On 1<sup>st</sup>/12/2018 we travelled safely with Ramadhan to Bunya, though faced little problems on our way back to pick forgotten items by Ramadhan.

## STATE OF THE FACILITY

The record keeping had been improved as we had prior planned and arranged it i.e this includes: - The receipt and purchase of drugs, distribution of drugs, the amount of drugs dispensed and the amount of money obtained and how it was spent.

With these issues it was at 50% completely effective and we emphasized on improvement to 100% efficiency from the Director, as this is a good measure to help us follow up.

There were complaints from the workers about salary in an informative way that the money given to them was not corresponding to the amount received.

This was a hit up problem brought about by the information from Ramadhan that the Director received 1,500,000/= Shillings and yet he paid out only 1,100,000 for the October salaries, according to him, he received 1,148,347 (as evident in photo 1 below) from world remit and distributed it as below:-

Clinical officers	-Jacob Talirwa	250,000
	-Isaac Isasha	200,000
Laboratory attendant	-Tibita Moses	200,000
Support staff	-Cleaner (Samson Gogolo)	40,000
	-Cook (Leah Basirika)	50,000
	-Askari (Oketcho Gideon)	60,000
	-Water & compound (Mudaasi Willian)	60,000
New Nurse	Mid-wife (Katuba Kasiri)	200,000
Grand total	1,060,000	

And the top up had to come from the facility earnings.

From the 1,148,347 Shillings received, after deductions, probably the Director got a net of about 1,100,000 Shillings and so this money wasn't enough for the mentioned month's salary payments.

After this we urged the Director to always top up with money from the facility other than giving partial payments to the employees or else you as the Directors to provide the full amounts of payments, so as to avoid the harvock caused.

The wages structure for everyone is a follows.

Post	Name	Amount (current)	Requested amount
Clinical officers	1.Jacob Talirwa	300,000	300,000
	2.Isaac Isasha	200,000	300,000
Lab attendant	1.Tibita Moses	250,000	250,000
Mid-wife	1.Katuba Kasiri	200,000	200,000
Cook	1.Leah Basirika	50,000	50,000
Cleaner	1.Samson Gogolo	40,000	40,000
Askari	1.Oketcho Gideon	60,000	60,000
Water & Compound	1.Mudaasi William	60,000	70,000
Director	1.Mukisa Wilson	300,000	300,000
	Total	1,460,000	1,570,000

The director also had a complaint that ever since he was promised a salary of 300,000/= monthly since October, he had never received any payment in respect to this and it was included in his letter to you (proprietors) as evidence shows in photos 2 and 3 below.

From our previous visit the only adjustment made positively at the facility was the good record keeping, maintenance of the stock of drugs (stock outs are over) which we thought was a good milestone achieved, though it's still at 50% and by end of the year the book and record keeping will be at 100% as per our pre-discussed plan with the Director.

As we had arrived and had a discussion with the clinical officers, they showed signs of unavailability on some days in the near future as they had to go for Graduation Ceremonies and hence the facility would be left with no clinician, this forced us question the director on the issue and he replied that in such cases they call upon Wasswa Joseph who doubles as the facility in charge, since his academic documents are used to cover the facility registration and hence we inquired about his payment and the director said that he is paid 30,000 shillings which is just enough for transport from and back to his current employment place.

At the facility, Wasswa Joseph would /should be second ranked to Director due to his position of relevance but we realized from the Director that this payment was little because it seemed like he was being paid for just transport and yet everyone at the facility guarantees that he is the best, most reliable, efficient and most experienced medical personnel at this place and so should be valued, but still heard that he may not renew his covering of the facility and this will affect us as it isn't easy to get and replace some one of his stature.

We agreed that the director increase his payment up to 50,000 shillings and promise improvement as time and better performance goes on.

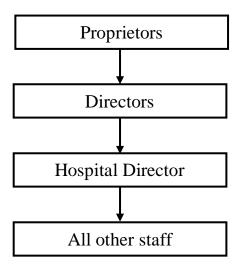
On the case of the new nurse after Juliet (former mid –wife) was stopped from work due to misconduct and there was also language barrier (as said by the witnesses present on day of the incident). Was hired to fill this gap and she has started work "but hasn't yet obtained her papers" Director.

On interaction with the clinical officers, we realized there was a disorder in the receipt of patients and collection of money from the patients and so we had to correct this order.

They really needed salary increment, which we agreed that this can only happen if they improved on the performance sales wise.

They also raised the issue of reference books and we agreed that director should buy them; these include the Uganda Clinical Guidelines, BNF and Merck Manual.

On the process of the visit, we realized there was parallel management from the hierarchy structure that runs as follows.



There has been information shared by the staff to the facility proprietors regarding the Director and in the response there was a mixed reaction to the misinformation that leaves the Directors pride in hanging as this still back fine to the management systems.

There was a problem as the health workers were charging patients more money than the would be amount and this could in turn give a bad image to the rising facility, this has proven absence of the Director for such action and the most responsible replacement would be Joseph Wasswa that doesn't have this practice but for both of these people had been demoralized. Hence advise on better knowledge on handling of this matter.

We urged the Director to be open and improve communication but there are hindering factors like network and unavailability of a smart phone that eases communication.

As we saw there was miss and improper communication between the facility director and the proprietors.

The Director had sent incomplete information about the task you had asked him to present and so it also caused some misunderstanding and so we cautioned him to always send detailed clear information. This was about the total money to be paid in salaries, but unfortunately he didn't include his 300,000/= to the 1,210,000/= that brings to a total of 1,510,000/=to be paid monthly (as evident in photo 2 and below)

Of the previous complaints, only the food and meals had been worked upon, but the rest like T.V set, e.t.c as previously written and communicated and so we advise some of the money collected to work on some of the these small issues other than still obtain/sourcing money from the directors to work upon this.

## **Deduction:**

- There is a problem with the administration management between the proprietors, the Facility Director and Ramadhan.
- There is a problem with the proper handling of finances.
- There is a growing culture of undermining the facility Director at the clinic.
- Matters we raise aren't looked into for easier and faster response from you (proprietors).
- There is poor communication and poor communication flow both to and from the proprietors and the facility director.

## **Conclusion**

- Halt parallel communication without getting information from the Director.
- Timely/internal contact between Mr. Nyende and Director (daily or every 2 days) this should be a fellow that includes questions on how

- (i). Much money is available and been spent and how it was spent.
- (ii). The numbers of customers that have come;

This should involve Mr. Nyende noting down these figures, so as to compare on the day we go back.

- Regular monthly visits are required in a way of audit, accountability and correct the wrong/ not well done activities at the facility.
- Enable some money be spent on a few small things.
- Set targets for everyone as it can act as a benchmark on discussion.
- Given immediate feedback on the concerns raised in the reports.
- The director must obtain a smart phone for easier and effective communication.