

PRIVATE WINGS BOOSTING PUBLIC HOSPITALS

BY AGNES KYOTALENGERIRE

Nebbi Hospital would not be what it is today had it not been for the private wing section. The wing that is hardly a year old – approximately seven months – is already benefitting patients through access to specialised services, motivating health workers and contributing to the management of the hospital.

"We started without any cash, but along the way, the wing is picking up," Dr Charles Kennedy Kissa, the medical superintendent at the hospital, says.

Kissa estimates that every month, between sh3m and sh4m is collected from the private wing. He explains that the objective of starting up the private wing was to offer good specialised services that cannot be accessed in the general wing.

"The services are utilised by people who can afford to pay for them and do not want to go through the hustle of queuing up," he says, adding that they charge sh5,000 as consultation fee. The doctor who attends to the patient takes sh2,500, while the remaining sh2,500 goes into a pool.

Kissa explains that they have a schedule, where doctors and clinical officers work in the private wing on a weekly basis so that everybody gets a chance to participate.

A patient who chooses to go to the private wing also pays for accommodation, if admitted, medicine and for procedures such as surgery, in case of any. A committee comprising 11 members, including one hospital board member, heads of departments and administration members, meets every quarter to decide how to allocate the money collected.

"Half of that money is allocated to motivation of staff and the committee distributes it equally to staff members who perform well," he says.

EMPLOYEES HAPPY

Mary Wanirwoth, a nursing officer/midwife at Nebbi Hospital, says in the last quarter she received sh26,000 from the private wing collections as top-up on her salary.

"The money helped me to sort out a few financial gaps. I wish it could be given to us more often," Wanirwoth says.

"Forty percent is ploughed back to buy drugs, while the remaining 10% is allocated to general hospital administration needs such as stationery," Kissa explains.

He says in the last quarter, they were able to raise sh9.6m, but he is optimistic that the figure will increase with time.

Kissa does not hesitate to say they are already benefiting from the venture.

"It helps us to have constant money in our hospital account which is channelled to maintaining the hospital," he says. For instance, the Government has not yet released money for the first quarter and the hospital is surviving on that 10% of the money generated from the private wing.

He says the only challenge is that patients sometimes fail to pay for the services.

ENTEBBE HOSPITAL

According to Dr Moses Muwanga, the medical superintendent Entebbe Hospital, they have a private patients



At Nebbi Hospital, health workers share part of the money collected from the private wing



The private wing at Adjumani Hospital is only used for admissions, without any specialised services



Charles Kennedy Kissa



Michael Ojja

“Part of that money is given to workers as motivation on top of the salary”

service board which oversees the running of the private services. Muwanga says the private wing – Grade A – was set up with the objective of offering specialised and

investigation services which cannot be offered at the general wing.

The wing charges consultation fees, medicines and patients who are admitted. The money generated is used to employ and pay salaries of health workers who are not on the government payroll.

"Part of that money is given to workers as motivation on top of the salary," he says, adding that another percentage of the money is used in running of activities such as maintenance of ambulances, generators and training of health workers.

However, when asked how much money is collected from the private wing every year, Muwanga declined to disclose the figure.

Muwanga says they still face challenges in selecting which staff

works in the general or private wing.

Aside, the overheads from the general wing are high compared to the private wing, especially on theatre services

"Sometimes, as a superintendent, I have to decide that the patient is worked on in the private wing, even when they cannot afford to pay. It becomes a problem when they become many, because the private wing operates on a revolving fund," he explains.

"It also becomes challenging when the high level staff members fall sick and demand to be treated in the private wing yet they do not want to pay," Nluwanga notes.

ADJUMANI HOSPITAL

Michael Ojja, the hospital administrator, says there are issues of affordability in the private wing and it only brings in revenue of about sh13m per year.

"The revenue is low because we are not running the private wing at full capacity. We charge only sh5,000 per night for private rooms," he says.

"The medicine they use is got from the Government (general wing) yet a private wing should be having a pharmacy providing medicine at a fee," Ojja explains.

He says the money collected helps in addressing the gaps in health financing such as facilitating the transportation of blood from the regional blood bank in Gulu. The money is also used for minor repairs

Private wings...

The Uganda National Hospital Policy, 2005, provides for government public hospitals to run private wings so that they can generate local revenue to supplement the central government financing gaps in order to provide better services.

This followed the abolition of the user fee (where patients were required to pay money in hospital).

According to the director health services at the health ministry, Dr Anthony Mbonye, the policy also includes guidelines on how the private wings should be managed.

"It is a good venture for people who want a bit of privacy and convenience. It is self-sustaining because the money generated is used to run the wings," he says.

such as working on the lighting system, garbage management and servicing Ultra-sound machines.

Ojja adds that the private wing is failing because the money that the Government provides to run the hospital is not sufficient to do a face-lift on the facility as required.

"We operate on a budget of sh130m a year and when you break it down it comes to about sh10m per month, which is not even enough to pay for electricity, water bills, stationery and other maintenance costs," Ojja explains.

He says they are also struggling with politicians who are not comfortable with the private wing running a pharmacy because they fear that health workers will sneak government drugs into the pharmacy and sell them.

However, Ojja affirms that they have started small, but will gradually be fully operational.

KISORO HOSPITAL

Michael Baganizi, the medical superintendent Kisoro Hospital, says they only offer private accommodation and the rooms are charged sh20,000 per night while other services remain free.

He says they collect about sh3m per year from accommodation charges, which supplements the hospital budget.

"If the central government is sending sh140m, we add on the anticipated private wing revenue totalling to a budget of sh145m," Baganizi explains.

Even with the private wing offering only accommodation services, there is need to replace beddings such as mattresses. They usually admit about two patients at a time.

If the wing is expanded and other services such as a pharmacy are added, Baganizi is optimistic that it could improve revenue.

The private wing came into operation in 2007 after they renovated the hospital, creating about eight rooms. According to Baganizi, the renovation was done with a loan acquired by the central government from Spain.