COMMUNITY HEALTH INITIATIVE ORGANIZATION (CHIO)



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BUSINESS PLAN FOR

COMMUNITY HEALTH INITIATIVE ORGANIZATION (CHIO) FOR THE PRIMARY HEALTH CARE PROJECT IN KULUBA SUB-COUNTY KOBOKO DISTRICT UGANDA

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EXECUTIVE SUMMARY

Construction of a community health care Centre for provision of primary Health Care Centre

Uganda, like many countries of the developing world, is faced with the challenge of providing adequate health services to all her people. However, available national resources, especially finance, are insufficient to implement this mammoth task. Consequently, under the Health Sector Reforms, the Government is working together with a number of other agencies to help realize this goal.

Within the Kuluba sub-county the situation is the same, there is a large population of about 48,000 people that at present time do not have access to health services in their locality. Only one government health Centre located in this area (Sub-County) but it does not address all the needs for health services which are the rights of Nyambiri community. Even to access this health Centre, the community people have to travel between 10-20 km at a cost or foot. The roads in this area are not well passable thus it is difficult to find transport to access mother and child health care services especially at night and in rainy seasons

As a result, many expecting women deliver at home without being attended by health personnel. This causes a high incidence of maternal/child mortality, and morbidity malaria, diarrhea, respiratory tract infections and HIV/AIDS which are the common diseases hampering development in this community.

Target Group

With a total population of about 48,000 people, and the refugees from South Sudan, this project is targeting 10,000 people. 6,000 of this being children, 2500 being youth and women, 1500 being elderly. The populations in these communities are of low income or no income at all, whereby majority of people fall under rural poverty group.

Activities

- Hold project inception meetings with communities
- Mobilisation of local construction materials (Bricks, sand and hard core)

- Procurement of non-local construction materials (timber, iron sheets, iron bars, cement, paint etc
- Transportation of local and non-local construction materials
- Real construction of the FCH-C (Site clearance and excavation, foundation slab, walling and ring beam, roofing, finishes and fittings)
- Pay causal and technical labour for construction and commissioning of the Health centre

Project Expected Results

The project is expected to result in to reduced morbidity and mortality rates for children, youth/women and elderly from easily preventable and treatable diseases and reduced distances covered by the communities in accessing heath information and treatment

Services to be offered;

These services include;

Outpatient treatment of common illnesses E.g. malaria, respiratory tract infections, bacterial infections and other child hood illnesses E.g. diarrhea, cough/pneumonia, measles E.tc

Outpatient diagnosis and treatment of uncomplicated non communicable diseases E.g., hypertension and other cardiovascular diseases, diabetics of all types, asthma and other respiratory tract diseases, malnutrition, musculoskeletal conditions E.g., arthritis among others

Maternal health services E.g. Antenatal care services [eclampsia, anemia, mal presentation, and sexually transmitted diseases], Deliveries, its complications and postnatal care,

Immunization against childhood killer diseases and other groups of people

Health promotion and disease prevention through health education, sensitization and immunization

Family planning and other reproductive health services including guidance and counseling of all groups of people, cervical cancer screening and vaccination

HIV/AIDS guidance and counseling, testing and referral for treatment and care of those indicated.

Carry out minor surgical procedures

The above services will be provided on Outpatient service department [OPD] basis except for maternal child health cases [Pregnant mothers and Neonates] and emergency cases. However, with continued growth and support, CHIO will advocate for construction of a general ward to be able to admit all cases and people within the facility

Management

The organization will employ 6 service providers supported by 2 support staff, among which will be a senior clinical officer to be the in charge of the facility, She/he will report directly to the BOG and to the District Local Government under ministry of Health policies/ guidelines and the recruitment Other workers will be recruited basing on the firm's recruitment policies as laid in the business plan. The BoG will on a continuous process monitor and evaluate the progress of the health care Centre

CHAPTER ONE

1.0 Background of the Principals

CHIO seeks to work closely with rural poor and urban poor communities across the district to address their real needs and build local partnerships with institutions/community support structures in order to jointly identify and address the underlying causes, steer change and improve health of the local people

CHIO intervention areas include among others; maternal child health and nutrition, family planning and sexual reproductive health/rights, psycho-social support for mental health services, community centered innovations and research, food security and health care access and utilization.

1.1 The main purpose of the business

The purpose of the project will be to increase access to primary health care services to the community.

1.2 Finance

The initial capital for starting up the project is Ugsh 66,210,810 (Sixty-Six million two hundred and ten thousand eight hundred and ten) for the construction project which will be financed by the Community and NASF [as Requested for Funding]

After the construction. the facility will need equipment and supplies worth 9,000,000/= which will be financed by CHIO.

THE BREAKDOWN FOR CONSTRUCTION OF OUT PATIENT DEPARTMENT AND A VIP LATRINE

Item Description	Units	Quantity	Rate	Amount	Source
Community mobilization					Donation/NAS
meetings	Sittings	2	250,000	500,000	F
Commissioning the					Donation/NAS
facility	Event	1	1,500,000	1,500,000	F
Direct Costs					

А					
Acquisition of local					
materials					
Clay burnt bricks	Trips	8	185,000	1,480,000	Community
Hard core	Trips	5	95,000	475,000	Community
coarse aggregates	Trips	4	120,000	480,000	Community
Pit sand	Trips	4	850,000	340,000	Community
River sand	Trips	8	100,000	800,000	Community
Red marrum	Trips	18	130,000	2,340,000	Community
Put log	Poles	30	4,500	135,000	Community
Hire of Transport lorry	Trips	77	80,000	6,160,000	Community
Subtotal A				12,210,000	COMMUNITY
В					
Slab construction					
					Donation/NAS
Supply cement	Bags	210	35,000	7,350,000	F
Supply BRC	Rolls	12	320,000	3,840,000	donation/NASF
Foundation Back fill	Volume	37m3	6500	240,500	Donation/NAS F
					Donation/NAS
Supply 1x10 floor boards	Pcs	20	18,500	370,000	F
Supply wire nails 3,4,5					Donation/NAS
inches	Kgs	15	6,500	97,500	F
Sub Total B				11,898,000	Donation/Nasf
С					
Construction of the supper structure					
Supply 12mm iron					Donation/NAS
mongary	Pcs	32	36,000	1,152,000	F

					Donation/NAS
Supply 6mm mild steel	Pcs	112	6,000	672,000	F
					Donation/NAS
Supply binding wire	Kgs	23	6,000	138,000	F
					Donation/NAS
Supply 75mm iron steel	Pcs	3	45,000	135,000	F
Supply/fix shuttering					Donation/NAS
Boards	Pcs	25	18,500	462,500	F
Supply wire nails 2,3,4,5					Donation/NAS
inches	Kgs	12	6,500	78,000	F
Supply wall tie/ hooping					Donation/NAS
iron	Rolls	5	50,000	250,000	F
					Donation/NAS
Supply burnt Oil	Litters	40	1,200	48,000	F
					Donation/NAS
Supply/fix vent bricks	Pcs	134	750	100,500	F
					Donation/NAS
Supply DPC	Rolls	6	12,000	72,000	F
					Donation/NAS
Sub Total C				3,108,000	F
D					
Roof Structure					
					Donation/NAS
Fix 2x4 purlins	Pcs	76	10,500	798,000	F
					Donation/NAS
Fix 2x4 struts	Pcs	62	10,500	651,000	F
					Donation/NAS
Fix 2x6 rafters	Pcs	26	10,500	429,000	F
					Donation/NAS
Fix 3x4 wall plate	Pcs	12	18,500	222,000	F

					Donation/NAS
Fix hooping iron	Rolls	6	50,000	300,000	F
					Donation/NAS
Fix corrugated iron sheets	Pcs	88	35,000	3,080,000	F
					Donation/NAS
Fix ridge caps	Pcs	12	13,500	162,000	F
					Donation/NAS
Fix roofing nails	Kgs	14	6,500	91,000	F
Supply wire nails 2,3,4,5					Donation/NAS
inches	Kgs	35	6,500	227,500	F
					Donation/NAS
Fix fascial board	Pcs	16	18,500	296,000	F
					Donation/NAS
Provide for ceiling works			2,203,200	2,203,200	F
					Donation/NAS
Sub Total D				8,459,700	F
Е					
FITTINNGS AND					
FINISHES					
					Donation/NAS
Fix window casements	No	11	175,000	1,925,000	F
					Donation/NAS
Fix doors casements	No	7	235,000	1,645,000	F
					Donation/NAS
Fix glasses 5mm	Pan	14	85,000	1,190,000	F
					Donation/NAS
Fix steel putty	Kgs	44	4,500	198,000	F
Internal and External					Donation/NAS
plaster	Bags	112	35,000	3,920,000	F
Supply Coarting lime	Bags	15	28,000	420,000	Donation/NAS

					F
					Donation/NAS
Supply fix floor tiles	Dozens	56	50,000	2,800,000	F
Provide general painting					Donation/NAS
works			1,620,000	1,620,000	F
					Donation/NAS
Sub Total E				13,718,000	F
TOTAL MATERIAL COST				49,393,700	
Labor for skilled and					
unskilled at 30%				14,818,110	Community
GRAND TOTAL					
DIRECT COSTS				64,211,810	
TOTAL INDIRECT					
COSTS				2,000,000	
GRAND TOTAL,					
DIRECT AND					
INDIRECT COSTS				66,210,810	
	Cement,				
	iron				
	sheets,				
	iron bars,				
REQUESTED	paints,				CHIO through
AMOUNT FROM	tiles,				mobilization
GLOBAL GIVING	windows				(Global giving
ONLINE FOR VIP	, nails,				online fund
LATRINE	timber	-	Lump sum	15,000,000	raising

	for roofing,			
	water			
	pipes,			
COMMUNITY				
CONTRIBUTION			27,028,100	
				Already
				Covered by
				NASF-Holland
				and project
				under
				constructionof
				Out Patient
REQUESTED AMOUNT			39,182,700	Department

1.3 Confidentiality

This report is confidential and it is a property of the organization. It's intended only for the use of the persons to whom it is transmitted and any reproduction of any of its contents without the prior written consent of the company is prohibited.

CHAPTER TWO

2.0 Introduction

This chapter covers the mission, vision statements of the organization objectives and goals

2.1. Vision:

To promote the socio -economic status of mother and child for development

2.2 Mission

To build healthier lives through comprehensive family and community initiatives

2.3 Corporate objectives

The key factors to achieve our mission and vision will include the following:

- 1. To increase access to maternal child health services
- 2. To increase access to family planning, sexual and reproductive health /rights
- 3. To respond to cross cutting issues E.g. water and sanitation, HIV/AIDS, youth and women empowerment and create an economic advancement to the community, humanitarian response.

2.4 Goals of the Organization

- ✤ To respond to healthy maternal child services
- To build healthier lives
- ✤ To promote Scio-economic status in the community

2.5 Core Values

Trust, love, team work, sharing, openness, equality, tolerance, justice, transparency, accountability

CHAPTER THREE

3.0 Description of the Organisation

3.1. History

CHIO is a non-profit, non-denomination, apolitical, and no-sectarian organization Community Based Organization.

It was formed in 2015 and legally registered with Koboko district local government on 25th August, 2016 with Reg No; 563/0123, operating under the NGO Laws in Uganda. It was initiated by individuals who deemed it necessary to engage it necessary to engage the local community and other stakeholders to address the gaps and challenges in their health with focus on Reproductive, Maternal, Neonatal, Child and Adolescent Health

CHIO seeks to work closely with rural poor and urban poor communities across the district to address their real needs and build local partnerships with institutions/community support structures in order to jointly identify and address the underlying causes, steer change and improve health of the local people.

CHIO intervention areas include among others; maternal child health and nutrition, family planning and sexual reproductive health/rights, psycho-social support for mental health services, community centered innovations and research, food security and health care access and utilization

3.2 Industry and target population

The project/ health care Centre will provide outpatient services to the community, inpatient services will be limited to maternity cases and where necessary emergency admissions. The facility will provide services to people of Nyambiri parish and other neighboring communities for example, people from South Sudan across the border, people along Congo boarder with Uganda [with note that health services have no borders, we will welcome people from all other communities provided they can access the facility.

3.3 Product and service description

The services to be provided are the following;

Outpatient treatment of common illnesses e.g. malaria, respiratory tract infections, bacterial infections and other child hood illnesses/ conditions e.g. diarrhea, cough/pneumonia, ear infections, Malnutrition, Anemia of all causes, e.tc.

Outpatient diagnosis and treatment of uncomplicated non communicable diseases e.g., hypertension and other cardiovascular diseases, diabetics of all types, asthma and other respiratory tract diseases, malnutrition, musculoskeletal conditions e.g., arthritis among others

Maternal health care services e.g. Antenatal care services and manage other conditions during pregnancy, conduct deliveries and manage complications that may arise during delivery, provide postnatal care and manage complications that may arise. Diagnose, treat and or refer other obstetric conditions for further investigations or management

Family planning and manage its complications, diagnose, treat and or refer other gynecological conditions for further investigations and management e.g. infertility,

Provide a full package of immunization against all immunizable diseases for all groups of people

Health promotion and disease prevention through health education, sensitization, immunization etc.

The above services will be provided on Outpatient service department [OPD] basis except for maternal child health cases [Pregnant mothers and Neonates] and emergency cases. However, with continued growth and support, CHIO will advocate for construction of a general ward to be able to admit all cases and people within the facility

3.4 Organization success

Since the initiation of CHIO in 2015, it has built its structure, formed partnerships with different stakeholders. Through the medical Centre, it has provided treatment and care to the locals, dialogues with the local community and problem assessment nee.

CHIO has sustained itself despite different challenges and setbacks and is growing / moving forward.

3.5 Management capabilities

The organization will focus on recruiting qualified, experienced, ethical and highly skilled employees who will work towards the fulfillment of the organization's objectives, in line with a set of standards by the Ministry of Health and in the best interests of patients/ clients at all times.

3.6 Funding requirements

The initial deposit of sh. 75,210,810 will be used to secure premises, procuring service equipment, construction and employees.

CHAPTER FOUR

4.0 Definition of the Target Population

4.1 Location of the Business

The project will be located in Busia- Nyambiri parish- Kuluba sub county- Koboko District-Uganda and will target people of Nyambiri parish and its surrounding areas of Ludara Sub county, South Sudan [Near the boarder] and other places provided they can access the facility

4.2 Map of Koboko showing location of Kuluba sub-county and the surrounding area



4.3 Services offered

Outpatient treatment of common illnesses E.g. malaria, respiratory tract infections, Sexually Transmitted Diseases and Infections, bacterial infections and other child hood illnesses e.g. diarrhea, cough/pneumonia, measles etc.

Outpatient diagnosis and treatment of uncomplicated non communicable diseases e.g., hypertension and other cardiovascular diseases, diabetics of all types, asthma and other respiratory tract diseases, malnutrition, musculoskeletal conditions e.g., arthritis among others

Maternal health services e.g. Antenatal care services [eclampsia, anemia, mal presentation, and sexually transmitted diseases], Deliveries, its complications and postnatal care,

Immunization against children killer diseases and other diseases

Health screening, sensitization, education and health promotion

Family planning and other reproductive health/gynecological services including guidance and counseling

HIV/AIDS guidance and counseling

Carry out minor surgical procedures

With continued growth and support, CHIO will advocate for construction of a general ward be able to admit all cases and people within the facility

4.3 Reasons for Choosing Nyambiri

During service delivery at the medical Centre in Koboko town, we received clients from far places, these people would come when the sickness has advanced and complicated, these people would give reasons that the health Centre's are far away to access the services and that the local government has neglected them.

As the organization's community dialogue activities, different issues affecting development in Nyambiri and Kuluba sub-county at large were discussed, the community gave access to primary health care services, impassable transport roads, unemployment, low economy, poor water sources as the main problem affecting the community. Through need prioritization, the community agreed to have a community health Centre constructed in their locality with their full participation by providing land, local construction materials, labour and take part in sustainability by contributing a fee/ money to run the day today activities of the health care Centre

Conclusion and recommendation

Through needs assessment, the problem i.e. lack of health Centre was identified and prioritized by the community people themselves. The solution was also obtained i.e. building of a health Centre in Nyambiri Community. Thus according to the results, lack of health Centre is the main problem in this community also the results showed that, malaria, maternal child health were the most challenging problems in the community.

Recommendation

Since health is a right for all, it was recommended that a health Centre be constructed in Nyambiri with full participation of the members but with assistance of other charity organization since the community discussed inability to acquire non local construction materials as another challenge in construction.

4.4 Opportunities for the expansion of facility

The mission and vision of the organization provides a fertile ground that the organization shall maintain the provision of special quality services by the use of our expert knowledge by our experienced staff. This we believe will give us a room for expansion. The fact that there is still a missing gap in provision of health services in Nyambiri, we hope to be the only savior and the only providers of best quality and affordable health services. This beyond doubt will make us expand and survive.

CHAPTER FIVE

5.0 Swot Analysis of the Organization

5.1 Organizational SWOT analysis

In trying to figure out how CHIO will intervene to address some of these challenges, the organization undertook to examine its internal capabilities (Strengths and weaknesses) as well as

its external environment (opportunities and threats) to determine the right goal, purpose, objectives and strategies as below.

Internal Factors

Strengths	How to build on them	Weaknesses	How to improve on them
CHIO members are active	Continue involving the members in CHIO activities	Lack of own office premises	Construct own office premises
Legally registered with the district	Adherence to the terms and conditions of registration	-	Acquire motor bikes
Strong, committed board and secretariat		No sources of funding	Develop a strong fund raising strategy
Legal and policy documents in place		-	Recruit more staff with the required skills, and develop the capacity of the existing ones
Committed volunteers	Continuous engagement of volunteers	Low capacity of members	Undertakecapacityassessmentofthemembers andbuildtheircapacity
The organization has land provided by the community for construction	• •	Competitive nature of winning projects	Engagedifferentorganizationsandstakeholders meeting

External environment

Opportunities	How to take	Threats	How to mitigate them
	advantage		
Good relationship	Continue working	Hostile NGO legal	Lobby with other CSOs
with local	together with	regime	for good NGO working
government, partner	stakeholders		environment
organizations and			
the communities.			
Communities are in demanding of CHIO services	Timely response to community concerns	Globalrecessionrestrictingfundingopportunities	Utilize the available funding opportunities and fit into the global reforms
Existing funding partners	Write proposals to funding partners	Tendency of some localauthoritiestoundermineCHIOactivities	Evidence based implementation strategy for CHIO activities
Political good will	Continue to further lobby for the support from local authorities	High rate of inflation and hence rising cost of living	1 0
Existence of	Network and	Competition between	Harmonization of
likeminded NGOs	collaborate with	bigger CSOs and	program areas and
to network/	existing organizations	government on funding	activities among CSOs
collaborate with			and Government

5.2 Medical Business Swot Analysis

(A) Strength

Our strength could be that we running a medical center currently and we have needed experience to meet the required management and services.

Our strength as an organization is that we are working with the local community with its full participation and will continue to participate in running the facility for sustainability.

Will provide the minimum health care package [recommended by the ministry of Health-Uganda] at a cost friendly price which is in contrast to other existing facilities and these services are a community demand driven.

Good relationship with the Koboko District Local Government evidenced by the MoU signed, the district will be able to represent and sale our facility to higher levels E.g. ministry of health and other organizations.

(B) Our weaknesses.

It could be that we will be a new facility and it will take some time to generate the expected turn up of clients to meet the projected expenses.

Since some of our services will be for pay, some clients may not be able to pay the charges for the services.

(C) Threats

Price fluctuations of drugs and other health care necessities may affect our business.

Civil wars in the neighborhood South Sudan may affect the business

International organizations may take away our technical personnel as our monthly facilitation could be low compared to what is paid in such organizations

There is hardly anything we can do in regards to these threats and challenges apart from providing quality health care services which is what a client needs and be optimistic that things will continue to work for our good

(D) Opportunities

Our opportunities are that we are bringing new services which are lacking in the community and are highly demanded by the community

The strategic location of the health Centre in a hard to reach community and on a cross border with South Sudan is an added advantage

It could be of an advantage that we are establishing community demanded services in an area that has not been considered much, it could be of an advantage that other grownup organizations come and support us for more development programs

5.3 The PEST analysis of the organization

(A) Political

In future the government may establish a government health Centre, however, the organization will maintain quality services to retain our clients

(B) Economic

There is a proposal by the Ugandan central government to establish an international market in the community along Uganda-South Sudan boarder, this may attract more people to relocate to the community and carryout economic activities/ trade, hence more clients to get services in the facility

(C) Social

Much as this facility is intended to increase access to primary health care services of the local community of Nyambiri, we anticipate that south Sudanese living near the Ugandan-South Sudan boarder and those settling in Uganda due to their home civil wars will also seek medical care services in the facility

(D) Technology

CHIO will advocate for acquiring improved machines, for example, computers, U/Scan, Microscopes, CBC Machines etc, so as to improve the efficiency and service delivery.

5.4 Situation Analysis

Nyambiri parish is located along Uganda South Sudan boarder in Kuluba sub county. Kuluba has a total population of about 40,000 people with a population growth rate of 3.2% [which is above the national growth rate] as of 2015 population census, with Nyambiri parish having the highest population of people in Kuluba. The population is expected/thought to be higher than this due to the recent 2016 civil war in the neighborhood South Sudan and Democratic Republic of Congo and the ever increasing farming taking place in the community.

Currently the people of Nyambiri access medical services through private for profit clinics within the area which offer treatment of common illnesses e.g. malaria, bacterial infection, respiratory Tract infection among others to the community and at high costs. These clinics lack maternal child health care services like antenatal care, deliveries, postnatal, immunization, family planning services, guidance and counseling among other services and qualified, trained and highly skilled personnel. This is due to the high standards of infrastructure, human resource, equipment and multi-stakeholder's collaboration required in providing such services. For example, for a facility to acquire vaccines for immunization, one has to collaborate with the district Local Government health department to access the vaccines which are supplied by the world's intergovernmental organizations UNICEF & GAVI. With the MoU between CHIO and Koboko District Local Government, we believe if the infrastructure is put in place, this is the beginning of accessing quality health care services.

The people of Nyambiri acquire these services in the nearest health Centre which is about 20kms away from the community which is far away compared to the Ugandan Ministry of Health recommended 5kms to the nearest health Centre. Due to these long distances that need to be covered at a transport cost [6,000/= to 8,000/= per person] to access these services and some people use a 3-5 hour walk to access the services, some people miss out on these important services especially antenatal care and delivery services, immunization and family planning, other services they access them when its late for example emergency cases and acute infections. This has led to high incidences of mortality and morbidity especially among women and children (maternal child health mortality and morbidity rate are higher than other parts of Koboko) in the community among other problems like high teenage pregnancy, missed family planning services.

Through community dialogues, different problems affecting the community were discussed and solutions to the problem found, the community priotised that building a health care Centre with their full support was the best and would drive the community to development.

5.5 Sustainability Strategy

Construction of an infrastructure is the startup for the establishment of a Primary Health Care Centre in the community and not a guarantee of continued existence and service delivery. However, several strategies will be employed to sustain the facility to expand and serve more services to the community compared to the startup services, serve the community with appropriate services and increase area coverage in the community. In order to achieve this, CHIO will employ the following measures to achieve sustainability and growth of the Health Care Centre and continued service delivery to the community.

A] Collaboration with the community; The community is aware of the challenges it faces in relation to accessing Primary Health Care services, through dialogues the community has offered to participate by providing land for the Health care Centre, taking part in the construction by providing local construction materials and labor. The community is ready to pay a friendly fee to access services at the facility. This fee will be used to procure drugs and other necessities, pay technical and support staff of the health care Centre, maintain, facilitate, sustain, and improve/ develop the facility. The community will also take part/ have a positions on the Health Unit Management Committee which will sit routinely to assess the function of the Health Unit

B] Networking and Collaboration with the local government. The organization has signed a renewable 5year MoU with Koboko district local government, this MoU is meant to bring out collaboration between the two parties, the area of collaboration includes but not limited to providing technical guidance and other driver determinants of health

C] Collaboration with other organizations

The organization will continue to collaborate with other local and international Organizations which will provide support of different kinds, be financial, personnel, quality assurance guidance/ support or other necessities

D] **Employ qualified, highly skilled and experienced, self-driven technical personnel**. These will provide quality services and ensure capacity building through training and workshops. The organization will ensure capacity building of the personnel, motivation and good working environment in different ways, for example, timely payments, having dialogues on matters affecting their performance for the workers to feel committed on job.

CHAPTER SIX

6.1 Management Plan

The organization will employ 6 service providers supported by 2 support staff, among which will be a Senior Clinical Officer to be the in charge of the facility (as prescribed by the Ministry of Health Uganda), She/he will report directly to the Coordinator of the organization and to the District Local Government under Ministry of Health policies/ guidelines. The in charge will ensure that other staff are aware, obey and practice within line of professionalism and set guidelines.

6.2 The Administrative Structure:

The organization is made up of three (3) governing organs;

- I. The General Assembly
- II. The Board of Governors
- III. The Secretariat

6.3 The General Assembly

(A)The Composition of GA

It constitutes all the Full paid up and registered members of the Organization

(B)The Roles of GA

(i) Be the supreme decision making body of the Organization.

(ii) Deliberate and formulate policies for the Organization.

(iii) Make final decisions on any matters pertaining to the Organization

(iv) And to do any other things deemed to be in the interest of the Organization

(v) Through election to put in place or return office bearers to any posts in the BOG

(vi) Approve the Organization Annual Budget

(vii) Receive and discuss reports from BOG in addition to approving new plans for the Organization

(viii) Approval of or consent to the sale and disposal of the property of the Organization

6.4 The Board of Governors

(A) Composition of BOG

The board comprises of 7 members elected by the general assembly

- (i) the chairperson
- (ii) The vice chairperson
- (iii) the secretary general
- (iv) the vice secretary
- (v) The treasurer
- (vi) 2 other members

(vii) at least one third (1/3) of the bog shall be women.

(B) The roles of BoG

(a) Implementing the functions and policies that govern the organization

(b) Formulation and reviewing of the policies that govern the organization

(c) Translating the members' needs into priorities for action

(d) Approving work plans, budgets and accounts of the organization prepared by the secretariat

(e) Mobilization of members for more recruitment in the organization

(f) Appointment, recruitment, firing off and disciplining the senior staff member of the organization

(g) Implementation of the organization's programs in general by itself or through committees which the board of governors may designate accordingly

(h) Establishment of networks of people living with HIV at sub county, parish and village levels

(i) Look and lobby for donors for funding the organization

(j) Organize for fund raising activities for the organization

6.5 The Secretariat

(A) The Composition of Secretariat

Comprising of the Coordinator, Program officer, Monitoring & Evaluation officer, Accountant, field and other technical staff

(B)The Roles of Secretariat

Each member of the secretariat is appointed or employed with specific technical role to run the day to day activities of the Organization with the support of the CBRP in the field

6.6 The Roles of Coordinator

(a) Coordinates and supervises the external /internal activities of the Organization

(b) Be the Chief Executive of the Organization.

(c) Implements decisions of the Board of Governors.

(d) Receives all the correspondences of the Organization, and offers appropriate replies.

(e) Shall be Principal signatory to all Organization bank accounts and documents of the Organization

(f) Be chief custodian of all properties and establishments of the Organization

(g) Carries out other duties as shall be assigned by the BOG

(h) Be Ex-officio member to the Board of Governors

(i) Secretary of the Board of Governors meeting and General Assembly

(j) Recruits or appoints / fires other staff under him / her as approved by the BOG

(k) Chief Accounting Officer, and approves all expenditures of the Organization

(1) Guides and advices the elected members of the Board of Governors (Chairperson, Treasurer, Secretary and the other members) on technical matters

(m) Supervises / oversees staff of the Organization

(n) Spokesperson of the Organization

(o) Executes any other duties assigned to by the BOG

(p) Collaborates with the Chairperson in preparing the agenda and reports of the General Assembly and BOG meeting

(q) Shall be Secretary to all Subcommittee of the BOG and General Assembly

6.7 The Roles of Program Officer

(a) Heads, implements and manages the programs of the Organization in reference to the Organization's 5-year Strategic plan

(b) Develops and submits project proposals to donors for funding

(c) Carries out baseline surveys in the community, and compiles them for project Proposal writing, planning of service delivery etc.

(d) Identifies, organizes, facilitates if needed, and monitors capacity building processes on relevant areas for staff and members of the Organization, target beneficiaries etc.

(e) Prepares timely activity reports and submits to Coordinator for dissemination to Board of Governors, General Assembly, funding agencies, and any other relevant stakeholders

(f) Executes any other duties assigned to by the Coordinator

(g) Initiates and facilitates Knowledge and Information Management (KIM) with local partners to strengthen the effectiveness and implementation of programs and lessons learned

(h) Works and facilitates networking opportunities with the local and international partners to contribute to the goals of strong partnership

6.8 The Roles of Accountant

(a) Monitor the implementation and performance of financial services of the Organization

(b) Inspect the books of accounts of the Organization and ensure that they are in good order

(c) Keep all financial records and accounts of the Organization

(d) Draw annual budgets and financial statements and presents them to the Board of Governors, and presents annual audited books of Accounts to the General Assembly

(e) Develop institutional budgets for the Organization

- (f) Liaise with appointed audit firm to produce audited books of accounts every year
- (g)Together with Board of Governors solicits funds for the Organization
- (h) Prepares the monthly financial position of the Organization and submits to the BOG

6.9 Organization structure of CHIO



6.9.0 Plans for recruitment and training of employees

The Organization will use different means of recruiting workers where different steps of recruitment will include the following.

6.9.1 Job analysis:

The organization will identify the positions to be filled in the long run.

6.9.2 Job design

This shows the position to be filled by applicants, describing the duties and responsibilities involved in a job, model of executing the job and reporting relationships.

6.9.3 Designing recruitment program me

It will mainly consist of how the organization will make the program match with the activities of the business.

6.9.4 Training of employees

In order ensure that our employees attain enough skills, the organization will emphasize training of employees through capacity buildings. this will be a duty of human resource to identify those workers who need training.

Capacity buildings workshops will be conducted by experts of various fields within the organization

6.9.5 Performance Appraisal

Employees will be apprised basing on the performance on ground. Workers will also be supervised/ assessed by their subordinates by looking at how they perform their duties, in this case they will base on supervisors' judgment to appraise them.

6.9.6 Motivational plan for employees

- Timely payments and paying what is closely above other Private facilities and close to other public/ government Centre's pay, increase salary in line with incomes generated to maintain them on job
- Ensuring proper welfare of the employees the human resource and catering to the employees' complaints/ dialogue with organization stake holders
- Capacity building to improve their efficiency and self esteem

6.9.7 Technical Staff That Will Be at the Health Facility with Their Full Job Description, And Minimum Requirements

The health care unit will have the following service providers; however, with growth and expansion, there will be a need for more personnel

Laboratory Assistant

Job Purpose: To carry out basic laboratory tests for diagnosis of diseases.

Key Outputs

- Laboratory reagents and stains prepared for routine investigations
- Laboratory tests done, analyzed and results submitted to Senior Laboratory Assistant
- Safety and quality assurance practices for laboratories observed
- Laboratory equipment regularly cleaned and serviced
- Daily and periodic activity reports compiled and submitted
- Disposal of laboratory waste done
- Supplies for Laboratories requisitioned and accounted for

Key Functions

- Preparing laboratory reagents and stains for routine investigations;
- Carrying out basic laboratory tests and submit reports to Laboratory Technician/Technologist
- Observing safety and quality assurance practices in laboratories
- Cleaning the laboratory equipment regularly
- Requisitioning necessary supplies for laboratory work and keeping record of stock
- Participating in research activities
- Compiling and submitting daily and periodic laboratory reports
- Safely dispose of Laboratory wastes

Qualifications

Must have a Certificate in Medical Laboratory Techniques from a recognized Training Institution

Must be registered and licensed with the Allied Health Professionals Council.

Competencies

Concern for quality and standards of Laboratory services

- Result orientation
- ✤ Ethics and integrity
- Communicating effectively and Time management.

Job TitleEnrolled Midwife

Purpose

To provide day to day midwifery nursing care service to patients

Key Outputs

- Patients received, admissions, discharges and deaths registered
- Patients prepared for meals
- ✤ Care during labour provided
- Care during puerperium provided
- Mothers sensitized about benefits of breast feeding and recommended diet
- Clean and health environment maintained
- Bedside nursing procedures carried out
- Daily ward reports compiled and submitted
- ✤ Ante-natal care carried out; and
- Doctors and Clinical Officers' ward rounds carried out.

Key Functions

- Receiving patients, registering admissions, discharges and deaths
- Providing care during labour with emphasis on keeping proper records
- use of drugs and prevention of complications to mother and baby
- Providing care during puerperium with emphasis on prevention of infection
- Sensitizing mothers about benefits of breast feeding and recommended diet
- Participating in bedside nursing procedures as a member of the caring team Participating in Doctors/Clinical officers ward rounds
- Observing and compiling daily ward reports for the attention of the relevant authorities
- Preparing patients for meals and participate in serving them

- Maintain a clean and healthy environment for the patients
- ✤ Carrying out Ante-natal care.

Person Specifications

Qualifications

- Must have an Enrolled Midwifery Certificate from a recognized Institution.
- Must be registered and licensed with the Nurses and Midwives Council.

Competencies

- ✤ Guidance and counseling
- Concern for quality and standards
- ✤ Ethics and integrity
- Self-control and Stress management
- ✤ Time management.

Enrolled Nurse

Job Purpose

To manage the health unit and provide quality nursing care services and public health interventions to the community

Key Outputs

- ✤ Health Centre programs and activities implemented
- Medical and other resources requisitioned and accounted for
- ✤ Treatment to patients and related nursing care provided
- Complicated cases referred to appropriate health units
- Proper records about the patients observed and kept A clean and healthy environment maintained
- ✤ Staff supervised and appraised
- ✤ Health care outreach programs carried out
- Daily and periodic reports compiled and submitted to the Senior

Key Functions

- ✤ Managing the health Centre programs and activities
- Requisitioning and accounting for medical and other resources to the health unit
- Providing treatment to patients and related nursing care
- Refer complicated cases to appropriate health units
- Observing and keeping proper records about the patients
- Maintaining a clean and healthy environment for the patients
- Supervising and appraising Nursing Assistants and Support Staff
- Participating in health care outreach programs within the community Compiling and submit daily and periodic reports to the responsible officers

Person Specifications

Qualifications

Must have Enrolled Nursing Certificate from a recognized Institution

Must be registered and licensed with the Nurses and Midwives Council.

Competences

Concern for quality and standards

Ethics and integrity

Time management

Senior Clinical Officer

Job Purpose

To diagnose, treat and manage patients and be the overall in charge of the health care unit

Key Outputs

- Participation in planning and budgeting;
- Patients diagnosed and treated
- ✤ Health education conducted;
- Participation in research activities
- Participation in continuous professional development activities.

Key Functions

- Participating in planning, budgeting for clinical work
- Diagnosing, treating and managing patients
- Conducting health education to patients;
- Participating in research activities
- Participating in continuous professional development activities.

Person Specifications

Qualifications

Must have a Diploma in Clinical Medicine and Community Health or its equivalent from a recognized Institution

Must be registered and licensed with the Allied Health Professionals Council.

Experience

Must have served for at least three (3) years as a Health Worker

Competences

- Planning, organizing and coordinating;
- Concern for quality and standards;
- Communication;
- Ethics and integrity
- Self-control and stress management
- ✤ Time management.

Cashier

Job Title : Accounts Assistant

Job Purpose

To perform routine accounting activities involving data entry, financial records keeping, sorting and verifying documentations.

Key outputs

- ✤ Vouchers prepared
- Invoice numbers assigned to transactions for further processing
- Data recorded and captured on the system
- Information provided on Electronic Fund Transfer and payments executed to Beneficiaries
- Payment advice form prepared and returns compiled
- ✤ Vote books and subsidiary ledgers posted.

Key Functions

- Preparing vouchers
- ✤ Assigning Invoice numbers to transactions for further processing
- Recording data and capturing on the system
- Providing Information on Electronic Fund Transfer and executing payments to Beneficiaries
- Preparing payment advice form and compiling returns
- ✤ Posting vote books and subsidiary ledgers.

Person specification

Qualifications

A minimum of a Diploma with a bias either in Accounting or, Financial Management or, Business Studies/Administration with Accounting and/or Financial Management as a subject obtained from a recognized awarding Institution. OR Full A Pre-professional Qualification in Accounting Qualification (ATC or CAT) awarded from recognized Institution.

Competences

- Book Keeping
- Ledger Management;
- Information Communication Technology
- ✤ Accountability
- Ethics and Integrity
- ✤ Time management.

Askari (Watchman)

Job purpose: To take the overall security of the health care Centre and its belongings including patients and equipment Specifications: At least O'Level certificate and trained in security work Experience: At least 2years in security work in a recognized institution Cleaner Job purpose: to maintain the sanitation of the premises Specifications: At least O"level certificate Experience: 6 months of related job

Monitoring and Evaluation of the Health Facility

The monitoring and evaluation will be done on a continuous basis in accordance with the set of guidelines set by CHIO BoG and as the ministry of health.

The senior clinical officer as the in charge will ensure that other staff under him perform their duties as in the job description and in accidence to medical ethics and submit reports of the activities done in the facility to the BoG and to the ministry of health as required

The BoG through monthly or quarterly meetings will review the reports submitted to the two parties and evaluate whether they meet the standards as prescribed upon which action will be taken accordingly

These reports will include financial transactions, client turn up, patient handling in relation to the ministry of health

Monthly staff wages and salaries for the organization

S/No	Title	No of	Amount paid per month	Amount per year
		Positions		
	Senior clinical		500,000	6,000,000
01	Officer	01		
02	Enrolled midwife	02	700,000	8,400,000
03	Enrolled nurse	01	350,000	4,200,000
04	Laboratory	01	350,000	4,200,000
	Assistant			
05	Cashier	01	350,000	4,200,000
06	Askari	01	150,000	1,800,000
07	Cleaner	01	150,000	1,800,000
	Total	<u>8</u>	<u>2,550,000</u>	30,600,000

CHAPTER SEVEN

7.1 Operation Plan

Our business will focus at employing the organization's resources in an efficient and effective way to ensure that quality services fulfilled and aim at offering cost effective services to our clients.

7.2 Operating cycle

The management anticipates that 2 months will be sufficient to offer all services required by targeted population.

7.3 Location

The project will be located in Busia- Nyambiri parish- Kuluba sub county- Koboko District-Uganda

7.4 Facilities and Resource Requirements

Equipment/Item	Purpose	Quantity	Rate	Amount	Source
					CHIO/Throgh
Delivery Bed	for conducting deliveries	2	300,000	600,000	mobilization
					CHIO/
Hospital Bed	for providing resting environment	5	150,000	750,000	mobilization
					CHIO
Hospital Mattress	for providing resting environment	5	110,000	550,000	mobilization
					CHIO
delivery set	for aiding in conducting deliveries	2	200,000	400,000	mobilization
					CHIO
Respiratory rate timer	for measuring respiratory rates	1	50,000	50,000	mobilization
	for resuscitating during respiratory				CHIO
Resuscitator [Baby]	insufficiency		400,000	400,000	mobilization
	for carrying out sample				CHIO
Microscope	examinations	1	1,500,000	1,500,000	mobilization
	for taking temperature of the				CHIO
Clinical thermometer	patient	2	5,000	10,000	mobilization
	for storing vaccines and				CHIO
Fridge	temperature sensitive drugs	1	1,000,000	1,000,000	mobilization

	r				CHIO
Fatal scope	aid in examining pregnancy/ANC	2	10,000	20,000	mobilization
kit Manual Vacuum	For emptying the uterus of				CHIO
Aspiration instrument	retained products	1	250,000	250,000	mobilization
	aid in carrying out emergence		ļ		CHIO
First Aid Kit	cases		1	100,000	mobilization
Sensor for pulse					CHIO
oximeter, pediatric	for taking pulse rate	1	100,000	100,000	mobilization
Respiratory rate timer	for taking respiratory rate	1	50,000	50,000	CHIO
Kristeller virginal	for examining the cervix and				CHIO
speculum	uterus	1	200,000	200,000	mobilization
					CHIO
Startup drugs	for treatment	1	1,000,000	1,000,000	mobilization
				1	CHIO
Office tables		3	150,000	450,000	mobilization
					CHIO
Office chairs		5	50,000	250,000	mobilization
					CHIO 7
Drug shelf cupboard	for storing drugs	1	150,000	150,000	mobilization
Digital Blood				1	CHIO
pressure machine	for taking blood pressure	1	50,000	50,000	mobilization
					CHIO
Stethoscope	for aiding in examining a patient	1	20,000	20,000	mobilization
	for carrying out surgical				CHIO
Minor procedure set	procedures	2	200,000	400,000	mobilization
					CHIO
Height Board	for taking height of patients	1	100,000	100,000	mobilization
Weighing scale [for	for taking the weight of a patient	1	100,000	100,000	CHIO

hanging babies]					
Weighing scale for					CHIO
Adults	for taking the weight of a patient	1	100,000	100,000	mobilization
Local examination	for carrying out examinations on				CHIO
Bed	patients	2	200,000	400,000	mobilization
	For harvesting water for use at the				
Water Harvesting	facility as the available sources are				CHIO
Tank	at a distance	1	3,000,000	3,000,000	mobilization
	For providing power at the facility				
	to operate machines eg,				CHIO 7
Solar light system	microscope &light	1 set	3,000,000	3,000,000	mobilization
					CHIO 7
					mobilization/G
TOTAL				15,000,000/=	Giving on line

7.5 Quality control method

The organization will emphasize cautious quality development so as to ensure better service delivery to the people living in Nyambiri. Several methods will be employed which will include

- Publishing professional guidelines to each staff and ensure their adherence in order to practice as required by the law
- Constant checks and supervision of staff
- Employing skilled employees
- Training employees through capacity buildings
- Promoting health services of employees
- Ensuring high level of hygiene.

7.6 Inventory and cost control

- Stock control will be based on predetermining each item of stock in the stores for critical material control.
- New stock will be got out when old one is finished to avoid obsolescence.

• Proper storage will be used to avoid double handling of products which may lead to damage.

7.7 The layout of the facility

The Health Care Centre will start and operate in one building. However, the organization will lobby for more buildings to expand the facility.

The one building will contain respective departments for a minimum health care Centre. It will consist a patient waiting place in front of the building, where patients will wait to be consulted by care service provider, the building is divided into two horizontal parts, the anterior and posterior parts.

The waiting sit/ place leads into the anterior part of the building, the anterior is subdivided into 5 smaller rooms, on the left is an Out Patient Department wing where consultations will be handled, after consultation the patient is sent to the laboratory on the left next to the OPD room. From the laboratory the client will return results to the consultation room for diagnosis and prescription. After prescription the patient will be directed to the dispensary room where the client will receive the drugs on the right of the OPD.

On the right of the dispensary room is an ANC room where mothers will be examined and either sent to the lab or dispensary on maternity ward. On the left of the ANC room is an Emergency room for admitting / attending to emergency cases.

The posterior part has the maternity ward where pregnant mothers will be monitored and the postnatal room where those women who have given birth will rest and be taken.

7.8 Suppliers of the business

The organization will continue to use the available suppliers as below, and where necessary it will advertise to new suppliers under the procurement policy guideline

S/No	Company	Goods & Services
01	Malenga Youths Furniture Association Koboko	Office Furniture
	Tell;	
02	Charity Constructions Company P. O. Box Samuel	Construction Services
	Baba Road	
03	Koboko Peal Tect Ltd	Printing and Photocopying
	Koboko 0772 540 551	Services

04	Ayuketa Enterprises	Refreshments and Airtime
	P.O. Box Koboko	Services
	Tel. +25678 984 404	
05	Afiya Pharmacy Ltd Koboko	Drug and Other Medical
	Tel; +256776 586 787	Supplies
06	Students Book Shop Koboko	Stationery Materials
	Dingos Corner Koboko	
	P.O. Box 327, Koboko	
07	Toriteli Petrol Station	Fuel & Lubricants
	Kaya Road Koboko	
08	Moro Motor Spares	Service of Motorcycles and
	Transport Road Koboko	Hire
	+256 773 921 129	

7.8 Quality Assurance

The organization is registered by Koboko district local government and the facility will be registered with ministry of health Uganda which will ensure quality assurance and ethics with in the facility

CHAPTER EIGHT

8.1 Risk for Expansion

However, the above mentioned possibilities for expansion in wanting to attain our goals may be hindered by some anticipated risk as shown below:

- Theft of the business's property.
- Poor communication between the clients and the business and thus creating misunderstandings.
- High taxation policies from the government which may prevent us from developing very fast.
- The risk of over estimation or under estimation hence waste of materials and failing to meet clients demand respectively.

8.2 Measure against Risk

We have put in place some measures against the anticipated risk we may encounter in future and which can alter our operation.

• Concerning theft, we intend to deploy security men who will be alert all the time to track down thieves and protect the organizations property.

- Against fire we make sure we put fire extinguishers all over the business for security purposes against fire break outs. Also have to insure our facility against certain risk.
- Regarding the estimation of the quantity to produce in order to exactly satisfy clients' demand and not wasting material, we shall employ people who are very skilled and have a lot of experience in that field.
- Assess client-facing functions and identify areas for measurable improvement in value, effectiveness, efficiency and quality of services delivered.
- Communicate risk tolerance across the facility including their board, senior management, and personnel.
- Evaluate current partner relationships, and create new relationships with partners that foster innovation and security.
- Set up effective planning integrating economic drivers to provide the potential impact on
- Identify sourcing locations and develop the right supply chain model to meet their needs best.
- Evaluate existing IT costs and systems for opportunities to improve efficiency.
- Include information security in all initiatives focused on growing the top line and cutting costs.
- Reduce the cost of information security and eliminate duplication using a zero-based security approach.
- Develop a system to identify and prioritize security risks while monitoring spends to ensure costs are within specified limitations.

CHAPTER NINE

9.0 Financial Plan

9.1 Financing

The project will be financed by the Community & NASF (for construction), CHIO and other well-wishers for the Toilet, medical equipment and furniture for the Primary Health Care services to start. The facility is expected to sustain itself for further financing and development, however, CHIO may intervene through monitoring and evaluation and identify an area which needs improvement and advocate/ lobby for funds from other potential organizations for the particular cause

9.2 Start-up requirement and working capital

The startup requirements will be financed from the initial capital of 75,210,810/= which cater for construction and startup equipment and furniture

The items will be provided one after the other depending on the priorities that there is a demand for it and proper allocation of resources

9.3 Financial Control of the Income at the Facility

The organization among other staff of the facility will appoint a cashier/ Accounts Assistant who will be responsible to receive all the monies at the facility. Upon receiving he/she will issue a receipt to the payee.

All the monies received will be deposited on a bank account which will be opened for the transactions of the facility. She/he will report directly to the senior accountant of the organization who will further report to the coordinator

Anybody wishing to obtain money for any purpose will initiate by filling the approved CHIO requisition form, he/she will submit it to the accountant and after confirming the availability of money will forward it to the program officer to verify if it's in the budget and the approve the payment, after which the program officer will forward it to the coordinator for final authorization. The requisition form will be forwarded back to the accountant for releasing money.

9.4 Financial Projections for the Health Centre Two Years after its Launching

Projected income statement for the period of three years

Year	1 st year	2 nd year	3 rd year	4 th year
	[2019]	[2020]	[2021]	[2022]
OPENING BALANCE	9,000,000	10,580,000	23,510,000	38,901,500
[provided by CHIO]				
TREATMENT FEE				
Children [6000]	30,000,000	33,000,000	34,650,000	-
Youth and women [2500]	37,500,000	41,250,000	43,312,500	
Elderly [1500]	15,000,000	16,500,000	17,325,000	
TOTAL INFLOWS	91,500,000	101,330,000	118,797,500	-
CASH OUTFLOWS				
Facilitation for staff	30,600,000	30,600,000	33,660,000	-
Transport [For taking reports	600,000	600,000	600,000	-

and meetings and trainings by				
district and CHIO				
Stationery [mainly medical	1,000,000	1,100,000	1,155,000	-
forms]				
Furniture and equipment	9,000,000	5,000,000	2,500,000	-
Capacity building training	00	500,000	500,000	-
Purchase of drugs	35,000,000	38,500,000	40,425,000	-
Airtime and internets	360,000	360,000	378,000	-
Utilities [cleaning materials &	360,000	360,000	378,000	-
Solar power system installation	3,000,000	300,000	300,000	-
and repair				
Registration fee and renewal	1,000,000	500,000		-
TOTAL OUT FLOWS	80,920,000	77,820,000	79,896,000	-
Net Balance after expenses	10,580,000	23,510,000	38,901,500	-

Community Health Initiative Organization

Projected Cash Flow			
	<u>YR 1</u>	<u>YR 2</u>	<u>YR 3</u>
Opening balance		10,580,000	29,010,000
Cash Inflows			
Children	30,000,000	33,000,000	34,650,000
Youth and women	37,500,000	41,250,000	43,312,500
Elderly	15,000,000	16,500,000	17,325,000
Total Cash inflows	82,500,000	101,330,000	<u>124,297,500</u>

Cash Outflows			
Stock Purchases	35,000,000	38,500,000	40,425,000
Wage & salaries	30,600,000	30,600,000	33,660,000
Utilities	360,000	360,000	500,000
Transport	600,000	600,000	900,000
Stationary	1,000,000	1,100,000	1,155,000
Airtime& internet	360,000	360,000	540,000
Registration	1,000,000	500,000	500,000
Solar	3,000,000	300,000	450,000
Total cash Outflows	71,920,000	72,320,000	78,130,000
Ending Balance	10,580,000	29,010,000	46,167,500

Assumptions

The project will provide treatment and care for 10,000 clients and this will be the chief source of income, in the 1^{st} year, and the number of clients is projected to increase in the 2^{nd} year by 10% which will increase the income and some of the expenses of the project as described above.

The project is projected to receive three groups of people; children 6,000 and each child is expected to pay 5000/=, youth and women 2500 each expected to pay 15,000/=, elderly 1500 each paying 10,000/=.

The charge for children and elderly is lower that for youth and women due to the fact that children need smaller doses of drugs hence low costs, on the other side elderly fee is low because of the economic hardships most adults go through as most are not in a working class and are dependents Although the facility will provide Admission to pregnant mothers and emergence conditions, all the financial projections have been worked out on Out Patient Department basis as it will be the most basis used until another structure for general ward will be constructed to cater for all cases in the facility

The number of clients is projected to increase by 10% in the 2^{nd} year and 5% in the 3^{rd} year. This will increase directly other expenses for example drug purchase will increase by 10% in the 2^{nd} year and 5% in the 3^{rd} year.

Equipment worth 9,000,000 will be required to start the facility after the construction which will be facilitated by CHIO, this will be the money that CHIO would have used to conduct outreaches in the community of Nyambiri and its surrounding communities and since most of these people can access the facility, the need for outreaches would be of less demand [by the Target population]. The facility will need additional equipment worth 5,000,000/= and 2,500,000/= in the 2^{nd} and 3^{rd} year respectively which will be financed by the facility itself; however, other equipment may be identified and purchased.

Stock purchase and stationery is projected to increase by 10% and 5% in the 2^{nd} and 3^{rd} year respectively in line with the increase in the number of clients in the same period

Facilitation for staff is projected to remain constant in the 2^{nd} year but be increased by 10% in the 3^{rd} year if these projections are mate to improve their efficiency and maintain them on job [improve service delivery at the care Centre]

OPD Charges for a full course of Treatment at the care Centre

Children under 5 years: 5000/= Youth and women: 15,000/= Elderly: 10,000/=

Inpatient Charges for a full course of Treatment at the care Centre

Children under: 15,000/= Youths and women: 25,000/= Elderly: 20,000/=

Concluding remarks

Health is the right for all, WHO and the National Health Policy recognizes this and is emphasizing that, but due to resource constraints, the Government fails to provide health facilities to all. Thus, through community participation needs dialogues, these people identified the problem that is facing their community and found that the solution is to build health Centre. Good health is the key to development because there is a vicious cycle between health and poverty. With ill health, people cannot participate in production activities fully and will cause income poverty which lead to poor health. Thus, if this health Centre is built in Nyambiri Community, the barrier to accessing health services will be reduced hence development