

Table of Contents

Background.....	1
Expected Activities.....	2
Mission Statement.....	4
Vision.....	4
Statement of the Problem.....	5
Targeted Beneficiaries.....	5
Project Site/Location.....	6
Over-all Objectives.....	6
Specific Objectives.....	6
Detailed Activities.....	7
Services to be Offered.....	10
Implementation Plan.....	10
Legal Framework and Structural Organization.....	12
Instructional Setting.....	17
Project Sustainability.....	17
Monitoring and Evaluation.....	17
Conclusion.....	18

Background

Agule Community Health Centre is an integrated, non-governmental community health care organization started in 2004 by a group of four visionary soil sons of Pallisa. The formation of this health care facility came about as a result of a survey carried out in Pallisa County. This survey revealed that an inadequate number of health care facilities (including clinics and hospitals) exist in the six sub-counties of the Pallisa District in order to properly cater to the health needs of every individual living in the area.

The survey conducted in Pallisa shed light on some barriers to treatment that the individuals living in this area have experienced. One of the major barriers to accessing care is the lack of appropriate transportation. The distance between existing health care facilities (prior to the completion of the existing block of the Agule Community Health Centre) and lack of adequate transportation was found to cause an alarming number of unnecessary deaths in the area.

Another barrier to accessing care is cost. Cheap and reliable health services are unavailable to many people living in the community. The Agule Community Health Centre has been founded with great consideration toward the economic hardships and continued low standard of living of the individuals and families living within the area the centre serves. With this in mind, the Agule Community Health Centre continuously strives to offer services at the lowest cost possible.

The survey conducted also found that basic medicines to treat regular ailments are lacking in many health facilities. We at the Agule Community Health Centre have the utmost respect for the services being provided by the Nurses, Medical Doctors, Medical Assistants and other support staff that work in existing health care facilities. The centre has been conceived to supplement, not supplant, the care currently being provided by other health facilities in the area. It is our vision that the centre be equipped with all necessary medicines, state of the art medical equipment and a staff of sensitive doctors, nurses, medical assistants, etc. to provide a wide range of health related services and activities.

Agule has been developed with a broad mission to integrate all health related services and activities in the area it serves. It is our hope to target all sectors of the community: the youth, widows and widowers, men, women, children, orphaned vulnerable children, under-privileged persons, persons with disabilities and universal primary education children. In short, we wish to serve the *entire* community by providing individuals not only with health care, but also by empowering them to participate in programs designed with individual needs n mind.

The following is a list (though not exhaustive) of community beneficiary programmes the Agule Community Health Centre aims to provide:

- 1) Treatment of various diseases and ailments including, but not limited to, Malaria, skin diseases, headaches and other pain-related ailments and other ailments that may not be as common.
- 2) Health related services such as simple surgeries, dental services, eye care services to be provided, in most cases, free of charge at easily accessible common community centres (or at the Agule Community Health Centre) with the intention of creating a well managed health system that brings necessary health related services/treatments closer to the individuals in need
- 3) Treatment of HIV/AIDS related opportunistic infections as well as care and support on a moral/spiritual level through guidance, counseling and through providing additional and informational materials.
- 4) Voluntary and routine HIV/AIDS counseling as well as other related services/activities that promote positive living.
- 5) Youth related resource centre that contains information on health, HIV/AIDS, reproductive health and adoption of the ABC model, etc.
- 6) Promotion of basic health related activities at the house-hold level, including sanitation, hygiene, and family or individual basic health programmes.
- 7) A continuous 24-hour health monitoring system that promotes the management of health related issues on an insurance basis to Universal Primary Education pupils, especially with regards to Malaria. This will ideally be achieved through

intensive and comprehensive packaging with all stake holders, schools, parents, etc. through PTAs and other major health provision players in the country.

We, the four individuals who double as founding members and directors of the Agule Community Health Centre, realize that a healthy body, mind and community can achieve many things. This idea, coupled with the realization that existing health care facilities are unable to provide adequate health care for the whole of Pallisa County, has led to the agreement that instituting a health care facility that promotes the participation of its recipients/beneficiaries for its sustainability will go a long way in empowering local communities in matters of health. The Agule Community Health Centre has therefore been created to achieve the aforementioned goals while providing long-term benefits for disease management and health promotion.

Mission

The Agule Community Health Centre aims to create a sustainable health management system with direct community involvement and participation for improved health standards.

Vision

- Currently there is little to no community participation in matters of health; our vision is to see community participation increase to 40% by the end of 2010 through direct community empowerment.
- The current death rate due to inaccessibility of medical services is 20%; we hope to see this decrease to below 10% as the Agule Community Health Centre grows into a state of the art health care facility.
- Access to both basic medical services and ability to respond to emergencies is limited; our goal is to increase access and speed up the response to emergency situations.

Statement of the Problem

Health and health care are some of the most basic human rights and should be accessible to all human beings. However, due to lack of a necessary health care infrastructure, manpower, lack of enough medicine and insufficient funding, the government finds itself unable to provide the people with their fundamental right to proper health care. Other barriers to care are detailed in the following paragraphs.

Existing health facilities are often at great distances from the rural villages of Pallisa. Many patients die while being transported to these facilities. Even if a patient does indeed arrive at such a facility, there may not be proper medications available or health care personnel able to attend to them.

In instances where medical facilities could be put in place and be stocked with an adequate number of supplies, economic hardships and low standards of living make cost-sharing expectations from beneficiary recipients greater than what communities can afford. This causes individuals to resort to self-medication and the use of local herbs and traditional healers, which can further augment health problems.

The Agule Community Health Centre seeks to provide an alternative to the existing health care options. It has been established to provide better solutions to the health care problems individuals in the community face on a regular basis. With anticipated community participation, the Agule Community Health Centre will work toward creating short, mid and long-term solutions to health related problems in the Agule Sub-County in particular and in Pallisa County in general.

Targeted Beneficiaries of the Project

The Agule Community Health Centre Project targets all sectors of the population in the sub-county, including all adjacent villages and communities. Access to proper, reliable and efficient health care is a major problem and the services at the Agule Community Health Centre will be targeted to the following specific groups of individuals:

- 1) Universal Primary Education children

- 2) Non-school going children
- 3) Orphaned Vulnerable Children (OVCs)
- 4) Youth
- 5) Physically disabled persons
- 6) Women and men in the areas concerned
- 7) Under-privileged persons
- 8) The general community at large

The project is targeted to serve a population of between 30,000 – 50,000 people.

Project Site and Location

The Agule Community Health Centre is established on a 4-acre piece of land in the Agule sub-county of Pallisa County in Pallisa District in Eastern Uganda. The project is about 345 km (150 miles) east of Kampala City and 16 km (10 miles) off Tirinyi Road along the Iganga-Mbale highway.

The centre currently consists of one complete and fully functional block and three buildings that are under construction. All buildings planned for the centre are drawn on the architectural blueprint.

Overall Objective

The Agule Community Health Centre aims to provide long-term improved health care services through the improvement of service delivery systems. Areas of service to be improved upon include but are not limited to: customer/patient and service-oriented health care professionals and support staff as well as a continued and adequate supply of all the necessary medicines and equipment needed to benefit the health status of individuals in the community.

Specific Objectives

- 1) To enhance the capacities of the individuals living within the local communities near the centre to take control of their own health care and development

- 2) To carry out community based health care initiatives that will improve community health at the house-hold level
- 3) To identify and locate resources for improving quality of life and to demonstrate to the people how to utilize such resources to improve their standard of living
- 4) To construct a health center that is fully equipped at both a material and human-resource level with the expressed aim of providing adequate health care services.
- 5) To conduct training programs to equip local residents and beneficiaries with the knowledge and skill sets necessary for sustainable health management through the use of established health structures.
- 6) To provide the community with a friendly and affordable insurance scheme that caters to schools, families and individuals based on income level

Activities of the Health Centre

1. Construction of the Agule Community Health Centre

- a. Existing block at the health centre consists of a stocked pharmacy where patients may purchase prescribed medicines, an examination and diagnostic room with a resident/alternating doctor in place, a laboratory for performing diagnostic tests, a male ward, a female ward, a pediatric ward and a maternity ward.
- b. An x-ray ward and other necessary wards, as required by a well-established medical facility, are planned for future construction at the clinic site.

In order to create a sense of community ownership of this facility, all construction materials and labor will be offered by the community. It is hoped that this will encourage the community to safeguard the centre at all times. The people of Agule and its surrounding areas/counties as well as all civil and political leaders are represented on the Construction Management Committee to ensure that the community's interests are well served and catered to for the improvement of their health status, their goodwill and their participation in this project.

The health centre will be constructed in phases as a lack of funds does not allow for it to be implemented in whole at this time. Architectural plans and bills of quantities are available but are not a part of this document. The construction of the health centre is outlined in the following two phases:

Phase I: This phase will constitute the construction of the first three blocks; the existing block currently houses the administration of the centre including the store, pharmacy and other relevant offices. The other two ward blocks under construction are the maternity ward and the pediatric/female ward. The construction of on-site staff quarters is also underway at this time.

This phase will also see that the centre is equipped with the necessary equipment, medicines and staff (both in terms of health care professionals and support staff) to ensure that the centre is fully functional. Other community participatory services and activities are projected to start in this phase and will include:

- a) malaria awareness campaigns
- b) HIV/AIDS preventative, control and mitigation campaigns
- c) Mass immunization campaigns against polio, measles, diphtheria, etc.
- d) Sanitation and proper hygiene campaigns (i.e. basic primary health care campaigns)
- e) Family planning and development for population control campaigns
- f) Youth programmes on reproductive health and STIs as well as other related issues
- g) Nutrition and early childhood development programmes that will seek to utilize sustainable food security and child nutritional strategies
- h) Training of community based health providers in first aid treatment and home-based care health inspectors in all villages as well as at the parish and sub-county levels that will coordinate, monitor and inspect all health activities within their respective communities

Phase II: This phase will constitute the construction and completion of the Agule Community Health Centre so that it meets or exceeds the current standards of a well-

facilitated and structured health centre. Such standards include the establishment of an operation theatre to handle basic surgeries as well as perform referrals to other hospitals and health centres as needed. All other wards on the blueprints shall be completed during this phase at which time patients will be admitted to the respective wards in which they will receive care. All necessary equipment, supply (e.g. medication, bandages, antiseptics, etc.) and staffing needs should be met during this phase.

2. Sensitization of the community with regards to individuals' health rights

An expressed goal of the Agule Community Health Centre is to establish a massive community-wide outreach programme that will address the various health related problems in the area. This programme is intended to provide all groups of individuals with the necessary information concerning their health rights, specific treatments, medications and any other health-related topic. The hope is that the centre can work in collaboration with other stakeholders in the health services provision sector to reach out to the various villages and parishes that exist within the area to which the Agule Community Health Centre provides its services.

District representatives from the Ministry of Health and other private sector players will be requested to work together during the implementation of the above-proposed programs.

3. Prioritization of health needs

Health needs will be identified and prioritized through community outreach programmes. A goal would then be to have experienced health care professionals volunteer to treat and diagnose individuals living within the very rural areas served by the clinic. Both local and foreign volunteers would be recruited and organized through an exchange and social responsibility programme with the personnel at the Agule Community Health Centre.

Services to be offered at the Agule Community Health Centre

- Treatment of various diseases
- Voluntary counseling and testing (VCT)
- Dental services
- Family planning services
- Reproductive health and STI treatment
- Maternity and antenatal services
- HIV/AIDS information and ARV administration
- Universal Primary Education children's malaria treatment programme and distribution of mosquito nets and other anti-malarial devices
- 24-hour disease monitoring and surveillance
- Cost-effective and family income accommodative insurance schemes
- Other services will be introduced as need arises from the communities being served

Community Health Centre Implementation Plan

In order to achieve the goals set by the Agule Community Health Centre directors, various material, financial, equipment-related, man-power related, supply-related and operating systems related needs must be met. The most critical of these needs are detailed as follows:

Man-power

The health centre will initially be staff with one medical doctor, two qualified medical nurses, one laboratory technician, one cashier/receptionist, two members of support staff, a team of community health inspectors and liaison officers and one security guard. This team of staff will be responsible for the day-to-day management and overall operation of the health centre. Patient numbers and service requirements will be closely monitored to determine whether hiring more staff is necessary.

Facilities and Utilities

In-patient books and out-patient registers will be used to monitor use of the health centre and facilitate smooth service delivery. A computer system that can maintain a database of patient records, admissions, discharges and facility maintenance would aid in

organizing clinic files. Being able to provide other utilities such as clean drinking water or telephone/internet services would also be useful toward making the clinic operate more efficiently.

The immediate plan is to install a solar powered electrical system with a backup generator to provide lighting and other electrical needs to the clinic. 5000 L water tanks will also be installed on each ward to provide running water for the clinic.

Equipment, Machinery and Supplies

The main equipment needs for the health centre are as follows:

- Medical and laboratory equipment (e.g. microscope, ultrasound machine)
- Examination couches
- Stethoscopes and examination kits (i.e. dental exam kit, gynecological kit)
- Medical and laboratory supplies (e.g. test tubes, cylinders, gloves, gauze)
- Medicines as needed
- Office supplies for printing patient data cards, letterheads, visitor cards, etc.
- Building supplies for the further construction of the various wards that will comprise the completed Agule Community Health Centre

A more detailed list of supplies is available upon request; however, a majority of the needed supplies are the same as that which would be needed by any other health care facility. The Agule Community Health Centre already has two vehicles for use: there is one ambulance that is currently functional and one car that needs some repair before it can be used as a taxi service for patients.

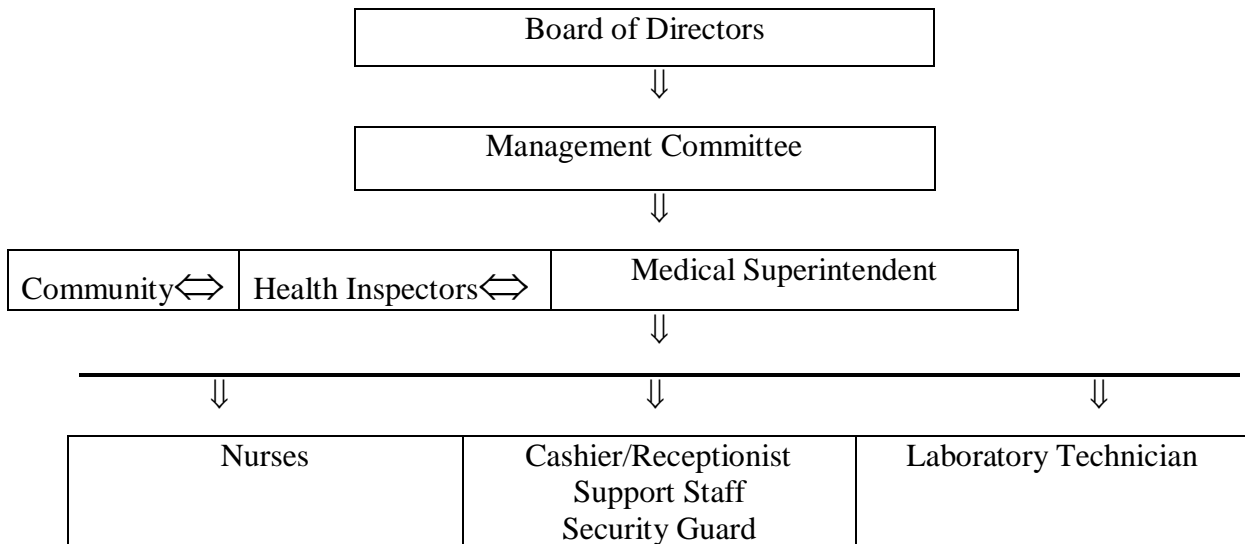
Overhead Costs

The Agule Community Health Centre will initially require a large sum of funds to become fully operational. Current costs include the costs of construction, procuring supplies (both medical and material) as well as recurrent expenses such as salaries, utilities and transport costs. The hope, however, is that the Agule clinic will become a self-sustaining entity once completed. The project directors are committed to working tirelessly to see this dream become a reality. Help from outside financial resources will serve to expedite the construction process and are a most welcomed input to the initial operation of the clinic.

Legal Framework and Structural Organization

The Agule Community Health Centre is registered as a company limited by share capital, with share contributions from the four directors. These share contributions do not meet all capital requirements of the project; as such, there is a need to solicit funds from different sources. These funds will serve to supplement the initial financial contributions of the directors.

Agule will later be integrated as a community based organization and, eventually, as a non-governmental organization that stresses community-centric ideals and services. Part of the vision for the Agule Community Health Centre’s project management and organization is to have the people of the community involved in the direction the clinic takes. With this in mind the following structural chart has been proposed:



The project will be managed and run by a team of qualified medical personnel who will see the project grow from its inception into a fully-fledged hospital. Below are some of the details that clearly specify the responsibilities, roles and lines of authority between the staff to allow for effective team management:

Board of Directors

- To be the supreme governing body of the Agule Community Health Centre in charge of making policies for the institution
- Medical superintendent (medical doctor) shall be secretary to the board; all decisions pertaining to policy administration, discipline of workers and identifying better approaches for delivering goods and services will be determined by the Board of Directors
- All issues of progress, including issues that might adversely affect the proper running of the project will be attended to by the Board of Directors, particularly in the initial stages of the construction of the centre
- The Board will be in charge of reviewing work plans and will approve activity reports, finances and programmes for the betterment of the project

Management Committee

- Committee will be comprised of all heads of departments; the medical superintendent will be the chairperson of the committee
- This committee shall have a representative community health worker, community mobilizer, community inspector from each parish within the area it serves
- A member of the beneficiary community of each Parish in the Agule sub-country will also be a participating member of this committee
- This committee is to develop and implement management decisions, subject to the approval of the Board of Directors
- This committee will provide a forum for voicing community opinions concerning health issues and how to best solve those issues
- This committee is directly answerable to the Board of Directors and must prepare regular reports

Medical Doctor/Medical Superintendent

- The medical superintendent is the technical head of the health centre and is to be assisted by other staff members in the day-to-day operations of the clinic

- He/She is the top most executive in day-to-day management of the health centre and will see that all duties are performed by the responsible personnel at a satisfactory level
- This person will be the signatory to the health centre's accounts and will be charged with the responsibility of cross-checking all accounts with the cashier on a daily basis
- This person will chair all management committee meetings
- This person is responsible for disciplining staff and must see that, overall, the clinic is well managed
- This person is to prepare day-to-day reports for presentation to the management committee for discussion; these reports will also be given to the Board of Directors for policy reforms
- This person must prepare and present daily, weekly and monthly medical assessments of disease trends

Medical Nurses

- Initially there will be two medical nurses on staff; one will be residential and the other will be a non-resident; they will assist the doctor in the day-to-day management of the clinic including the administration of drugs, performing medical examinations and the general health centre administration in the absence of the doctor
- Nurses report directly to doctor and are participants in the management committee meetings
- Nurses will make sure all patients pay appropriately for the treatment they receive and will notify the doctor of any supply shortages, especially with regards to shortages of medications

Laboratory Technician

- Responsible for carrying out all medical tests recommended by the medical doctor
- Responsible for ensuring all testing equipment and kits are in good operation order at all times

- Must work in collaboration with the medical staff to ensure that services provided are efficient and effective
- Directly reports to medical doctor
- Responsible for the records and up-keep of all laboratory equipment, tests and results, chemicals/reagents, etc.
- Must be a professional in the field with tenable minimum qualifications above S6; should have vast knowledge and experience in the field and must provide technical advice to the doctor

Cashier/Receptionist

- Directly reports to medical doctor
- Responsible for receiving and handling all incoming payments
- Responsible for safe custody of health centre finances and resources
- Responsible for upkeep of books/accounts, cash-inflows and out-flows on a daily, weekly and monthly basis
- Responsible for coordinating all customer inquiries and handling all incoming and outgoing calls
- Responsible for preparing and processing all payment vouchers in close consultation with medical doctor
- Must have minimum qualification of S6 with a diploma in Business Administration, up to 3 years experience and computer literacy with regards to basic accounting and administrative pages

Support Staff

- Comprised of two individuals who will be in charge of any messages that need to be delivered, photocopies that need to be made, preparing tea for staff, ensuring that supplies necessary for his/her job are in stock and general cleanliness/upkeep of the health centre premises
- Report directly to the cashier/receptionist for immediate administrative roles

Security Personnel

- Responsible for providing security for workers and patients on the health centre premises
- In charge of directing and checking in all visitors to the health centre
- Responsible for the safeguarding of all clinic property
- Reports directly to medical doctor and should give medical doctor weekly and monthly reports
- Should be experienced ex-service men or security personnel with reputable experience in security operations

Field health Community Inspectors/Coordinators

- Number of these individuals will depend on the number of parishes in Agule sub-county
- Each parish will be charged with one field health community coordinator who will facilitate all community participation health programmes
- Responsible for inspecting, and recommending accordingly, all problems associated with health infrastructure and health standards within the community
- Responsible for ensuring that proper sanitation and hygiene is observed
- There are to be chairpersons of parish health committees that will report all findings, decisions or recommendations to the management committee for deliberation and consideration on policy inclusion
- Responsible for mobilizing the community to actively participate in health programmes
- Responsible for coordinating door-to-door outreach and implementation of health programmes
- Inspectors should have a minimum education standards of S6 with a clear understanding of language in the areas of operations; experience in the area of Public Health is desirable
- Will report directly to medical doctor and prepare weekly and monthly reports
- Will constitute a member of the management committee and are expected to provide the above reports regularly

N.B.: As the health centre will operate on a 24-hour basis, there will be a need to increase the manpower as soon as possible. The responsibility as to how soon the hiring of additional staff will be applicable is directly charged to the Board of Directors

Instructional Settings

In order for this project to achieve the set aims and objectives it must work efficiently and effectively with existing governmental organizations and institutions. Approval of the project must be obtained from the proper personnel at the Ministry of Health, the Pallisa Directorate of health Services, Agule Sub-County Health Inspectors and members of the District Local Government, the CAO, the RDC and the LCV Chairman.

Organizations like the AIDS Support Organization (TASO), the AIDS Information Centre (AIC), the Family Planning Association of Uganda on Reproductive Health and Family Planning Issues, and Population Services International (PSI) will be consulted on an as-needed basis for technical support in each organization's respective field.

Project Sustainability

Clinic revenue will be gained through the sale of medications to patients and also through a cost-sharing fee for all services accessed. It is also a goal of the Agule Community Health Centre to establish a relationship with existing facilities in other areas of the world to lobby for donations (both financial and material) and volunteers to offer medical services.

As a community-based facility, the Agule Community Health Centre will be able to access Local Government Development Funds (LGDF) to finance and facilitate the implementation of the various programmes the centre seeks to offer. Through unrestricted grants from the government, clinic revenue and outside donations the clinic hopes to become a sustainable health care facility.

Monitoring and Evaluation

The proprietors of the Agule Community Health Centre and the implementation team leader will perform monitoring of the project. Technical personnel from the Ministry of Health, Directorate of Health Services in Pallisa District, officials from the COA, officials from the RDC and officials from the LCV Chairperson's office will perform on-site visits to ensure that all agreed upon standards of clinic operations are being met. The health of the people is one of the government's priorities; the government must therefore ensure that private establishments such as the Agule health centre exist legally and meet specific standards of care. Regular reporting and a willingness to supervise will help to make this project a success.

Project promoters need to first establish the needs of the people in the community in order to establish whether the project is providing real solutions and in order to see whether set aims and objectives are being met. The project shall be subject to a mid and post term review process that will serve as an evaluation tool. Base line and post-project surveys should be developed as another means for determining project progress.

As the health centre becomes more fully operational, all heads of departments will be required to provide performance reports and data on the various activities and services offered by the clinic.

Conclusion

The Agule Community Health Centre is a project of special undertaking, developed and designed by the caring sons of Pallisa District. While it is apparent that the government of Uganda is doing all it can to provide quality and reliable health services, an increase in population, insufficient funding and other technical issues are making providing adequate health care quite difficult. Agule has therefore been set up to work within the existing health care infrastructure in collaboration with previously established health care facilities to bridge any gaps in patients accessing care.

We at the Agule Community Health Centre believe that community participation is key in health service provision, management and sustainability. We therefore call for an amicable working relationship between all stakeholders, policy makers, development partners and beneficiary communities. Together we shall accomplish so much more than we would alone.

“A community health care participation programme for sustainable health management”