharing collection
4.	Improve HMIS
5.	Strengthen stakeholders/Community participation
6	Improve infrastructure

## 3.2. Problem Prioritization / Priority Areas

Based on the evidences from the previous year 2015/16, RRH sets priorities on the following issues.

Table 3.2: Priority areas and its justification

Sq.	Priority Areas	Justification
No.		
1	Medicine, medical equipment and	Shortage of medicine, medical equipments
	diagnostic supplies	and medical supplies by 50%.
2	Maternal new born and child	Increasing number of maternal death at
	Health	Regional Referral Hospital from 14 in 2015 to
		25 in 2016
3	Communicable disease	High prevalence of HIV and AIDS in the
		Region by 3.4%
4	Human Resource for Health	Shortage of Human Resource for Health at
		RRH by 50%
5	Organization Structures and	Inadequate capacity on management and
	Institutional Management	coordination of health services at Regional
		Referral Hospital by 60%
6	Environmental health and	Inadequate capacity on management of
	Sanitation	environmental health, sanitation and hygiene
		practices at Regional Referral Hospital by
		70%
7	Social Welfare and Social	Low accessibility to basic social welfare
	Protection	services to vulnerable groups by 30%
8	Rehabilitation and Planned	Shortage of physical infrastructure at the
	Preventive Maintenance	Regional Hospital by 30%.
		Inadequate capacity on conducting PPM to
		vehicles, generators, buildings, fire
		extinguishers, air conditioners, office and
		medical equipments by 50%

**3.3. Costing of Planned Activities (Budgeting)**Table 3.3.1: Budget Summary by Activities and sources of fund

				Source of	f Fund				
Activities		Block Grant					East		
	PE	ОС	Development	Cost Sharing	MSD	THPS	Africa Lab	Total	
Administrative Services									
To provide routine, administrative,									
logistic and managerial cost for									
effective management and coordination	2,823,027,960	222 050 000		212,845,000				3,368,822,960	
of health services at the Regional	2,823,027,960	332,950,000	-	212,043,000	-	-	-	3,308,822,900	
Referral Hospital by June 2018									
To facilitate HIV and AIDS									
interventions at the Regional Referral		11 000 000						11 000 000	
Hospital by June 2018	-	11,000,000	-	-	-	-	-	11,000,000	
To conduct Hospital Board meetings									
by 15 members for one day quarterly		<b>7</b> 000 000						<b>7</b> 000 000	
by June 2018	-	5,800,000	-	-	-	-	-	5,800,000	
To conduct planning session of CHOP									
2018/19 for 10 members of RRHMT at				6 475 000				C 455 000	
Kasulu for 5 days by June 2018	-	-	-	6,475,000	-	-	-	6,475,000	
To conduct operational research on									
services provided at the RRH by June				1 100 000				1 100 000	
2018	-	-	-	1,100,000	-	-	-	1,100,000	
To conduct rehabilitation of dental									
clinic, mortuary and ward 7 at Regional	-	-	454,000,000	-	-	-	-	454,000,000	

				Source of	f Fund				
Activities		Block Grant		Cost Sharing	MSD	THPS	East Africa	Total	
	PE	OC	Development				Lab		
Referral Hospital by June 2018									
To conduct HMT meeting by 11									
members for one day monthly by June	_	-	-	3,600,000	-	-	-	3,600,000	
2018									
Department Total	2,823,027,960	349,750,000	454,000,000	224,020,000	-	-	-	3,850,797,960	
Pharmaceutical Services		L	L	L					
To procure four kits of medicine,									
dental, medical equipments, hospital									
supplies, diagnostic/laboratory and	_	_	300,000,000	720,000,000	247,341,200	_		1,267,341,200	
medical equipments quarterly by June									
To conduct Hospital Therapeutic									
Committee meeting by 14 members for									
one day quarterly by June 2018				1,000,000				1,000,000	
Department Total			200,000,000	<b>70.1</b> 0000 000	247 241 222			1.000.041.000	
	-		300,000,000	721,000,000	247,341,200	- 	-	1,268,341,200	
Clinical Services									
To facilitate HIV and AIDS									
interventions at the Regional Referral	-	-		-	-	65,108,400	-	65,108,400	

				Source of	f Fund			
Activities		Block Grant		Cont Charles	MCD	THPS	East	Total
	PE	ОС	Development	Cost Sharing	MSD	THPS	Africa Lab	Total
Hospital through THPS support by								
June 2018								
Department Total	-	-		-	-	65,108,400	-	65,108,400
Diagnostic Services								
To facilitate laboratory services at the								
Regional Referral Hospital through								
East Africa Laboratory Network	-	-			-	-	60,000,000	60,000,000
program support by June 2018								
To facilitate blood donation								
interventions at the Regional Referral				12,000,000			_	12,000,000
Hospital by June 2018		-		12,000,000	-	-	-	12,000,000
Department Total				12 000 000			60,000,000	72 000 000
	-	-		12,000,000	-	-	60,000,000	72,000,000
<b>Environmental Health and Technical S</b>	Services							
To facilitate environmental health and								
sanitation at the Regional Hospital by	0	1,000,000		66,000,000	0	0	0	67,000,000
June 2018								
To conduct PPM to vehicles,								
generators, buildings, fire	0	0	0	76,600,000	0	0	0	76,600,000
extinguishers, air conditioners, office								

				Source of	f Fund			
Activities		Block Grant		Cost Sharing	MSD	THPS	East	Total
	PE	ОС	Development	Cost Sharing	MSD	THES	Africa Lab	1 otai
and medical equipments by June 2018								
Department Total	-	1,000,000		142,600,000	-	-	-	143,600,000
Social Welfare and Nutrition Services								
To facilitate social welfare services at Regional Referral Hospital by June 2018	-	3,250,000		33,300,000	-	-		36,550,000
Department Total	-	3,250,000		33,300,000	-	-	-	36,550,000
Nursing Services								
To conduct internal supportive supervision to Regional Referral Hospital quarterly by June 2018	-	-		1,900,000	-	-		1,900,000
Department Total	-	-		1,900,000	-	-	-	1,900,000
Finance and Procurement					'		'	
To prepare CHOP quarterly								
implementation reports by June 2018	-	-		2,000,000	-	-	-	2,000,000
To conduct annual stock taking by June 2018	-	-	-	1,100,000	-	-	-	1,100,000

				Source of	f Fund					
Activities		Block Grant		Cost Sharing	MSD	THPS	East Africa	Total		
	PE	OC	Development	0			Lab			
Department Total	-	-		3,100,000	-	-	-	3,100,000		
Health Insurance and QIT	Health Insurance and QIT									
To conduct QIT meeting by 16										
members for one day monthly by June	_	-		2,400,000	_	_		2,400,000		
2018				, ,				, ,		
To prepare and submit claim forms										
monthly to insurance companies by				9,000,000				9,000,000		
June 2018										
Department Total	-	-		11,400,000	-	-	-	11,400,000		
HMIS and ICT										
To install GoT HoMIS at Regional										
Referral Hospital by June 2018	-	-	45,000,000	48,180,000	-	-		93,180,000		
To conduct Data Quality Assessment										
(DQA) quarterly by June 2018				2,500,000				2,500,000		
Department Total			4.5.000.5.5.5	-0.600.6				0.7. (0.0. (		
	-	-	45,000,000	50,680,000		-	-	95,680,000		

Table 5.2: Budget Details

Problem	Objective	Target	Activity		Segment 4 (GFS	Segment 4 Description (GFS	Unit of	Unit Cost of	Annual Budget Estimates 2017/2018		Total Amount	Source of						
			number		Codes)	Code Description)	Measure	Inputs	No. of Unit	Estimates		Fund						
Inadequate	Good	Capacity on	1	To provide	210301	Leave	person	150,000	100	15,000,000								
capacity on management and	governance and administrative	management and coordination of health		administrative,	210303	Extra duty	person	30,000	100	3,000,000								
coordination of health	services	services at Regional		logistics and managerial costs for effective management and coordination of health services at the Region Referral Hospital by June 2018.	managerial costs for effective management and coordination of health services at the Region Referral Hospital	managerial costs	managerial costs	210315	Subsistence Allowance	person	100,000	100	10,000,000					
services at		Referral hospital				210317	on call allowance	monthly	10,400,000	10	104,000,000							
RRH by 60%		strengthened from 60% to				health services at the Region Referral Hospital	health services at the Region Referral Hospital	health services at	210318	Postmortem allowance	person	960,000	10	9,600,000				
		80% by June 2020						210327	Uniform allowance	each	120,000	104	12,480,000	332,950,000	OC			
								by June 2018.	by June 2018.	by June 2018.	by June 2018.	by June 2018.	by June 2018.	by June 2018.	220201	Electricity	Month	5,500,000
					220202	Water charges	Monthly	2,500,000	12	30,000,000								
					220302	Diesel	Litres	2,500	700	1,750,000								
					220101	Office consumables (paper, pencils)	monthly	100,000	10	1,000,000								
					220102	Computer supplies and accessories	lumpsum	600,000	1	600,000								

Problem	Objective	Target	Activity number	Activity  Description	Segment 4 (GFS	Segment 4 Description (GFS	Unit of Measure	Unit Cost of Inputs	Annual Budget Estimates 2017/2018		Total Amount	Source of
			number	Description	Codes)	Code Description)	Weasure	·	No. of Unit	Estimates		Fund
					221002	Ground travel	Person	50,000	100	5,000,000		
					221005	Perdiem	Person	600,000	17	10,200,000		
					220702	Rent housing	person	1,800,000	4	7,200,000		
					220802	Tuition fees	person	200,000	10	2,000,000		
					221202	Posts and telegraphs	lumpsum	620,000	1	620,000		
					221211	Telephone charges (land lines)	monthly	90,000	10	900,000		
					229905	Security services	monthly	3,300,000	12	39,600,000		
					229920	Burial expenses	Person	2,000,000	2	4,000,000		
					210329	Moving expenses	person	5,000,000	2	10,000,000		
						Activity Subtotal				332,950,000		
					210208	Personal Emoluments	monthly	235,252,330	12	2,823,027,960	2,823,027,960	P.E
						Activity subtotal				2,823,027,960	, y y y-	

Problem	Objective	Target	Activity number	Activity Description	Segment 4 (GFS	Segment 4 Description (GFS	Unit of Measure	Unit Cost of Inputs	1	nual Budget Estimates 2017/2018	Total Amount	Source of
			number	Description	Codes)	Code Description)	Wieasure	Inputs	No. of Unit	Estimates		Fund
					220102	Computer supplies and accessories	monthly	1,000,000	12	12,000,000		
					210207	casual laboures	monthly	1,000,000	12	12,000,000		
					220302	Diesel	litres	2,500	2,860	7,150,000		
					221202	Posts and telegraphs	monthly	100,000	12	1,200,000		
					221202	Food and refreshment	monthly	80,000	12	960,000		
					410502	Furniture and fittings	lumpsum	20,000,000	1	20,000,000		Cost
					229935	Agency fees (Fire and Atomic energy commission)	lumpsum	1,000,000	1	1,000,000	212,845,000	sharing
					221406	Gift and prizes	lumpsum	1,500,000	1	1,500,000		
					220101	Office consumables (patient cards, files, pens etc)	monthly	2,000,000	12	24,000,000		
					210301	Leave	person	150,000	30	4,500,000		
					210303	Extra duty	person	30,000	50	1,500,000		
					210315	Subsistence Allowance	person	100,000	20	2,000,000		

Problem	Objective	Target	Activity number	Activity Description	Segment 4 (GFS	Segment 4 Description (GFS	Unit of Measure	Unit Cost of	1	nual Budget Estimates 2017/2018	Total Amount	Source of
			number	Description	Codes)	Code Description)	Wieasure	Inputs	No. of Unit	Estimates		Fund
					210317	on call allowance	monthly	10,400,000	2	20,800,000		
					210318	Postmortem allowance	person	960,000	2	1,920,000		
					220702	Rent housing	person	1,800,000	2	3,600,000		
					220802	Tuition fees	person	200,000	5	1,000,000		
					229920	Burial expenses	Person	2,000,000	2	4,000,000		
					210329	Moving expenses	person	5,000,000	2	10,000,000		
					221002	Ground travel	Person	50,000	40	2,000,000		
					221005	Perdiem	person	100,000	50	5,000,000		
					220612	Uniform	lumpsum	5,000,000	1	5,000,000		
					290103	Vehicle insurance	lumpsum	500,000	1	500,000		
					220701	Transport charges	lumpsum	4,015,000	1	4,015,000		
					220201	Electricity	Month	1,000,000	12	12,000,000		
					220202	Water charges	Monthly	500,000	12	6,000,000		
					221211	Telephone charges (mobile)	monthly	100,000	12	1,200,000		

Problem	Objective	Target	Activity	Activity  Description	Segment 4 (GFS	Segment 4 Description (GFS	Unit of Measure	Unit Cost of Inputs	1	nual Budget Estimates 2017/2018	Total Amount	Source of
			number	Description	Codes)	Code Description)	Measure	inputs	No. of Unit	Estimates		Fund
					210321	Special allowance (10% of NHIF collection as incentives)	monthly	4,000,000	12	48,000,000		
						Activity subtotal				212,845,000		
						Activity total				3,368,822,960		
High prevalence of	Service improved and	Prevalence of HIV and AIDS	2	To facilitate HIV and AIDS	220403	Special foods (diet food)	monthly	900,000	12	10,800,000		
HIV and AIDS in the Region by 3.4%	HIV infections reduced	in the Region reduced from 3.4% to 2.8% by June 2020		interventions at the Regional Referral Hospital by June 2018	220101	Office consumables (paper, pencils)	monthly	100,000	2	200,000	11,000,000	OC
						Activity total				11,000,000		
Poor community	Good governance	Administrative services at the	3	To conduct Hospital Board	221005	Perdiem domestic	quarterly	1,000,000	4	4,000,000		
participation at RRH by	and administrative	regional Referral		meetings by 15 board members	221404	Food and refreshment	quarterly	100,000	4	400,000		
50%	services Hospital for one day quarterly by June 50% to 70% by June 2020	220101	Office consumables (paper, pencils)	quarterly	100,000	4	400,000	5,800,000	ОС			
					221002	Ground travel	quarterly	250,000	4	1,000,000		

Problem	Objective	Target	Activity number	Activity Description	Segment 4 (GFS	Segment 4 Description (GFS	Unit of Measure	Unit Cost of Inputs	1	nual Budget Estimates 2017/2018	Total Amount	Source of
			number	Description	Codes)	Code Description)	Measure	inputs	No. of Unit	Estimates		Fund
						Activity total				5,800,000		
Inadequate capacity on	Socio economic	Capacity on management	4	To conduct planning session	210503	Food and refreshment	person	10,000	105	1,050,000		
management and	Condition of the People In	and coordination of health		of CHOP 2018/19 by 10	220302	Diesel	Litres	2,500	50	125,000		
coordination of health	the Region Improved	services at Regional		members of RRHMT at	221005	Perdiem	person	100,000	50	5,000,000	6,475,000	Cost sharing
services at RRH by 60%		Referral hospital strengthened from 60% to		Kasulu for 5 days by June 2018	220101	Office consumables (paper, pencils)	set	10,000	30	300,000		
		80% by June 2020		by June 2018 22		Activity total				6,475,000		
No operation research	Socio economic	Number of operational	5	To conduct operational	220101	Office consumables (paper, pens)	set	10,000	100	1,000,000		
conducted in 2015/16 at RRH	Condition of People in the Region	research conducted at Regional		research on services provided at the Regional	210503	Food and refreshment	person	10,000	10	100,000	1,100,000	Cost
	Improved	referral Hospital Increased from 0 to three per year by June 2020		at the Regional Referral Hospital by June 2018		Activity total				1,100,000		sharing
Shortage of physical infrastructure	Socio economic Condition of	Shortage of physical infrastructure at	6	To conduct rehabilitation of dental clinic,	230210	Outsource maintenance contract services	lumpsum	370,000,000	1	370,000,000	454,000,000	DEV
at RRH by	People in the	the Regional		mortuary and	410706	Consulting work	lumpsum	68,000,000	1	68,000,000		

Problem	Objective	Target	Activity number	Activity Description	Segment 4 (GFS	Segment 4 Description (GFS	Unit of	Unit Cost of	1	nual Budget Estimates 2017/2018	Total Amount	Source of
			number	Description	Codes)	Code Description)	Measure	Inputs	No. of Unit	Estimates		Fund
30%	Region Improved	Hospital reduced from 30% to 15% by June 2020		ward 7 at Regional Referral Hospital by June 2018	210303	Extra duty  Activity total	lumpsum	16,000,000	1	16,000,000 <b>454,000,000</b>		
Low quality health	Socio economic	Quality of health and Socio	7	To conduct RRHMT meeting	210503	Food and refreshment	person	10,000	240	2,400,000		
services delivery at RRH by 70%	Condition of People in the Region Improved	Welfare Services at the Regional Referral Hospital improved from 70% to 85% by June 2020		RRHMT meeting by 11 members for one day monthly by June 2018	220101	Office consumables  Activity total	monthly	100,000	12	1,200,000 3,600,000	3,600,000	Cost sharing
				Depar	tment Total					3,850,797,960	3,850,797,960	
Pharmaceutica	al Services											
Shortage of medicine,	Socioeconomic condition of	Shortage of medicine,	8	To procure four kits of medicine,	220402	Medicine	quarterly	43,284,710	4	173,138,840		
dental, medical	the people in the Region	dental, medical equipments,		dental, medical equipments,	220404	Dental supplies	quarterly	3,091,765	4	12,367,060	247,341,200	MSD
equipments, diagnostic and hospital	improved	diagnostic and hospital supplies reduced from		diagnostic, and	220405	Hospital supplies	quarterly	6,183,530	4	24,734,120	2.7,5.1,200	
supplies, at		50% to 20% by		quarterly by June	220407	Diagnostic/laboratory	quarterly	4,637,648	4	18,550,590		

Problem	Objective	Target	Activity number	Activity Description	Segment 4 (GFS	Segment 4 Description (GFS	Unit of Measure	Unit Cost of Inputs	1	nual Budget Estimates 2017/2018	Total Amount	Source of
			number	Безенрион	Codes)	Code Description)	Measure	Impats	No. of Unit	Estimates		Fund
RRH by 50%		June 2020			410406	Medical equipments	quarterly	4,637,648	4	18,550,590		
						Activity subtotal (MS	D)			247,341,200		
					220402	Medicine	quarterly	126,000,000	4	504,000,000		
					220404	Dental supplies	quarterly	9,000,000	4	36,000,000		
					220405 Hospital supplies quarterly 18,000,000 4	72,000,000	720,000,000	Cost sharing				
					220407	Diagnostic/laboratory	18,000,000	54,000,000				
					410406	Medical equipments	quarterly	13,500,000	4	54,000,000		
						Activity subtotal				720,000,000		
					410406	Medical equipments	lumpsum	300,000,000	1	300,000,000	300,000,000	DEV
						Activity subtotal				300,000,000		
						Activity Total	1	I		1,267,341,200		
Low quality health	Socio economic	Quality of health and Socio	9	To conduct Hospital	210503	Food and refreshment	person	10,000	60	600,000		
services delivery at	Condition of people in the	Welfare Services at the		Therapeutic Committee	220101	Office consumables	monthly	100,000	4	400,000		Cost
RRH by 70%	Region improved	Regional Referral Hospital improved from		meeting by 14 members for one day quarterly by June 2018	Activity to	otal				1,000,000	1,000,000	sharing

Problem	Objective	Target	Activity	Activity Description	Segment 4 (GFS	Segment 4 Description (GFS	Unit of Measure	Unit Cost of Inputs	1	nual Budget Estimates 2017/2018	Total Amount	Source of
			number	Statispuon	Codes)	Code Description)	Measure	Inputs	No. of Unit	Estimates		Fund
		70% to 85% by June 2020										
Clinical Servic	Sarvice Prayalence of 10 To facilitate HIV									1,268,341,200	1,268,341,200	
High prevalence of		Prevalence of HIV and AIDS	10	To facilitate HIV and AIDS	210208	Salaries	monthly	4,385,700	12	52,628,400		
HIV and	HIV infections	in the Region		interventions at	210303	Extra duty	monthly	550,000	12	6,600,000		
AIDS in the Region by 3.4%	reduced	reduced from 3.4% to 2.8% by June 2020		the Regional Referral Hospital through THPS	210503	Food and refreshment (Data review meeting)	monthly	40,000	12	480,000		
				support by June 2018	210503	Food and refreshment (QIT meeting)	monthly	150,000	12	1,800,000	65,108,400	THPS
					220101	Office consumables (paper, pencils)	monthly	200,000	12	2,400,000		
				22	220101	Office consumables (voucher)	monthly	100,000	12	1,200,000		
						Activity total	I			65,108,400		
					65,108,400	65,108,400						

Problem	Objective	Target	Activity number	Activity Description	Segment 4 (GFS	Segment 4 Description (GFS	Unit of Measure	Unit Cost of Inputs	1	nual Budget Estimates 2017/2018	Total Amount	Source of
			number	Description	Codes)	Code Description)	Wicasure	Inputs	No. of Unit	Estimates		Fund
Diagnostic Serv	vices											
Low score of	Socio	Score of	11	To facilitate	220407	Laboratory supplies	Lumpsum	30,000,000	1	30,000,000		
Regional referral	economic Condition of	Regional Laboratory on		laboratory services at the	220101	Office consumables (paper, pencils)	Lumpsum	2,464,000	1	2,464,000		
laboratory on SLMTA assessment by	People in the Region Improved	SLMTA Assessment increased from two to five stars		Africa Laboratory Network program	230605	Outsource maintenance contract services	Lumpsum	6,800,000	1	6,800,000	60,000,000	EALNP
two stars		by June 2020			220807	Training	Lumpsum	1,846,000	1	1,846,000		
					220302	Diesel	Lumpsum	4,450,000	1	4,450,000		
					221102	Ground travel	Lumpsum	14,440,000	1	14,440,000		
						Activity total			l	60,000,000		
Increasing number of	Services Improved and	Number of Maternal Death	12	To facilitate blood donation	221404	Food and refreshment	person	10,000	800	8,000,000		
maternal deaths at	HIV/AIDS Infections	at Regional Referral		interventions at the Regional	210303	Extra duty	person	30,000	100	3,000,000		Cost
RRH from 14	Reduced	Hospital		Referral Hospital	220302	Diesel	litres	2,500	400	1,000,000	12,000,000	sharing
in 2015 to 25 in 2016		Reduced from 25 to 15 by June 2020		by June 2018		Activity total				12,000,000		
				Depar	tment Total					72,000,000	72,000,000	
Environmental	Health and Tech	nical Services										
Inadequate	Socioeconomic	Capacity on	13	To facilitate	220113	Cleaning supplies	monthly	500,000	2	1,000,000	1,000,000	OC

Problem	Objective	Target	Activity	Activity Description	Segment 4 (GFS	Segment 4 Description (GFS	Unit of Measure	Unit Cost of Inputs	1	nual Budget Estimates 2017/2018	Total Amount	Source of
			number	Description	Codes)	Code Description)	Wicasure	Inputs	No. of Unit	Estimates		Fund
capacity on management	condition of the people in	management of environmental		environmental health and		Activity subtotal		,		1,000,000		
of environmental health,	the Region improved	health, sanitation and hygiene		sanitation at the Regional Hospital by June 2018	220212	Outsourcing costs (includes cleaning and security services)	monthly	4,000,000	12	48,000,000		
sanitation and hygiene		practices at the Regional			227508	Fumigation	half year	3,000,000	2	6,000,000	66,000,000	Cost
practices at RRH by 70%		Referral Hospital			220113	Cleaning supplies	monthly	1,000,000	12	12,000,000		
	Hospital improved from 70% to 85% by			Activity subtotal				66,000,000				
		June 2020				Activity total				67,000,000		
Inadequate capacity on	Social economic	Capacity on conducting	14	To conduct PPM to vehicles,	230401	Motor vehicle and water claft	each	2,000,000	4	8,000,000		
conducting PPM to	condition of people in the	PPM to vehicles,		generators, buildings, fire	230403	Tyres and batteries	pieces	700,000	8	5,600,000		
vehicles,	Region	generators,		extinguishers, air	230702	Photocopiers	monthly	500,000	12	6,000,000		
generators, buildings, fire extinguishers, air conditioners,	Improved	buildings, fire extinguishers, air conditioners, office and medical		conditioners, office and medical equipments by June 2018.	230210	Outsource maintenance contract services (Buildings)	monthly	1,000,000	12	12,000,000	76,600,000	Cost sharing
office and medical equipments		equipments strengthened from 50% to			230311	Outsource maintenance contract services	half year	5,000,000	2	10,000,000		

Problem	Objective	Target	Activity number	Activity Description	Segment 4 (GFS	Segment 4 Description (GFS	Unit of Measure	Unit Cost of Inputs	I	nual Budget Estimates 017/2018	Total Amount	Source of
			number	Description	Codes)	Code Description)	Measure	inputs	No. of Unit	Estimates		Fund
by 50%		80% by June 2020				(Water and electricity)						
					230704	Ai conditioners	half year	2,000,000	2	4,000,000		
					231101	Medical and laboratory equipments	half year	12,500,000	2	25,000,000		
					231105	Fire protection equipment	half year	3,000,000	2	6,000,000		
				Activ	vity total			76,600,000				
						Department Total				143,600,000	143,600,000	
Social Welfare	and Nutrition Ser	vices			,							
Low accessibility to basic social	Socioeconomic condition of the people in	Accessibility to basic social welfare services	15	To facilitate social welfare services at	220403	Special food diet (diet food)	monthly	1,000,000	2	2,000,000		
welfare	the Region	to vulnerable		Regional Referral	220302	Diesel	Litres	2,500	500	1,250,000	3,250,000	OC
services to vulnerable	improved	groups increased from 30% to		Hospital by June 2018		Activity subtotal	1	'		3,250,000		
groups by 30%		50% by June 2020			220403	Special food diet (diet food)	quarterly	7,000,000	4	28,000,000	33,300,000	Cost
		221102	Ground travel	quarterly	200,000	4	800,000		sharing			

Problem	Objective	Target	Activity number	Activity Description	Segment 4 (GFS	Segment 4 Description (GFS	Unit of Measure	Unit Cost of Inputs	I	nual Budget Estimates 017/2018	Total Amount	Source of
			number	Description	Codes)	Code Description)	Weasure	imputs	No. of Unit	Estimates		Fund
					221005	Perdiem	quarterly	500,000	4	2,000,000		
					220302	Diesel	Litres	2,500	1,000	2,500,000		
						Activity subtotal				33,300,000		
						Activity total				36,550,000		
				Depar	tment Total					36,550,000	36,550,000	
Nursing Service	es											
Low quality health	Good governance	Quality of health services	16	Internal	210503	Food and refreshment	person	10,000	80	800,000		
services	and	delivery at		Supportive	210303	Extra duty	quarterly	150,000	4	600,000		
delivery at RRH by 70%	administrative services	RRH improved from 70% to		Supervision (ISS) to Regional	220101	Office consumables (paper, pens)	set	10,000	50	500,000	1,900,000	Cost sharing
	improved	85% by June 2020		Referral Hospital quarterly by June 2018		Activity total	1			1,900,000		
				Depar	tment Total					1,900,000	1,900,000	
Finance and P	rocurement											
Low quality health	Socioeconomic condition of	Quality of health services	17	To prepare CHOP quarterly	210503	Food and refreshment	person	10,000	80	800,000		Cost
services delivery at RRH by 70%	the people in the Region improved	delivery at RRH improved from 70% to 85% by		CHOP quarterly implementation	210303	Extra duty	quarterly	150,000	4	600,000	2,000,000	sharing

Problem	Objective	Target	Activity number	Activity Description	Segment 4 (GFS	Segment 4 Description (GFS	Unit of Measure	Unit Cost of Inputs	1	nual Budget Estimates 2017/2018	Total Amount	Source of
			number	Description	Codes)	Code Description)	Measure	inputs	No. of Unit	Estimates		Fund
		June 2020			220101	Office consumables (paper, pens)	set	10,000	60	600,000		
						Activity total				2,000,000		
Low quality health	Socioeconomic condition of	Quality of health services	18	To conduct annual stock	210503	Food and refreshment	person	10,000	30	300,000		
services delivery at	the people in the Region	delivery at the Regional		taking by June 2018	220101	Office consumables (paper, pens)	set	10,000	20	200,000		Cost
RRH by 70%	improved	Referral Hospital			210303	Extra duty	person	30,000	20	600,000	1,100,000	sharing
		improved from 70% to 85% by June 2020					Activity tota	ıl		1,100,000		
				Depa	rtment Total					3,100,000	3,100,000	
Health Insura	nces and QIT											
Low quality health	Socio economic	Quality of health services	19	To conduct QIT meetings by 16	210503	Food and refreshment	person	10,000	120	1,200,000		
services delivery at	Condition of People in the	delivery at RRH improved from		members for one day monthly by	220101	Office consumables	monthly	100,000	12	1,200,000	2,400,000	Cost sharing
RRH by 70%	Region Improved	70% to 85% by June 2020		June 2018		Activity total				2,400,000		
Low quality health	Socioeconomic condition of	Quality of health services	20	To prepare and submit claims to	210503	Food and refreshment	person	10,000	500	5,000,000	9,000,000	Cost
services	the people in	delivery at RRH		insurance	210303	Extra duty	person	20,000	200	4,000,000		sharing

Problem	Objective	Target	Activity	Activity Description	Segment 4 (GFS Codes)	Segment 4 Description (GFS	Unit of Measure	Unit Cost of Inputs	1	nual Budget Estimates 2017/2018	Total Amount	Source of Fund
			number			Code Description)		inputs	No. of Unit	Estimates		
delivery at RRH by 70%	the Region improved	improved from 70% to 85% by June 2020		companies monthly by June 2018		Activity total		9,000,000				
				Depai	tment Total					11,400,000	11,400,000	
HMIS and ICT												
Low quality	Socio	Health services	21	To install GoT	220110	Computer software	lumpsum	2,000,000	1	2,000,000		
health services	economic delivery at the Condition of Regional		HoMIS at Regional Referral	220102	Computer supplies and accessories	lumpsum	5,280,000	1	5,280,000			
delivery at RRH by 70%	People in the	Referral		Hospital by June 2018	410602	Printer	pieces	1,000,000	2	2,000,000	48,180,000	Cost sharing
	Region	Hospital			220102	Cisco wireless router	pieces	300,000	13	3,900,000		
	Improved improved from 70% to 85% by			410601	Computer and photocopiers	pieces	2,000,000	15	30,000,000	-	Sharing	
		June 2020			410706	Consulting work	lumpsum	5,000,000	1			5,000,000
						Activity subtotal	I.			48,180,000		
					220110	Computer software	lumpsum	2,000,000	1	2,000,000		
					220102	Computer supplies and accessories	lumpsum 3,000,000		1	3,000,000	45,000,000	DEV
					410601	Computer and photocopiers	pieces	2,000,000	20	40,000,000		
						Activity subtotal	1	45,000,000	-			
						Activity total		93,180,000				
Low quality	Socioeconomic condition of			To conduct Data Quality	210503	Food and refreshment	person	person 10,000		1,000,000	2,500,000	Cost
health services	the people in	ple in improved from Assessment			210303	Extra duty	person	30,000	50	1,500,000		Sharing

Problem	Objective	Target	Activity number	•	Segment 4 (GFS Codes)	Segment 4 Description (GFS	Unit of Measure	Unit Cost of	1	nual Budget Estimates 2017/2018	Total Amount	Source of Fund
						Code Description)	Wieasure	Inputs	No. of Unit	Estimates		
delivery at RRH by 70%	the Region improved	70% to 85% by June 2020		(DQA) quarterly by June 2018	Activity T	otal				2,500,000		
				Depar	rtment Total			95,680,000	95,680,000			
					Grand To	tal	5,548,477,560	5,548,477,560				

# **CHAPTER 4: PLAN OF ACTION**

Table 4.1: Plan of Action

Activities		1st Quarter			2nd Quarter			3rd Quarter			Qua	rter			
		Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Person in Charge	Planned Budget	
Administrative Services														3,850,797,960	
To provide routine, administrative,															
logistic and managerial cost for													HoD		
effective management and coordination													Administrative	3,368,822,960	
of health services at the Regional													Services		
Referral Hospital by June 2018															

	1st	t Qua	rter	2nd	l Qua	rter	3rd	Qua	rter	4th	Qua	rter		
Activities	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Person in Charge	Planned Budget
To facilitate HIV and AIDS													HoD	
interventions at the Regional Referral													Administrative	11,000,000
Hospital by June 2018													Services	
To conduct Hospital Board meetings													HoD	
by 15 members for one day quarterly													Administrative	5,800,000
by June 2018													Services	
To conduct planning session of CHOP													HoD	
2018/19 by 10 members of RRHMT at													Administrative	6,475,000
Kasulu for 5 days by June 2018													Services	
To conduct operational research on													HoD	
services provided at the Regional													Administrative	1,100,000
Referral Hospital by June 2018													Services	
To conduct rehabilitation of dental													HoD	
clinic, mortuary and ward 7 at Regional													Administrative	454,000,000
Referral Hospital by June 2018													Services	
To conduct HMT meeting by 11													HoD	
members for one day monthly by June													Administrative	3,600,000
2018													Services	

	1st	Qua	rter	2nd	Qua	rter	3rd	Qua	rter	4th	Qua	rter		
Activities	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Person in Charge	Planned Budget
Pharmaceutical Services														1,268,341,200
To procure four kits of medicine,													HoD	
dental, hospital supplies,													Pharmaceutical	1,267,341,200
diagnostic/laboratory and medical													Services	1,207,341,200
equipments quarterly by June 2018													Services	
To conduct Hospital Therapeutic													HoD	
Committee meeting by 14 members for													Pharmaceutical	1,000,000
one day quarterly by June 2018													Services	
Clinical Services												•		65,108,400
To facilitate HIV and AIDS														
interventions at the Regional Referral													HoD Clinical	65 109 400
Hospital through THPS support by													Services	65,108,400
June 2018														
Diagnostic Services														72,000,000
To facilitate laboratory services at the													HoD	
Regional Referral Hospital through													Diagnostic	60,000,000
East Africa Laboratory Network														00,000,000
program support by June 2018													Services	

	1st	Qua	rter	2nd	Qua	rter	3rd	Qua	rter	4th	Qua	rter		
Activities	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Person in Charge	Planned Budget
To facilitate blood donation													HoD	
interventions at the Regional Referral													Diagnostic	12,000,000
Hospital by June 2018													Services	
Environmental Health and Technical S	Servi	ces												143,600,000
To facilitate environmental health and														
sanitation at the Regional Hospital by													<b>HoD EHTS</b>	67,000,000
June 2018														
To conduct PPM to vehicles,														
generators, buildings, fire													н-в енте	76 600 000
extinguishers, air conditioners, office													H <sub>0</sub> D EHTS	76,600,000
and medical equipments by June 2018														
Social Welfare and Nutrition Services														36,550,000
To facilitate social welfare services at														
the Regional Referral Hospital by June													HoD SWNS	36,550,000
2018														
Nursing Services							1,900,000							

	1st	Qua	rter	2nd	l Qua	rter	3rd	Qua	rter	4th	Qua	rter		
Activities	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Person in Charge	Planned Budget
To conduct internal supportive supervision to Regional Referral Hospital quarterly by June 2018													HoD Nursing Services	1,900,000
Finance and Procurement														3,500,000
To prepare CHOP quarterly implementation reports by June 2018  To conduct annual stock taking by June 2018													HSWO Finance and Procurement HSWO Finance and Procurement	2,400,000
Health Insurances and QIT									l	I				11,400,000
To conduct QIT meeting by 16 members for one day monthly by June 2018													HoD HI and QIT	2,400,000
To prepare and submit claims to insurance companies monthly by June 2018													HoD HI and QIT	9,000,000

	1st	1st Quarter		2nd Quarter		3rd	Qua	rter	4th	Qua	rter			
Activities	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Person in Charge	Planned Budget
HMIS and ICT								95,680,000						
To install GoT HoMIS at Regional													HoD HMIS	02 100 000
Referral Hospital by June 2018													and ICT	93,180,000
To conduct Data Quality Assessment														
(DQA) quarterly by June 2018														2,500,000

## **CHAPTER 5: MONITORING AND EVALUATION PLAN**

Regular monitoring of implementation of the plan will be done through monthly data collection and reports from all hospital departments. Quarterly financial and technical implementation reports will be prepared. Generally, implementation and evaluation will be done as shown in the following table

**Table 5.1: Monitoring and Evaluation Matrix** 

No	Activities	Target	Indicators	Means of verification

No	Activities	Target	Indicators	Means of verification
1	To provide routine, administrative,	• 100% statutory benefits	Percentage of statutory	Hospital
	logistic and managerial cost for	paid	benefits paid	monthly/quarterly
	effective management and	• 100% utilities paid	Percentage of utilities	reports
	coordination of health services at the	• 100% office supplies	paid	
	Regional Referral Hospital by June	procured	Percentage of amount	
	2018		budgeted used	
2	To facilitate HIV and AIDS	Monthly nutrition	Number of months were	Hospital
	interventions at the Regional Referral	support to 9 Hospital	nutrition support	monthly/quarterly
	Hospital by June 2018	staffs that are living with	provided	reports
		HIV/AIDS provided.	Number of sensitization	
		Biannual sensitization	sessions conducted	
		sessions on HIV and		
		AIDS to Hospital staffs		
		conducted		
	To conduct Hospital Board meetings	Four board meeting (one for	Number of board meetings	Meeting minutes
3	by 15 members for one day quarterly	each quarter) conducted	conducted	
	by June 2018			
	To conduct planning session of	CHOP 2018/19 planning	Availability of CHOP	Session report
	CHOP 2018/19 by 10 members of	session conducted	2018/19 document	
4	RRHMT at Kasulu for 5 days by			
	June 2018			

No	Activities	Target	Indicators	Means of verification
5	To conduct operational research on	One operational research	Number of operational	Research report
	services provided at the Regional	conducted	research conducted	
	Referral Hospital by June 2018			
6	To conduct rehabilitation of dental	Dental clinic, mortuary and	Availability of rehabilitated	Rehabilitation
	clinic, mortuary and ward 7 at	ward 7 rehabilitated	dental, mortuary and ward 7	reports/certificates
	Regional Referral Hospital by June		buildings	
	2018			
7	To conduct HMT meeting by 11	12 RRHMT meetings(one	Number of RRHMT	Meeting minutes
	members for one day monthly by	per each month) conducted	meetings conducted	
	June 2018			
8	To procure four kits of medicine,	4 kits of medicines, dental,	Number of kits of medicine,	MSD sales report and
	dental, hospital supplies,	medical equipments,	dental, medical equipments,	delivery notes
	diagnostic/laboratory and medical	diagnostic/laboratory and	diagnostic/laboratory and	
	equipments quarterly by June 2018	hospital supplies procured	hospital supplies procured.	
9	To conduct Hospital Therapeutic	Four HTC meetings (one for	Number of HTC meetings	Meeting minutes
	Committee meeting by 14 members	each quarter) conducted	conducted	
	for one day quarterly by June 2018			
10	To facilitate HIV and AIDS	Statutory benefits to five	Number of staffs who	Quarterly reports
	interventions at the Regional Referral	staffs paid	paid statutory benefits	Delivery notes
	Hospital through THPS support by	• 4 sets of office supplies	Number of sets of	
	June 2018	procured	office, supplies procured	

No	Activities	Target	Indicators	Means of verification
11	To facilitate laboratory services at the Regional Referral Hospital through East Africa Laboratory Network program support by June 2018	<ul> <li>Laboratory supplies,         office consumables and         diesel procured</li> <li>Training to laboratory         staffs conducted</li> <li>One cross border</li> </ul>	<ul> <li>Number of sets/kits of laboratory supplies procured</li> <li>Number of laboratory staffs trained</li> <li>Conducted cross border</li> </ul>	<ul> <li>Delivery note</li> <li>Training report</li> <li>Meeting minutes/report</li> </ul>
		meeting conducted	meeting	
12	To facilitate blood donation interventions at the Regional Referral Hospital by June 2018	1600 units of blood collected	Number of units of blood collected	Monthly/quarterly hospital reports
13	To facilitate environmental health and sanitation at the Regional Hospital by June 2018	<ul> <li>Cleaning supplies         procured     </li> <li>Biannual fumigation         conducted     </li> <li>Monthly cleaning         services (contractor)         paid     </li> </ul>	<ul> <li>Number of sets of cleaning supplies procured</li> <li>Fumigation conducted biannually</li> <li>Number of months were cleaning services paid</li> </ul>	Delivery notes and receipts.

No	Activities	Target	Indicators	Means of verification
14	To conduct PPM to vehicles,	Biannual PPM to vehicles,	Availability of maintained	PPM reports
	generators, buildings, fire	generators, buildings, fire	vehicles, generators,	
	extinguishers, air conditioners, office	extinguishers, air	buildings, fire	
	and medical equipments by June	conditioners, office and	extinguishers, office and	
	2018	medical equipments	medical equipments	
		conducted		
15	To facilitate social welfare services	Monthly food to patients	Number of months were	Monthly/quarterly
	at the Regional Referral Hospital by	provided	food support provided	reports
	June 2018	Transport assistance to	Number of vulnerable	
		vulnerable patients	patients who received	
		provided	transport assistance	
16	To conduct internal supportive	Four ISS visits (one for each	Number of ISS visits	Supervision reports.
	supervision to Regional Referral	quarter) conducted	conducted	
	Hospital quarterly by June 2018			
17	To prepare CHOP quarterly	Quarterly CHOP	Number of CHOP quarterly	Availability of CHOP
	implementation reports by June 2018	implementation reports	reports prepared	quarterly reports
		prepared		
18	To conduct annual stock taking by	Annual stock taking	Availability of updated	Availability of stock
	June 2018	conducted	ledges	taking report
10	To conduct QIT meeting by 16	12 QIT meetings (one for	Number of QIT meetings	Meeting minutes
19	members for one day monthly by	each month) conducted	conducted	

No	Activities	Target	Indicators	Means of verification
	June 2018			
20	To prepare and submit claims	Monthly insurance claims	Number of months where	Submission
	monthly to insurance companies by	submitted	insurance claims submitted	reports/forms
	June 2018			
21	To install GoT HoMIS at Regional	GoT HoMIS installed	Availability of functional	Monthly and quarterly
	Referral Hospital by June 2018		GoT HoMIS	reports
22	To conduct Data Quality Assessment	Quarterly DQA conducted	Number of DQA sessions	Monthly and quarterly
	(DQA) quarterly by June 2018		conducted	reports

## **CHAPTER 6: RISKS AND ASSUMPTIONS**

The following risks or assumption that might affect the RRHMT ability to achieve the target;

- 1. Financial resources and their availability
- 2. Inflation of costs
- 3. Supply of medicine, supplies and equipments
- 4. Emergencies and outbreaks
- 5. Ad-hoc plans and instructions
- 6. Policy changes
- 7. Availability of technical support
- 8. Political support
- 9. Availability of qualified staffs

The above identified risks and assumptions when occurred may either affect RRHMT positively, hence achieving the target or negatively results into the following challenges;

- 1. Non implementation of planned activities,
- 2. Under implementation of planned activities,
- 3. Reallocation of planned activities
- 4. Late implementation of planned activities

The possible options that will be used with RRHMT on addressing the identified challenges are;

- 1. Implementing all activities that do not require fund
- 2. Implementing activities on credit basis
- 3. To ask assistance from higher authority such as RHMT, RAS, MoHCDGEC and PORALG
- 4. Rescheduled of planned activities
- 5. To accommodate the unimplemented activities in 2018/19 CHOP.

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