



KANUNGU HC IV- KATAATE HOSPITAL PROJECT

a Public Private Partnership between Kanungu District Local Government and Chaperone International.

P.O BOX 142794, Kampala- Uganda | Website: www.katate-health-center.de/
www.chaperoneinternational.org |

Email: superplafond@hotmail.com | | chaperoneinternational@gmail.com |

| f: Chaperone International/Kanungu HCIV- Kataate Hospital Project |

| X: Chaperone International| Tel: +49 176 61715968 /+256- 777 408381 |



PROJECT STATUS REPORT

October- December, 2024

a) Introduction

About Kanungu HC IV- Kataate Hospital Project:

Kanungu HC IV – Kataate Hospital Project is a public private partnership between Kanungu District Local Government and Chaperone International as a means to complement government, community- based and global partners’ efforts in order to upgrade, enhance and sustain infrastructure, personnel, equipment and quality assurance for improved healthcare service delivery. Our cooperation mandate is detailed in a Memorandum of Understanding (cleared by the Solicitor General) and assented to by the parties on 5th July 2022 in line with government of Uganda National Policy on Public Private Partnership in Health, 2012, the Public Private Partnerships Act, 2015 and Kanungu DLG Strategic Development Plan to embrace public private partnerships for improved health sector performance for realization of the National Development Plan III and Vision 2040.

Indeed, Chaperone International with support from Christians in Germany led by Dr. Holger Listle, has in the last 8 years made a contribution of about 3BN UGX including the construction of an operation theatre and installation of state- of – the art equipment for surgery, a hi-tech uninterruptible solar power system, EX20 digital colour doppler ultrasound scan, Oxygen concentrators and a dental unit. The organization also pays salaries, NSSF and taxes for 24 staff. Chaperone International has also funded the renovation and expansion of all wards, laboratory, completion of 4 self- contained private rooms, OPD, kitchen, mortuary, stores and staff quarters as well as training and motivation of staff among other critical aspects.

About Chaperone International

Chaperone International is a Ugandan registered not- for- profit development non-governmental organization with strategic focus on medical services, community health, and research. Chaperone International is implementing a 10- year legal mandate of a public- private partnership hospital project with Uganda’s Ministry of Health and Kanungu District Local Government to upgrade infrastructure, personnel, equipment, logistics and general healthcare service delivery for universal health goals of equity, access, efficiency and quality at Kanungu HCIV- Kataate.

Top Management Team of Chaperone International

S/N	Name	Profession	Position	Contact
1	Dr. Holger W. Listle	(Lead) Surgeon	CEO/ Lead Surgeon	+49176 61715968
2	Mr. Martin Atukwase	Social Worker	Director/ Admin	+256 777 408381
3	Ms. Vastine Natukunda	Accountant	Director/ Finance	+256 782- 845144
4	Dr. Denis Musasizi	Medical Doctor	Clinical Coordinator	+256 788- 299368

b) Main outputs of Kanungu HC IV, Kataate Hospital Project

- a) General and specialized surgeries.
- b) Maternal and child health.
- c) Diagnostics and imaging.
- d) Dental services.
- e) Staff training, development and motivation.
- f) Community health education, outreach and research.
- g) Resource mobilization and stakeholder engagement.
- h) Health Insurance.
- i) Sustainability planning and implementation.
- j) Project Administration.



The major focus of the project is to increase healthcare equity for the rural poor to surgical, maternal, child and general healthcare services. This successful specialized surgery was a collaboration among Dr. Holger Listle- Lead Surgeon , Dr. D. Kasudha and Dr. Denis Musasizi.

c) Performance Review for the Period: October- December 2024

a) Key Performance Indicators

S/N	Indicator	October	Nov	Dec	Total	Average
1	OPD Attendance	1962	2,229	1780	5,971	1,990
2	ANC Total Attendances	258	230	180	668	223
3	Deliveries In Unit	82	91	85	258	86
4	Ceasarean Section¹	35	40	36	111	37
5	Emergency Delivery Referrals To Other Units	00	00	01	01	01
6	Emergency Delivery Referrals From Other Units	03	10	06	19	06
7	Other Major Surgeries¹	01	19	06	26	09
8	Minor Surgeries¹	06	15	16	37	12
9	Obstetric Ultrasound Scan¹	99	96	90	285	95
10	Other Scan Investigations & Doppler¹	140	149	126	415	138
11	Hb Estimation¹	124	96	81	301	100
12	Staff CMEs	06	04	08	18	06
13	Private Ward Users¹	10	12	10	32	11
14	Blood Units Transfused¹	19	24	16	59	20
15	Admissions	323	297	312	932	311
16	Paid- For Lab Tests¹	11	23	10	44	15
17	Doctors' Consultations¹	212	213	212	637	212
18	Dentistry¹	115	136	162	413	138
19	Ophthalmology Camp¹	0	0	36	36	12
20	Medical Camp Consultations¹	0	83	244	327	164
¹ Direct Service Impact of Chaperone International initiatives N.B This number excludes the complementary contribution to general service delivery such as OPD visitations general ward admissions, normal deliveries, antenatal care, staff CMEs, HIV/AIDS Clinic, outreaches etc.		751	871	1,025	2,647	882

Summary: During the months October to December 2024, the direct impact of the Chaperone International- Kanungu HC IV Kataate Hospital Project reached a minimum of **2,647** persons (**Average 882 persons per month**).



Kanungu District
Local Government



CHAPERONE
INTERNATIONAL

MEDICAL CAMP

REGISTER NOW



KANUNGU HC IV KATAATE HOSPITAL PROJECT

A Public Private Partnership Centre of Excellence



Screening for
general surgeries
November 11 - 22



Surgical
Camp
November 23 - 29



Ophthalmology
Eye Camp
December 02 - 03



Dental
Camp
December 02 - 05



0788-299368 | 0777- 402209 | 0782-909063 | 0777-408381

Email: chaperoneinternational@gmail.com

The major highlights of the second quarter (October – December 2024) were the acquisition of the Universal Anaesthesia Machine (UAM) for the operation theatre and the Medical Camp (surgical, dental and ophthalmology).

d) Key Aspects:

1. Universal Anaesthesia Machine (UAM); a donation by *Stiftung Solidarität und Gerechtigkeit* (Foundation for Solidarity and Justice, Germany)

Chaperone International- Kanungu HC IV, Kataate Hospital Project achieved a major milestone: acquisition of universal anaesthesia machine for the operation theatre. The machine came with an automatic ventilator running on a 6- hour backup battery, a patient vital signs monitor, low- resistance Halothane vapouriser and manual bellows to ensure safe, assisted respiration, and adaptation to all paediatric and adult breathing systems. The distributor provided a 24-month warranty, covering manufacturer-related defects. Furthermore, JMS will conduct regular maintenance schedules and prompt repair services at no extra cost. We have since replaced the Halothane vapouriser with a recommended Isoflurane Vapouriser.

UAM Project Cost

S/N	Component	Cost (UGX)	Cost (EUR)	Source of Funding
1	Purchase of Universal Anaesthesia Machine (UAM)	43,839,250=	11,494.30	Stiftung Solidarität und Gerechtigkeit
2	Replacement of UAM Vapouriser from Halothane to Isoflurane	4,433,152=	1,162.34	Chaperone International
3	Voltage Stabiliser/ Electrical Surge Protection	350,000=	91.77	
4	Isoflurane Vapour Refill (03)	420,000=	110.12	
5	Theatre Staff Training	400,000=	104.88	
Total Project Cost		49,442,402	12,963.40	
Percentage Contibution of Stiftung Solidarität und Gerechtigkeit		43,839,250=	11,494.30	88.67%
Percentage Contibution of Chaperone International		6,000,000=	1,469.10	11.33%

We have conducted training programs, including an initial training session conducted by Joint Medical Store (JMS) for the entire operation theatre team, comprising medical doctors, anaesthetic officers, nurses, midwives, theatre assistants, and cleaners. Additionally, 2 anaesthetic officers received mentorship on machine operation, maintenance, and troubleshooting from a friendly hospital's anaesthetic officer. Chaperone International will provide ongoing support, fund vapour refills and refresher training for anaesthetic officers, to ensure the machine's sustained effectiveness and impact.



UAM Training/ Orientation session for Operation Theatre team conducted by JMS

UAM Impact: November& December 2024

No.	Procedure	Ages	Sex	Anaesthesia	Total	Remarks
1	Herniotomy	5&6	M	G/A	02	Successful
2	Herniorrhaphy	9	M	G/A	01	Successful
3	Ectopic pregnancy	35	F	G/A	01	Successful
4	Orchidopexy	10 Months	M	G/A	01	Successful
5	Tumor biopsy	3	M	G/A	01	Successful
Total					06	Successful

a) Ophthalmology/ Eye Camp

Chaperone International- Kanungu HC IV, Kataate Hospital Project hosted its second eye/ ophthalmology camp on 2nd December 2024. The camp was led by Consultant Ophthalmologist Dr. Sam Ruvuma/ Vitrio- retinal surgeon of Mbarara Regional Referral Hospital/ Mbarara University of Science and Technology (MUST) Teaching Hospital. From the experience, we have learned that our capacity can only manage one specialist camp per year.



Chaperone International Director, Dr. Holger Listle welcomes Dr. Sam Ruvuma to conduct the eye camp.



Ophthalmology/ Eye Camp opening ceremony

Ophthalmology/ Eye Camp Impact

No.	Service	Number	Remarks
1	Ophthalmology consultations	29	Successful
2	Cataract surgeries	03	Successful
3	Reading glasses	04	Successful
Total		36	Successful



A cataract surgery in session, witnessed by theatre team

2. Dental Camp/ Dentistry

Chaperone International- Kanungu HC IV, Kataate Hospital Project conducted a successful dental camp from 2-5 December 2024. Dr. Wegener Joachim from Germany led a team including dental surgeon Dr. Elly Byaruhanga, public health dental officer Adriano Byomuhangi and dental nurse Ritah Atuheire. Revenues from the dental camp have enabled us to acquire dental equipment such as elevators, high speed handpiece, slowspeed handpiece, suction cylinder, trays, scalar tips etc. We are grateful to Dr. Wegener for his commitment to continue mentoring the team and his kind donation of vital equipment including a dental motor that the department now uses to achieve precision dentures.



Dental camps present an opportunity for skills and technology transfer to local staff: Dr. Joachim Wegener demonstrates best practices in endodontology to local dental staff.

Dental Camp Impact in Numbers

No.	Procedure	Number
1	Consultation/ Dental health education	184
2	Tooth Extraction	61
3	Tooth filling	14
4	Root canal therapy	08
5	Scaling and polishing	18
6	Bridges and crowns	06
	Total	291

Quarterly Performance of the Dentistry Department: Oct- Dec 2024

PROCEDURE	MONTH			SUBTOTAL
	OCTOBER	NOVEMBER	DECEMBER	
TOOTH EXTRACTION	94	88	117	299
DENTAL FILLINGS	02	05	15	22
ROOT CANAL TREATMENT	04	04	07	15
SCALING AND POLISHING	01	05	13	19
BRIDGES AND DENTURES	00	02	05	07
DENTAL ABSCESS AND OTHER PROCEDURES	14	34	05	53
TOTAL	115	136	162	413

As a result of the dental camp and administrative efforts to revamp the department, the dentistry has effectively recovered from staff reorganization issues that had affected the department in the previous quarter. In August 2024, procedure had dropped to 93 from a monthly average of 131 in previous quarters. However, following the recruitment of Public Health Dental Officer Adriano Beinomugisha, numbers rose to 109 in September and 115 in October. This steady has been sustained even after the dental camp. In the month of January 2025, we have returned to the 131 monthly average.

Dentistry performance: January 2025.

No.	Procedure	Number
2	Tooth Extraction	102
3	Tooth filling	12
4	Root canal therapy	08
5	Scaling and polishing	05
6	Frenectomy	02
	Total	131

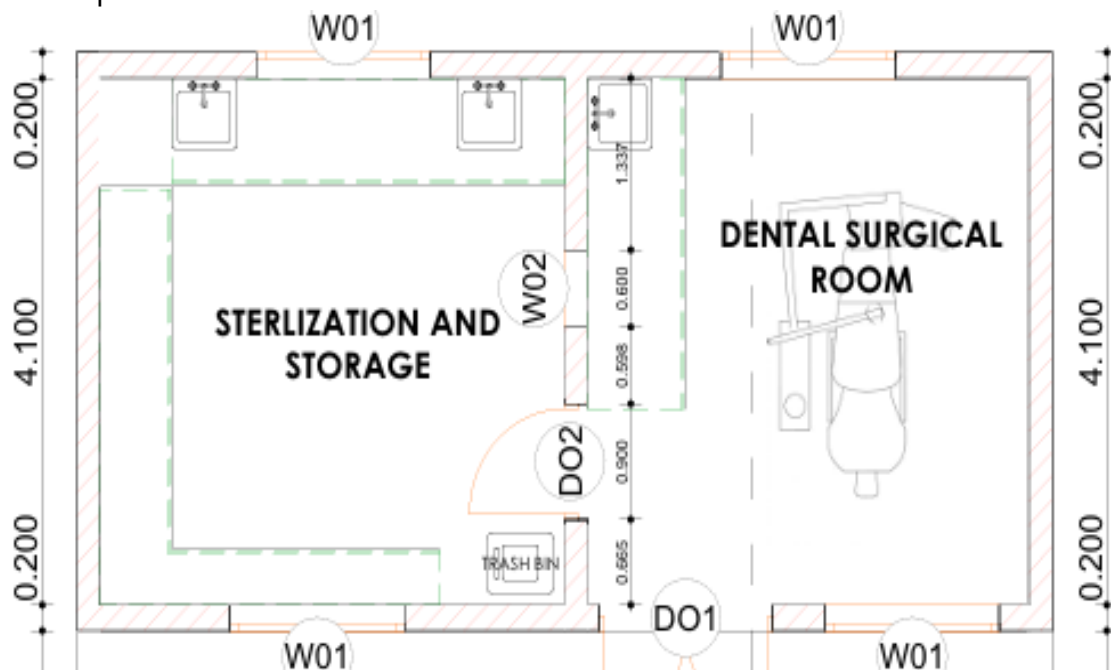
Key achievements of the dentistry department;

- Procurement of critical dental equipment and materials using local revenues including elevators, high speed handpiece, slowspeed handpiece, suction cylinder, trays, scalar tips etc.
- Upgrading of dental materials e.g silicon, composite, Zinc Oxide powder etchant and bond etc.
- Acquisition of a dental motor for dentures; donated by Dr, Wegener Joachim.

- Specialised training of dental department staff led by Dr, Wegener Joachim, a senior endodontologist from Germany.
- Increased turnup of patients from 317 in Quarter 1 to 413.
- Repairs for the dental chair and suction.
- Dental health education outreaches.

Key challenges:

- Congested operation area: need for expansion/ relocation of the dentistry to a better space near OPD block.



The proposed upgrade of the dentistry will include a bigger operation area and a second room for sluice, sterilization and storage shelves. This expansion will enable us to increase our capacity, reduce wait times, achieve infection prevention and control, and improve the overall quality of care for our patients. Architectural drawings and bills of quantities have been prepared to this effect.

- Lack of dental Xray, a crucial diagnostic tool to detect and diagnose oral health issues that may not be visible during a routine visual examination such as tooth decay, abscesses, impacted teeth, and bone loss, allowing for early intervention and treatment. Regular dental X-rays can also help prevent more complex and costly problems from developing.
- Limited health education and community outreach programs.

3. Surgical Services/ Operation Theatre:

Quarterly performance: October- December 2024

Procedure	Oct	Nov	Dec	Total	Monthly Average
Caesarean section	35	40	36	111	37
Other Major Operations	01	19	06	26	09
Minor Operations	06	15	16	37	12
Total	42	74	58	174	58

In the months, October- December 2024, an average 37 caesarean sections were conducted per month in addition to an average 12 minor and 9 other major operations. Overall, 174 operations were carried out during this period. 59 units of safe blood were transfused. 301 persons also received Haemoglobin assessment, especially pregnant women.

Surgical Camp Performance:

No.	Procedure	Number	Remarks
1	Exploratory Laparotomy	03	Successful, pending final review
2	Total Vaginal Hysterectomy	02	
3	Venous stripping	02	
4	Herniorrhaphy	07	
5	Cystectomy	01	
6	Hydrocelectomy	02	
7	Orchidopexy	01	
8	Incision& Drainage (I&D)	02	
9	Excision	09	
10	Caesarean section	10	
Total		39	

Key achievements of Surgical/ Theatre Department;

- Acquisition of Universal Anaesthesia Machine (UAM): a donation by *Stiftung Solidarität und Gerechtigkeit* (Foundation for Solidarity and Justice, Germany), and changeover from Halothane to Isoflurane vapouriser.
- Purchase of additional surgical instruments, drugs and sundries.
- Purchase of a new patient transportation trolley.
- Training of theatre department on application and maintenance of Universal Anaesthesia Machine (UAM).



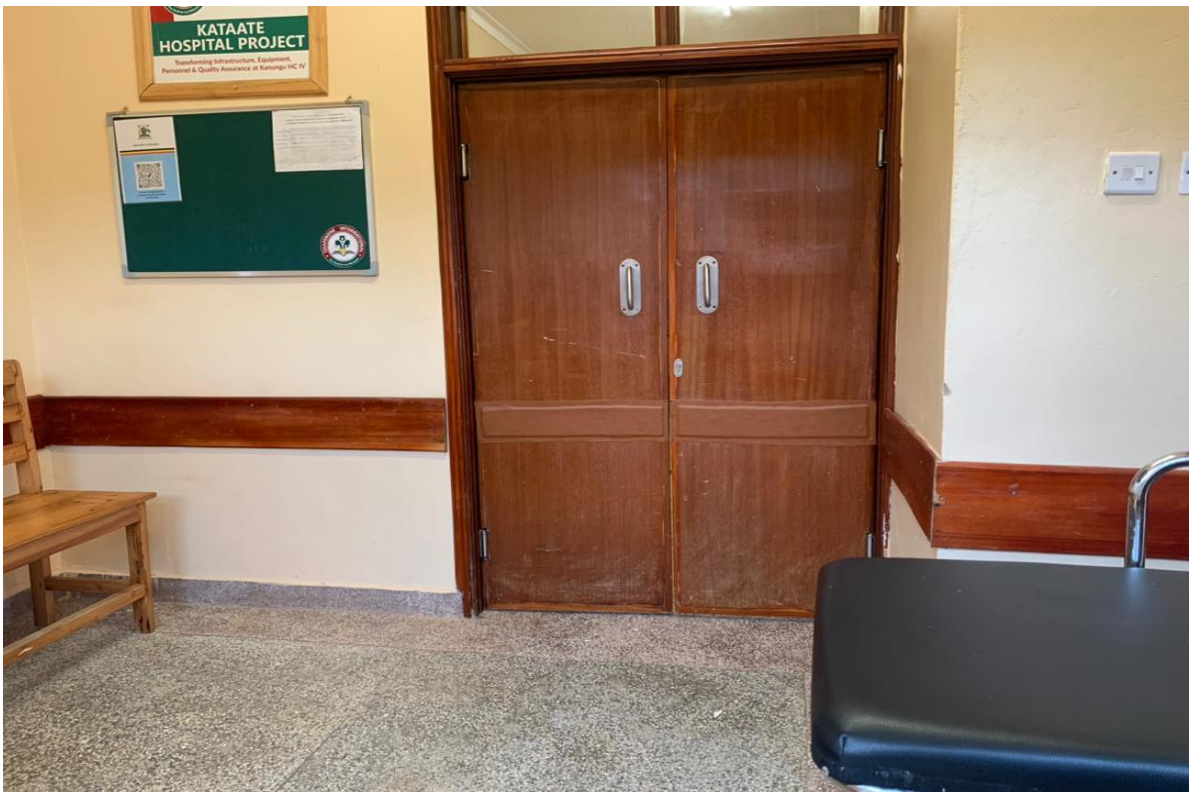
Chaperone International Director- Dr. Holger Listle on a post- operative ward round



Theatre drugs and sundries for surgical camp after delivery from JMS.

Challenges of Theatre/ Surgical Department;

- Lack of theatre operation lights.
- Lack of air conditioning (AC) for main theatre.
- An overburdened solar power system; maternity and general wards need an independent solar system.



Local revenue from theatre was used to make minor improvements in infrastructure and theatre drugs and sundries.

Kanungu HC IV- Kataate remains a key referral for high- risk mothers. Most of the caesarean sections conducted are acute emergencies on mothers that have almost bled to death (post- partum haemorrhage). There is need for community and lower health centre preparation for safe motherhood preparedness.



4. Imaging/ Ultrasound Scan Department

The Ultrasound Scan has conducted a total of 9,236 investigations since March 2020 when the service began; 1239 in 2020, 1085 in 2021, 2154 in 2022, 2204 in 2023 and 2554 in 2024. The year 2024 (213 monthly average) was the best performed. In the same year, the department received new probes (convex and linear) and a printer for better reports.

YEAR	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	TOTAL	MONTHLY AVERAGE
2020	00	00	75	119	88	127	104	116	99	136	329	46	1239	103.3
2021	68	81	97	87	73	58	78	123	104	119	118	79	1085	90.4
2022	82	202	218	211	193	202	227	177	171	150	187	134	2154	179.5
2023	156	161	148	119	193	279	267	228	152	194	183	124	2204	183.7
2024	218	151	128	209	218	194	224	252	260	239	245	216	2554	212.8

For the quarter October- December 2024, 700 scan investigations were carried out. November recorded the highest utilization while December performed lowest. The tapering reduction in ultrasound scan client turn up towards the festive season has consistently occurred every year and the associated factors are still undivulged. Females 550 in number (78.6%) remain the majority of scan users compared to only 150 males comprising 21.4%.

Ultrasound Quarterly Performance

EXAM	MONTH		
	OCT	NOV	DEC
OBSTETRIC	99	96	90
ABDOMINAL/PELVIC	112	99	88
GYNECOLOGY	14	19	24
SMALL PARTS	8	11	4
MUSCULOSKELETAL	3	11	3
VASCULAR	0	2	0
ENDOCAVITARY	3	7	7
TOTAL	239	245	216

By classification, the abdominopelvic ultrasound was the most utilized at 299 clients (42.7%). Obstetric scans (285) accounted for 40.7%.



Sonographer Keneth Byomuhangi interacts with Dr. Reiner and Eng. Jurgen (Germany) during their support visit.

Challenges/ Recommendations;

- Lack of an uninterruptible power supply (UPS) to prevent power software damage and data loss when power surges during scans, thereby guaranteeing the highest standards of care.
- Lack of a reliable cover for emergency absence or during official leave for the sonographer. There is need to motivate staff- preferably midwives to attend onjob training in sonography.

5. Laboratory, Diagnostics and HIV/AIDS

The department is doing well except for challenges in safe blood supply. The department received 4 interns in the month of December 2024.

Uganda faces a looming HIV/ AIDS funding crisis as the USA President Donald Trump's executive orders have paused PEPFAR support for 1.2 million Ugandans living with

HIV/AIDS who now face a clear risk immunity suppression and death. Uganda will face a tall order in sustaining HIV/AIDS services with an already ailing health sector. For years, our laboratory and HIV clinic have been a beacon of hope for about 2,000 individuals living with HIV/AIDS in Kanungu district. With the support of PEPFAR, we have been able to provide diagnostic services, antiretroviral therapy, prevention of mother-to-child transmission, viral load and CD4 count sample transportation and outreach programs to those who need it most. However, the sudden loss of funding has put our entire operations at risk. We hope the 90- day suspension can be uplifted sooner especially for essential life- saving services.

DAILY MONITOR

TRUTH EVERY DAY

Swedish envoy appeals for journalists' safety ahead of polls

Diplomacy. The Ambassador of Sweden to Uganda, Ms Maria Hakansson, has urged Uganda's political actors to establish a conducive working environment for journalists ahead of the 2026 General Election. ...P.8



Tenders

Don't miss opportunities from UCC, Bank of Uganda, Electoral Commission, Ministry of Health, Vivo Energy, Ministry for Kampala, Ministry of Finance, etc.



US aid cuts bite

On our own: US President Donald Trump's January 20 Executive Order freezing aid to foreign nations has thrown many programmes in Uganda off balance, with projects being put on hold and millions of people benefiting from health funding staring at a bleak future. ...P.2,3

Freeze. One of Uganda's largest development partners, the US, announced it has frozen funding for 90 days.

90

HIV fight blow. Since 2004, the majority of HIV patients in Uganda have been depending on the PEPFAR-supported ARVs.

545km
Goma, DR Congo.
Goma is the capital and largest city of the North Kivu Province in the eastern region of DRC. The distance between Kampala and Goma is 545km. The distance between Uganda border at Bunagana and Goma is 112km.

WAR IN DRC ...P.4,5,6

Thousands flee as M23 rebels seize Goma



A-Level abridged curriculum out next month

No cause for alarm: Dr Denis Mugimba, the spokesperson of the Ministry of Education, says the abridged curriculum for A-Level will be ready by the time Senior Four leavers join Senior Five. P.8

THE LIZARD

YET WE ONLY CARED ABOUT SANCTIONS!

US AID CUTS BEGIN TO BITE

6. In- Patient/ Admissions:

Kanungu District faces an unprecedented burden of fatal road accidents. The new Rukungiri- Kihiihi- Ishasha- Kanungu tarmac road by China- Henan Construction Company (CHICO) has been completed with a few defects of slippery surfaces on some slopes and sharp corners but the major problem is that majority cyclists and some drivers have not received any basic road safety training, which we would like to implement in collaboration with Uganda Police Force. Increased poverty and mental health issues have increased domestic violence and injuries. Malnutrition cases are also rampant.



Teamwork; a joint response to an emergency on general ward. Accidents are both fatal and expensive.

The major challenge facing the inpatient department is limited bed capacity. We have proposed to the Benda Family- of Masya, Kanungu in the local user community to support us with beds for the children's ward.

7. Human Resources for Health



Dr. Holger addresses staff at a departmental meeting.



Chaperone International staff; Chaperone International has tried as much as possible to maintain a competent, vibrant and motivated workforce.



The doctors' moment; planning the day ahead, together- Dr. Holger(Director), Dr. Denis (Clinical Coordinator), Natalie, Lisa (guests) and Dr.Timothy (Incharge)

8. Project Financing and Sustainability:

Domestic income grew by 16.9% from UGX. 42,377,180 partly because increased revenues from other major operations (apart from caesarean sections i.e. herniorrhaphies, venous stripping, hysterectomies etc) which rose from UGX. 1,550,000 in the previous quarter to UGX. 5,730,000. We aim to attract major surgeries all through the year. Our total domestic income for the quarter October- December 2024 was UGX. 49, 574,800, covering 31.15% of the total project income. We appreciate the compassion we continue to receive from friends in Germany led by Dr. Holger Listle that substituted the major part (68.85%) i.e. UGX. 109,580,107 total for the 3 months.

Without equipment purchase of the Universal Anaesthesia Machine and its Isoflurane vapouriser which all added up to at least UGX. 48,272,450, our self- reliance grew from 40.24% in Quarter 1 (July- September 2024) to 44.7% in the quarter October- December 2024. This computation has ignored the seasonal staff motivation and drugs of the combined surgical, dental and ophthalmology medical camp held in November- December 2024. Considering the recent structural expenditure reforms, our self- reliance is poised to rise above 50% in the current quarter January- March 2025. In this quarter, we have also achieved significant debt recoveries- in particular caesarean section debts and some Compassion International arrears. The project sustainability trajectory remains positive.

In terms of project expenditure, salaries remain the major recurrent expenditure accounting for 50.8% of the total recurrent budget. We have started implementing frugality reforms, such as reduction of staff allowances and administration expenses in the ongoing quarter.

9. Leadership, Advocacy and Stakeholder Collaboration



We have maintained close collaboration with government, community leaders and partners. We also participated in the Annual National Safe Motherhood Conference and the National Anaesthesia Conference- both in Kampala in October 2024.



Chaperone International/ Kanungu HC IV Kataate Hospital Project staff at the 4th National Safe Motherhood Conference in Kampala.



Hospital Project Administrator, Martin Atukwase interacts with Uganda's Minister of Health Dr. Jane Ruth Acheng at the National Safe Motherhood Conference.

We also hosted visiting delegations from Germany;
Dr. Reiner and Eng. Jurgen,
Medical Team comprising Dr. Holger, Dr. Joachim Wegener, Natalie and Lisa and the
leadership of Humedica International Aid led by Dr. Johannes.



Dr. Reiner, Eng. Jurgen interacted with theatre staff and inspired them.



Humedica International Aid team support visit. Humedica has been our ally especially in reconstruction efforts following the May 2022 storm that destroyed maternity ward.

We have grown our insurance base by 1 more partner to make 2; Compassion International (Kajugangoma CDC) and Compassion International (Butogota CDC) for referrals for the care of children under their care. We shall continue to engage more insurance companies to partner with us. In future, we plan to roll out a customized community- based health insurance plan.

Local leadership has improved with a focused team of departmental heads, the health unit management committee and the board- Chaperone International. We have also enhanced community outreach services.



Staff preparing to go on a weekly community outreach activity.



Kanungu HC IV supports 5 outreach sites in Muramba, Omumbuga, Ishaaya, Itembezo and Omukagashe.





An unknown family delivering food gifts to appreciate our midwives months after a successful delivery.



Staff celebration; District Chairperson Eng. Sam Kajojo, Mayor Mr. Karabenda and HUMC Chair Mrs. Justine join Dr. Holger and staff to cut cake.

10. General Challenges

- Congested dental unit; need for relocation and expansion. We propose near OPD on the lower side of the store.
- Limited bed capacity.
- Lack of theatre operation lights.
- Lack of neonatal incubators.
- Lack of basic ophthalmology/ eye equipment.
- Congested maternity ward; need to expand maternity ward, construct a post-operative ward.
- Fragmented OPD services. There is need for a one- stop OPD with all services to reduce turn- around time.
- Lack of a physical masterplan for the facility to guide future infrastructure developments.
- Lack of critical equipment e.g. dental X-ray, neonatal incubators, trolleys.
- Inadequate local revenues; user fees too low to support project sustainability- need to revise user fees by at least 25% per procedure. Global price escalations did not spare medicine and related services. Low salaries for Chaperone International staff and a high cost for staff rent.



Kanungu District is facing increased poverty levels. Global tea prices dropped and farmers have started uprooting tea to reclaim land for food crops.

11. Major Activities for Quarter 3: FY 2024/ 2025.

- a) Recruitment/ replacement of 1 medical officer and 1 anaesthetic officer.
- b) Implementation of structural budget reforms and local resources mobilization/ sustainability
- c) Staff and board training and capacity development.

12. Appreciation.

We appreciate the government of Uganda, Ministry of Health and Kanungu District Local Government led by Chairman Eng. Sam Kajojo, the Health Unit Management Committee, In-charge and all staff for their cooperation and skill. In a special way, we keep in our thoughts and prayers- the compassion and commitment of Dr. Holger Listle and friends in Germany, and beyond. They, through the collaboration of Chaperone International, are the lifeline of this project. Their generosity has enabled us to provide specialized services to the people of Uganda at the most modest cost. We appreciate the leadership and expertise of Dr. Holger Listle, founding director and lead surgeon, together with endodontologist Dr. Joachim Wegener for enabling international collaboration and skills transfer through the various medical camps. We appreciate local partners such as Compassion International, Dr. Sam Ruvuma, Benda family and village health teams.

Martin Atukwase,

Hospital Project Administrator.

+256 777 408381|atukwasemartin2010@gmail.com







