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STRATEGIC PLANNING PROCESS IN A GENERAL RURAL HOSPITAL: AN EXPERIENCE AT DR. AMBROSOLI MEMORIAL HOSPITAL, UGANDA

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UNIVERSITÀ DEGLI STUDI DI MILANO
DIPARTIMENTO DI
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THE BACKGROUND

Kalongo Town Council currently has a total estimated population of 11,077, with 87.27% of Agago District's population (that amounts to 230,908)

Agago District is one of the poorest areas of the country and a large proportion of the population is living in a condition of poverty

- 35.2% of the population lives below the national poverty line, < 1\$ per day (Poverty Status Report – November 2014) - against a national average poverty rate of 19.7%
- 41.4% are insecure, with very low resilience to external factors (e.g. health issues).



DR. AMBROSOLI MEMORIAL HOSPITAL

- Founded in 1957 by Fr. Dr. Giuseppe Ambrosoli
- PNFP, general hospital and training school
- Member of Catholic health facilities under the coordination of the UCMB
- The owner is the Catholic Diocese of Gulu
- The only hospital in Agago District heading the Agago Health SubDistrict.



DR. AMBROSOLI MEMORIAL HOSPITAL: THE HOSPITAL AND HIS BACKGROUND



DR. AMBROSOLI MEMORIAL HOSPITAL

Indicator	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16
OPD New Attendance	16,769	21,305	25,035	21,761	26,245
OPD Total Attendance	23,714	30,305	28,772	25,526	28,883
Inpatient Admission	11,374	11,835	13,805	12,799	22,274
ANC Total Attendance	7,936	5,312	6,722	5,909	5,743
ANC 1st Visits	2,958	2,290	1,990	1,817	1,890
ANC 4th Visits	1,235	1,187	1,234	1,217	1,075
Maternity Deliveries	2,805	2,727	3,003	3,247	3,465
Caesarean Sections	405	411	406	369	315
Maternal Death	7	5	5	3	4
Immunization in children	14,814	9,311	10,498	14,079	15,886
Malaria in OPD	2,861	3,535	1,843	1,077	6,095
Malaria in In-Patient Department	2,361	2,931	1,505	1,513	9,664

Indicator	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16
Number of beds	302	302	302	271	271
Total admissions	11,374	11,835	13,805	12,799	22,274
Patient days	62,340	63,798	76,758	66,386	86,898
Average Length of Stay	5.5	5.4	5.6	5.2	3.9
Turn over interval	4.2	3.9	2.4	2.5	0.5
Throughput per bed	37.7	39.2	45.7	47.2	82.2
Bed Occupancy Rate	56.6	57.9	69.6	67.1	87.9
Number of Deaths	172	180	219	180	251
Mortality Rate	1.5%	1.5%	1.6%	1.4%	1.1
Recovery Rate	98.3%	98.3%	98.2%	98.5%	98.0%
Self-discharges	16	15	34	11	14

A general rural hospital with 267 bed capacity distributed through 5 wards: Medical, Surgical, TB, Maternity and Paediatric

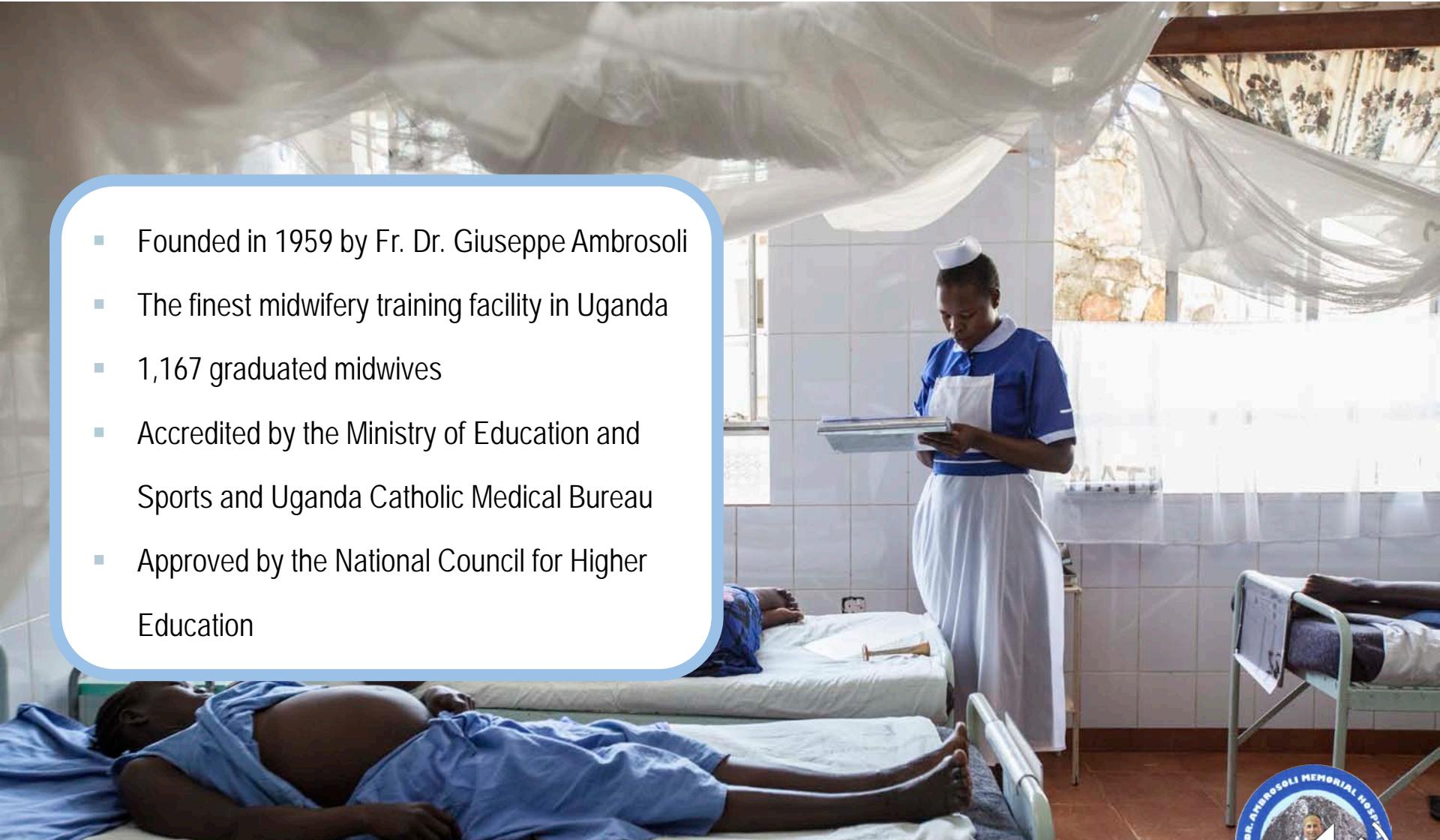
The third in the League Table amongst general hospitals

(Annual Health Sector Performance Report 2015-16 by MoH)



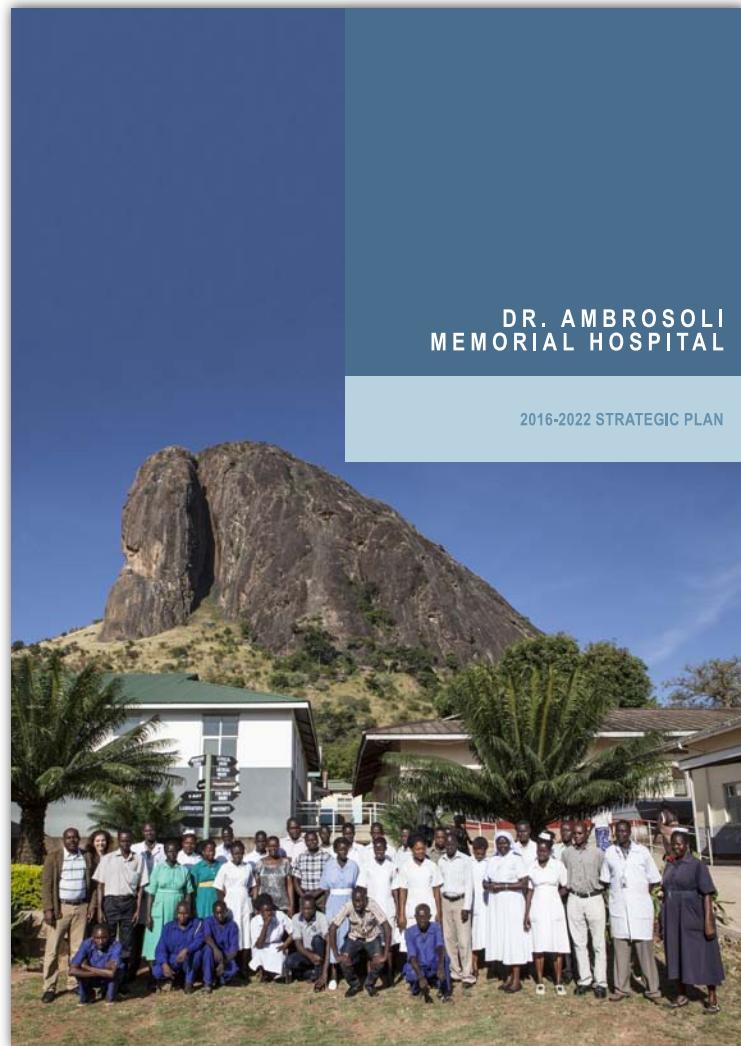
ST. MARY'S MIDWIFERY TRAINING SCHOOL

- Founded in 1959 by Fr. Dr. Giuseppe Ambrosoli
- The finest midwifery training facility in Uganda
- 1,167 graduated midwives
- Accredited by the Ministry of Education and Sports and Uganda Catholic Medical Bureau
- Approved by the National Council for Higher Education



DR. AMBROSOLO MEMORIAL HOSPITAL: THE HOSPITAL AND HIS BACKGROUND

THE STRATEGIC PLAN



- *Dr. Ambrosoli Memorial Hospital 2016-2022 Strategic Plan* communicates the hospital's strategic vision for the next years.
- It is a **framework** that enables the hospital Board of Governors and Management to take decisions guiding the preparation of annual work plans and budgets, as well as monitor progresses over time.
- It represents a pathway to the future of the hospital, a guide to prioritization for progress and development.



THE PLANNING PROCESS

The Strategic Planning Process was guided by commitment to innovation and engagement of stakeholders: to achieve these principles, a **STEP-BY-STEP** participatory process was designed, characterized by dialogue and challenging discussion throughout the activity.



THE PLANNING PROCESS

Assessing the external and internal environment

Identifying issues and developing strategies

Paying attention to the needs of the stakeholders

Planning, reviewing and adopting procedures

- The process started at the beginning of 2016 involving different key figures from the hospital staff, through extensive consultations among them and stakeholders of Kalongo and Agago district.
- The SWOT analysis, a structured planning method, identified strengths, weaknesses, opportunities, and threats.
- Environmental scanning and assessment of the situation led to the identification of Strategic Goals.
- The Stakeholders' Meeting produced a list of recommendations based on the main issues of the Hospital.
- Each of the Goals underwent a process of analysis conducted by Working Groups (staff, experts, and stakeholders), defining objectives and activities & tasks for strategy implementation, including indicators for monitoring and evaluation of the process.



THE SWOT ANALYSIS

S

STRENGTHS

Clear vision, mission and values and strong historical background
International partnership and networking
Well defined organizational structure
Accredited by MOH and UCMB
Heading Agago Health Sub District (HSD) and member of the District Health Management Team (DHMT)
Training hospital for midwives and interns
Accessible by poor and vulnerable people

WEAKNESSES

High dependency on financial subsidies
Insufficient number of staff and lack of specialists
Lack of capacity building in long period
Inadequate maintenance of equipment and aged infrastructure
Lack of structured policies and procedures
Lack of staff time discipline
Poor internet system and out of date IT infrastructure
Limited data elaboration and reconciliation

O

OPPORTUNITIES

Process of participatory management style started
Recognized as one of major stakeholders in the UCMB network and MOH
Supported by Government & local institution
One of most valued Midwifery's school of Uganda
Known and recognized internationally
Recognized Laboratory hub for Pader and Agago District
Existing staff training and development policy guideline draft

THREATS

High dependency on financial subsidies
High staff attrition
Increased number of non-communicable disease (epidemiological transition)
Changes of International Organization and Donor strategies
Sustainability rate very low
External environment still underdeveloped (e.g. lack of road, social amenities, poor education system)
Increase of user fees can have a utilization rebound

The **SWOT analysis** enlighten the Hospital's strengths and weaknesses, to determine its opportunities for growth and improvement and the threats of the external environment:

- **Internal factors**, strengths (an advantage over others) and weaknesses (disadvantage relative to others) internal to the organization.
- **External factors**, opportunities (elements that the project could exploit to its advantage) and threats (elements that could cause trouble for the project) presented by the environment.



THE STAKEHOLDER'S MEETING

The **Stakeholders' Meeting** (the assembly of all parties, authorities, organizations, people, institutions, interested in the life and services of the hospital) took place in November 2016 with the theme "*Sustainability of services delivery in Dr. Ambrosoli Memorial Hospital, Kalongo*",

It was an opportunity to address the main issues that are concerning the sustainability of the hospital and to present the results of the SWOT analysis, the four Strategic Goals and the Strategic Objectives. The meeting produced a list of recommendations:

- 1 Ensure commitment of all the hospital employees to the institution's mission.**
- 2 Diversify the hospital's funding sources – including widening the donor base.**
- 3 Work towards ensuring retention of staff.**
- 4 Internal communication among the supervisee & supervisor management to be improved.**
- 5 Prudent revision of the new fees policy engaging the community**



THE WORKING GROUPS

THE FINAL STEPS

- Definition of **ACTIVITIES** and **TASKS** to achieve the goals
- Definition of expected **OUTCOMES** and **OUTPUTS**
- Definition of **INDICATORS** to monitor accomplishments and the progress of the realization of the plan

Each of the four **Strategic Goals**, along with their respective **Strategic Objectives**, has been assigned to a dedicated Working Group composed by subject experts and stakeholders, both from the hospital and other institutions. Their tasks were:

- Making and reviewing the objectives, activities, measures, and tactics identified to implement the plan.
- Providing advice on strategic priorities.
- Developing strategies for assessing progress of the implementation of the plan.

Each group was provided with **Planning Tools** for:

- Activities, outcome and outputs, and indicators definition.
- Time-line and milestones delineation.
- Monitoring and evaluation.



THE PLANNING TOOLS

The Strategic Goals were consequently structured into several **STRATEGIC OBJECTIVES** with related planning tools.

Activities, outcome and outputs, and indicators

Time-line and milestones

Monitoring and evaluation
(list of performance indicators, relevant key targets and metrics)

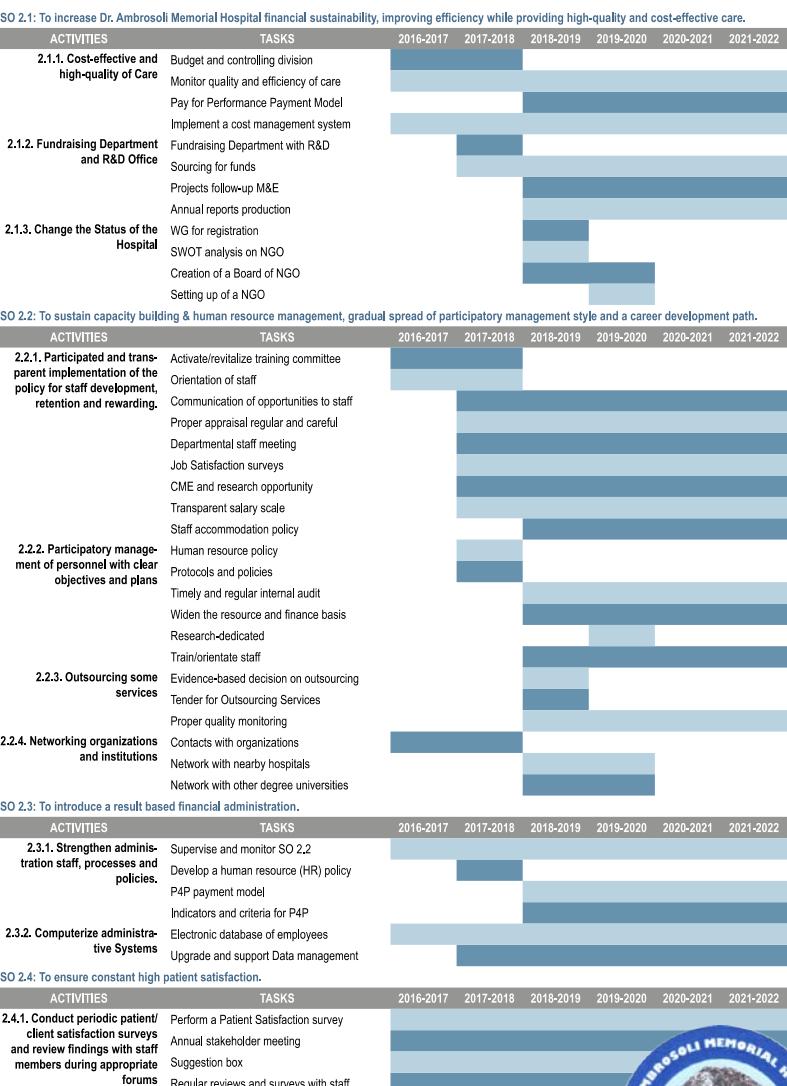
The Strategic Plan is intended to cover a 6-year period to be translated into annual plans of action before the end of every financial year.



THE PLANNING TOOLS

Strategic Goal 2: Time-line

ACTIVITIES	TASKS	OUTPUTS
1.1.5 Palliative Care as an integral component of care	<p>Work collaboratively with ward/department teams to review and build on existing palliative care initiatives</p> <p>Develop a system of support for staff who completed the series of palliative care education days to enable them to encourage and promote the delivery of palliative care and provide the potential for care that is more cost effective</p> <p>Create baseline palliative care information and skills for all levels of staff with implementation initiatives</p> <p>Create a culture of supervision in practice to support the delivery of palliative care</p> <p>Acquire health professionals/materials and equipment to enable these tasks</p> <p>Evaluation and review of these tasks at regular intervals</p>	<p>Outputs:</p> <ul style="list-style-type: none"> Baseline knowledge of palliative care for all healthcare professionals Creation of groups in each ward/department with more in-depth knowledge of palliative care Creation of an annual questionnaire on palliative care for staff, family and patients <p>Indicators:</p> <ul style="list-style-type: none"> % of patient satisfaction levels on palliative care % of family satisfaction levels on palliative care % of staff satisfaction levels on palliative care
1.1.6 Surgery Department	<p>Enhance collaboration with hospitals (both national and international) to provide advanced Surgery Care (e.g. intensive care, orthopaedic surgeon)</p> <p>Strengthen cooperation with OPD emergency service (see Activity 1.1.4)</p> <p>Organize regular Surgical camps and strengthen collaboration with Association of Surgeons of Uganda (ASOU)</p> <p>Implement WHO Guidelines for Safe Surgery (WHO Surgical Safety Checklist)</p> <p>Medical education on clinical case management: <ul style="list-style-type: none"> Clinical audit Rounds and grand rounds Clinician Meeting Continuing Medical Education (CME) </p> <p>Strengthen the use (through improving their accessibility and implementation) of up-to-date clinical pathways and medical guidelines; creation of a booklet for health professionals with clinical pathways</p> <p>Health education programs on health professionals (e.g. surgeon and anaesthesiologist): <ul style="list-style-type: none"> Professional updating courses Training/re-orientation of the staff Training on-the-job Improvement in healthcare employees' communication (e.g. medical officer-to-clinical officer) </p> <p>Implement Clinical Documentation improvement (e.g. proper filling of sheets and registers by health professionals) and develop a dedicated data management software for Surgery Department</p>	<p>Outputs:</p> <ul style="list-style-type: none"> Memorandum of Understanding (MoU) with other facilities Collaboration with other facilities Number of visiting surgeons Number of staff trained and re-oriented each year Clinical pathways and medical guidelines updated WHO Surgical Safety Checklist <p>Indicators:</p> <ul style="list-style-type: none"> % of transferred patient to other facilities % of staff trained and re-oriented each year (at least 20-25% per year) % of deaths on surgical patients % of surgery-related infections % of surgical wound infection % of properly filled WHO Surgical Safety Checklist over the number of surgical procedures performed Indicators from annual analytical report (e.g. admissions, deaths, deliveries...)
1.1.7 Emerging diseases (communicable and non-communicable), co-morbidity and epidemiological transition	<p>Strengthen the use (through improving their accessibility and application) of up-to-date clinical pathways and medical guidelines and realize services for the following health challenges: <ul style="list-style-type: none"> Cardiovascular diseases (hypertension, heart failure) Diabetes and nutrition (type I and II, nutritional counselling/epidemiological transition) Chronic viral diseases (e.g. HBV, HCV and HPV) Co-morbidity (e.g. diabetes & TB, HIV & TB, HIV & HBV, HIV & HPV...) Cervical cancer and HPV screening program </p> <p>Strengthen hospital's resilience facing new challenges (e.g. epidemiological transition, nutrition)</p> <p>Training/re-orientation of staff (professional update)</p> <p>Health education programs on population, e.g. radio advertisements on nutrition, CVDs prevention, viral diseases prevention (both primary and secondary), information, education and community group counselling sessions; community mobilization, e.g., for screening programs on viral diseases</p> <p>Implement Clinical Documentation improvement (e.g. proper filling of sheets and registers by health professionals) and develop a dedicated data management software</p>	<p>Outputs:</p> <ul style="list-style-type: none"> Strengthen OPD services for Diabetes, CVDs and HPV Update clinical pathways and medical guidelines on the following topics: Diabetes, CVDs, HPV, chronic viral diseases (e.g. MTCT of HBV, HBV care and HCV) considering growing comorbidity issues All mothers tested for HBV during pregnancy (ANC) or delivery each year All newborns from HBV-positive mothers vaccinated from HBV at birth Cervical Cancer screening on sexually active women <p>Indicators:</p> <ul style="list-style-type: none"> % of staff trained and re-oriented each year (at least 20-25% per year) % of mothers tested for HBV during pregnancy (ANC) or delivery % of newborns from HBV-positive mothers vaccinated from HBV at birth [target SDGs 95% decline in new cases of chronic HBV infection between 2010 and 2030]



THE FOUR GOALS

The strategic plan acknowledges four goals representing ambitious ethical, practical and economic commitments:

1. Health care service delivery adapted to changing environment and quality demands
2. Institutional development
3. Infrastructure renovation and maintenance
4. Teaching and Training Services upgraded and broaden

They integrate different dimensions (economic, social and environmental) around the themes of service delivery, infrastructure, partnership and education remaining deeply interconnected.

They seek to prioritize commitment of serving poor and vulnerable people, even in difficult circumstances, while focusing on quality, efficiency and efficacy of services, and empowerment of the staff.



STRATEGIC GOAL #1

Health care service delivery
adapted to changing environment and quality demands



Strategic Objective 1.1

To deliver quality health services while being aware of and considering the needs of the less privileged and vulnerable social groups including women, children and the chronically ill.

Strategic Objective 1.2

To create a network with nearby hospitals (e.g. St. Mary's Hospital Lacor Gulu and St. Joseph's Hospital Kitgum), providing better and broader care.





SG1 STRATEGIC OBJECTIVE 1.1

MEDICAL AND
SURGICAL CARE

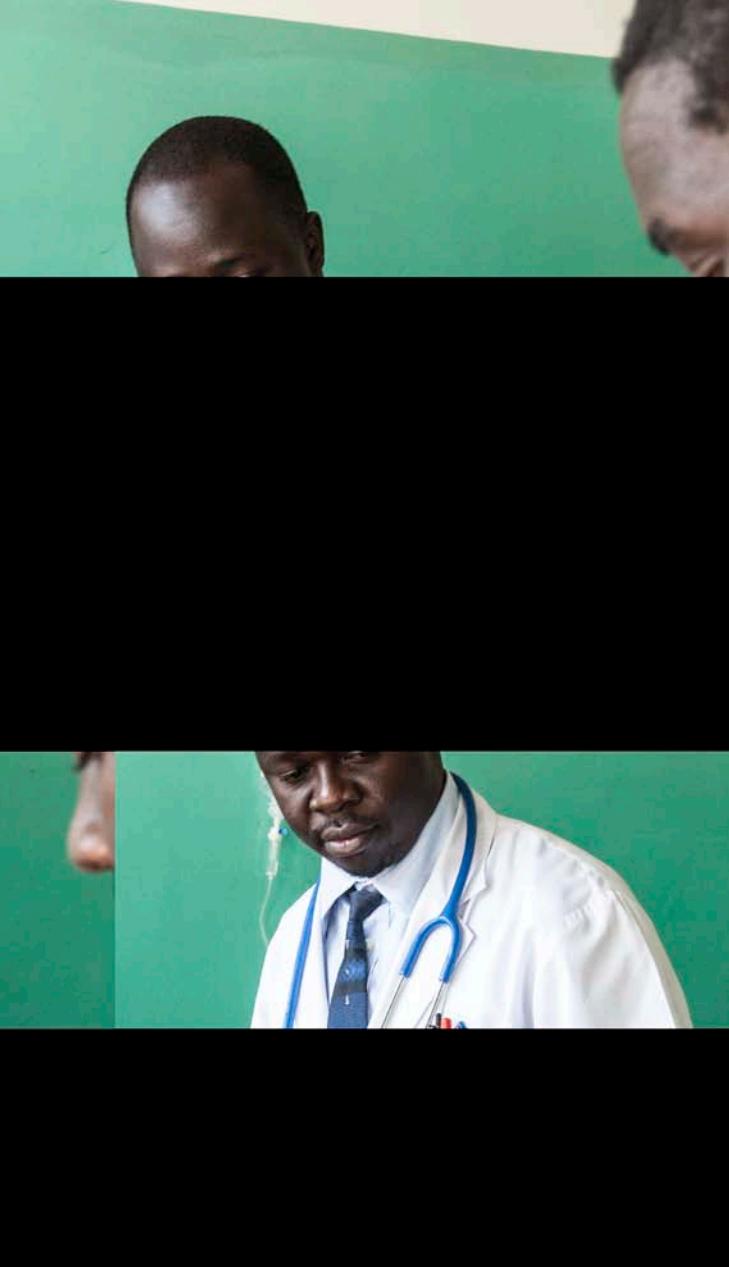
PUBLIC HEALTH
INTERVENTIONS

SERVICES

- Expanding health services and strengthening the existing ones
- Increase coverage and utilization of services
- Improving quality and efficiency
- Optimizing the use of resources.

All the planned activities aim to fulfill standards and requirements of both *national* and *international* guidelines and recommendations.





SG1 STRATEGIC OBJECTIVE 1.2

- Create a **model of integrated care**, working with other hospitals and health-care providers, designing a comprehensive, integrated health-care system that is high-quality, accountable and accessible to the community and covers the entire continuum of care from primary to specialty care.
- Lay the foundation for a **scientific and practical exchange** with Hospitals in the North of Uganda, strengthening the existing cooperation through the establishment of networks.
- Providing **specialist health services** (such as dentistry, psychiatry, orthopaedics) that are not financially sustainable for the hospital alone.



STRATEGIC GOAL #2

Strategic Objective 2.1

To increase Dr. Ambrosoli Memorial Hospital financial sustainability, improving efficiency while providing high quality and cost-effective care.



Institutional development



Strategic Objective 2.3

To introduce a result based financial administration.

Strategic Objective 2.4

To ensure constant high patient satisfaction.



SG2 STRATEGIC OBJECTIVE 2.1



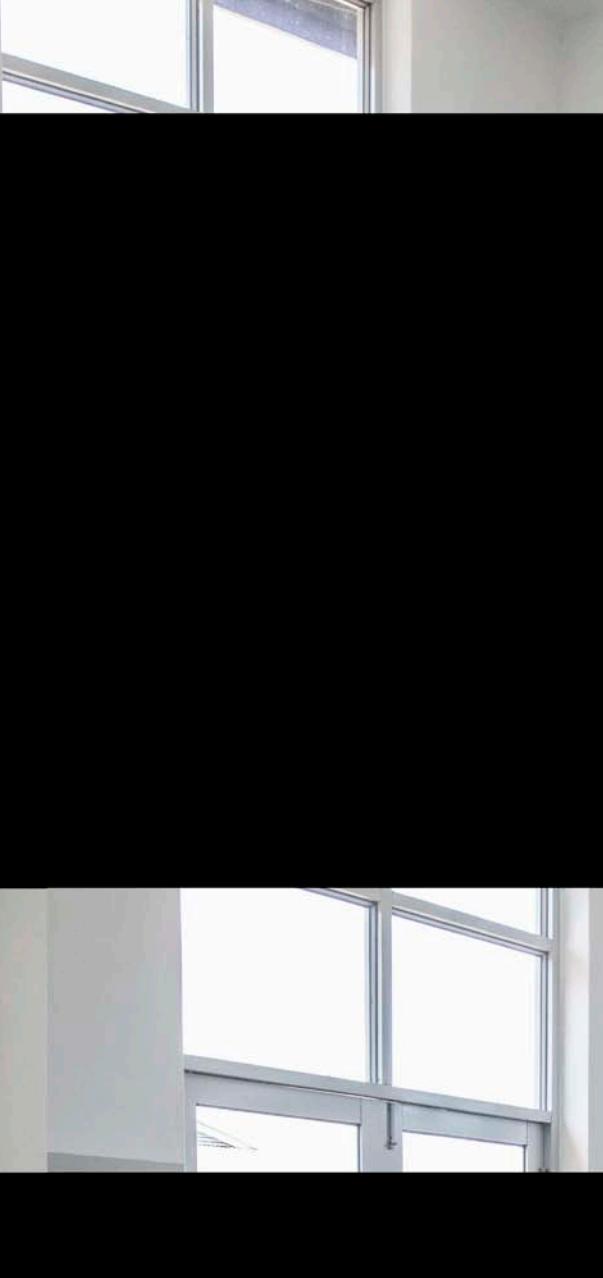
- Implementation of a model that can guarantee **financial sustainability** over time
- Develop and implement a **system of cost monitoring**, and establish a **Budget and Controlling division**
- Strengthening a culture of **fundraising** and enhancing the portfolio of donors for improving fundraising effectiveness
- Registration as **NGO**
- Establishment of a **Fundraising Department with Research and Development Office**



SG2 STRATEGIC OBJECTIVE 2.2

- **Health workers** are the main asset of the hospital and the fundamental resource for service provision
- Values and supports employees offering adequate opportunities for **personal and career development** through a **participatory management style**
- Development of a **human resource policy**
- Strengthen the **performance management system** to better recognize good performance and tackle under-performance
- Enable staff to acquire appropriate **skills and competencies**
- Strengthen the capacities of the **Human Resources Office**

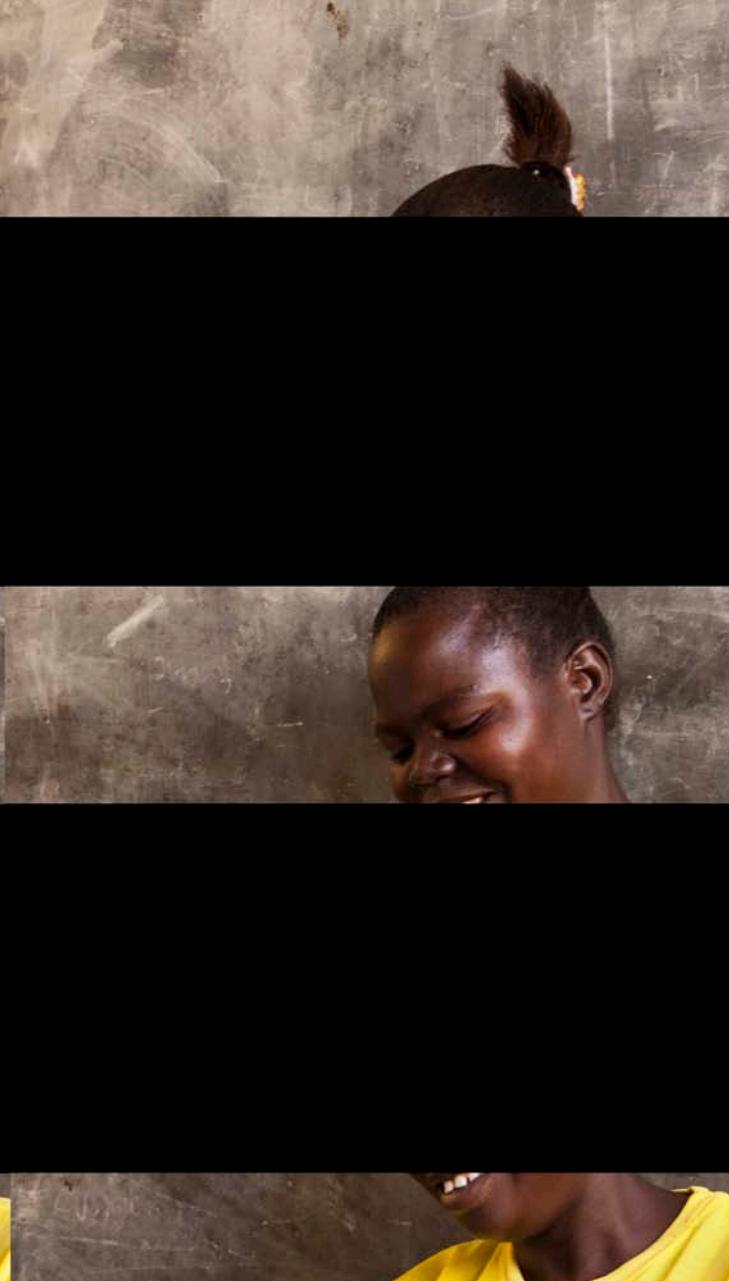




SG2 STRATEGIC OBJECTIVE 2.3

- Implementation of **result-based management**: a management strategy which uses feedback loops to achieve strategic goals
- Implementation of a **pay for performance (P4P) payment model**: a payment model that offers financial incentives to healthcare providers for meeting certain performance measures
- Increase **efficiency and quality** of Dr. Ambrosoli Memorial Hospital, while **reducing healthcare expenditure**.





SG2 STRATEGIC OBJECTIVE 2.4

Patient satisfaction is an important and commonly used indicator for measuring the quality in health care

Conduct periodic surveys among patients or collect their comments and suggestions can:

- foster understanding of latent needs of the population;
- combine the flow of information that comes from outside with what comes from within;
- monitor and check the effectiveness of the implemented policies.



STRATEGIC GOAL #3

Strategic Objective 3.1

To develop a maintenance master plan to ensure that the hospital is able to continue delivering services.



Strategic Objective 3.2

To develop a master plan and implement a clear action plan with priorities and milestones.



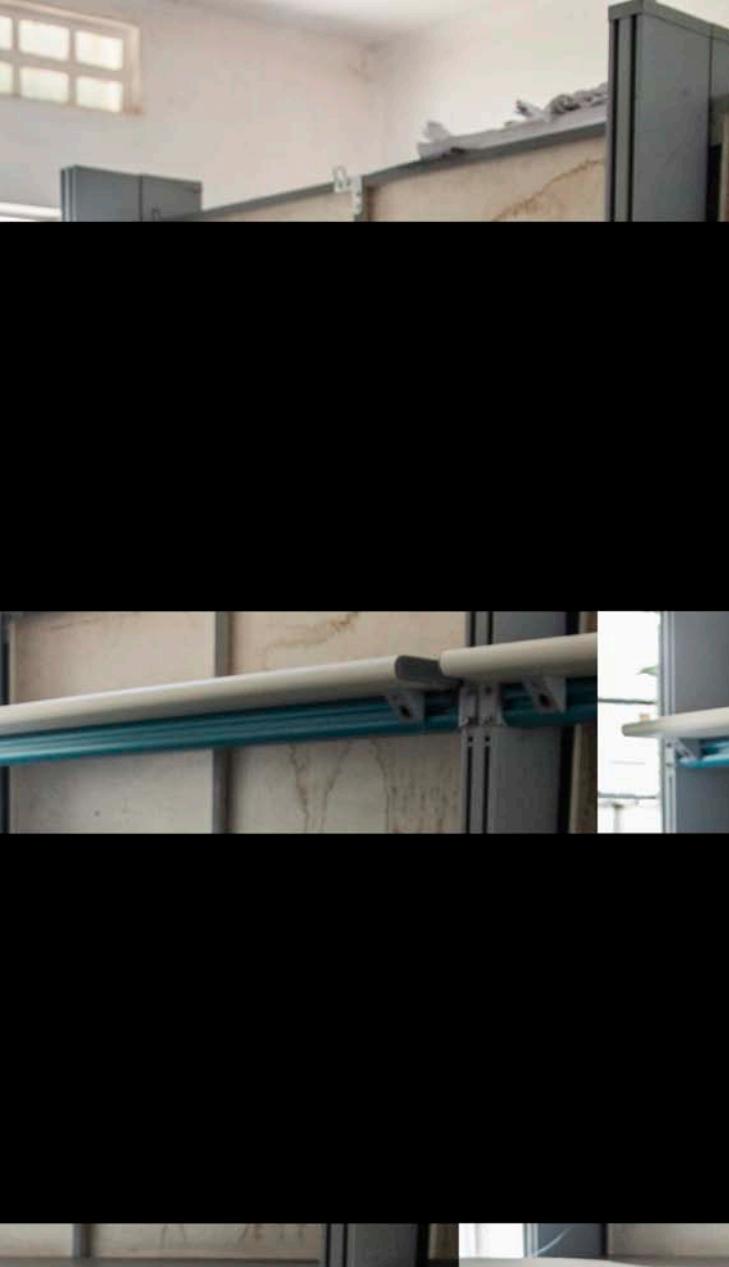
Infrastructure renovation and maintenance



Strategic Objective 3.3

To ensure funding for additional capital investments.

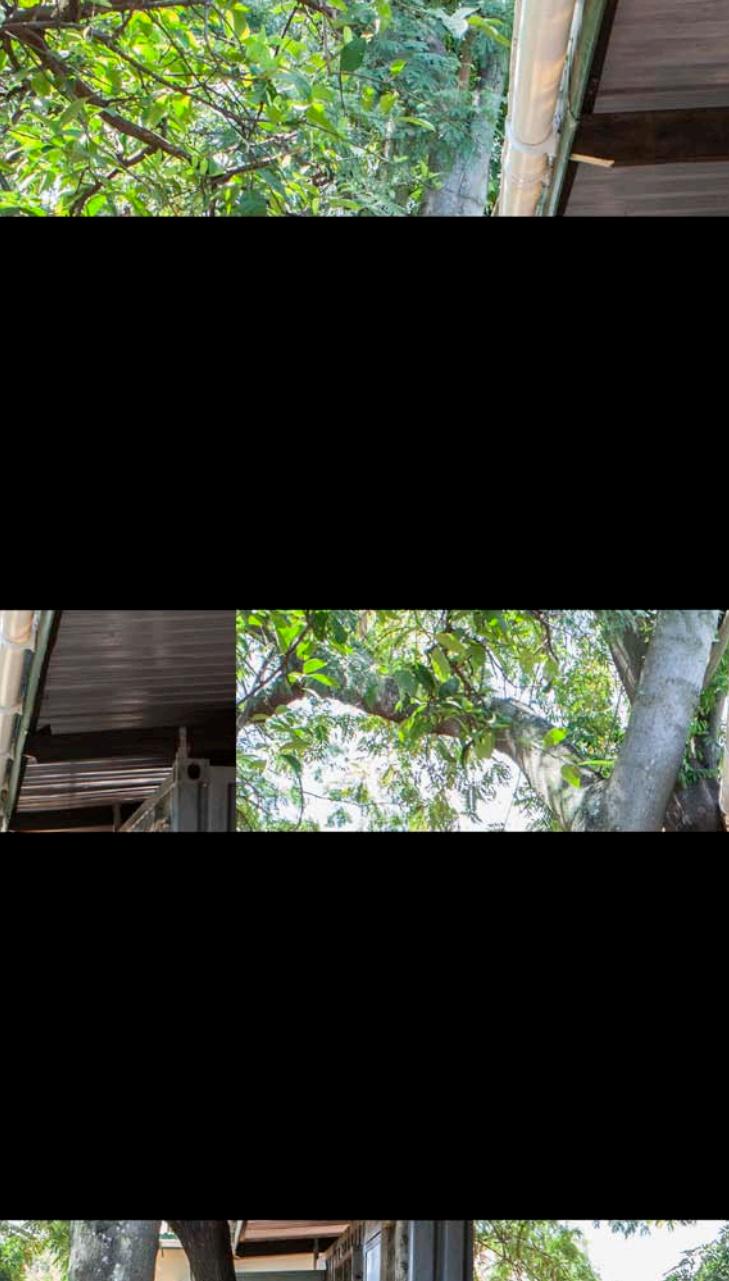




SG3 STRATEGIC OBJECTIVE 3.1

- Creation of an **inventory of infrastructure and equipment (I&E)**, assessing their quality and safety
- Development of a **maintenance master plan** for Dr. Ambrosoli Memorial Hospital's I&E, with:
 - **Maintenance policy**, based on an assessment of the needs and analysis of I&E
 - **Maintenance strategy** (reviewed and updated every 2 years)
 - **Maintenance program** describing all maintenance requirements and scheduling of preventive maintenance (PM) and corrective maintenance.
- Implementation of a **periodic reporting system** with annual meeting.

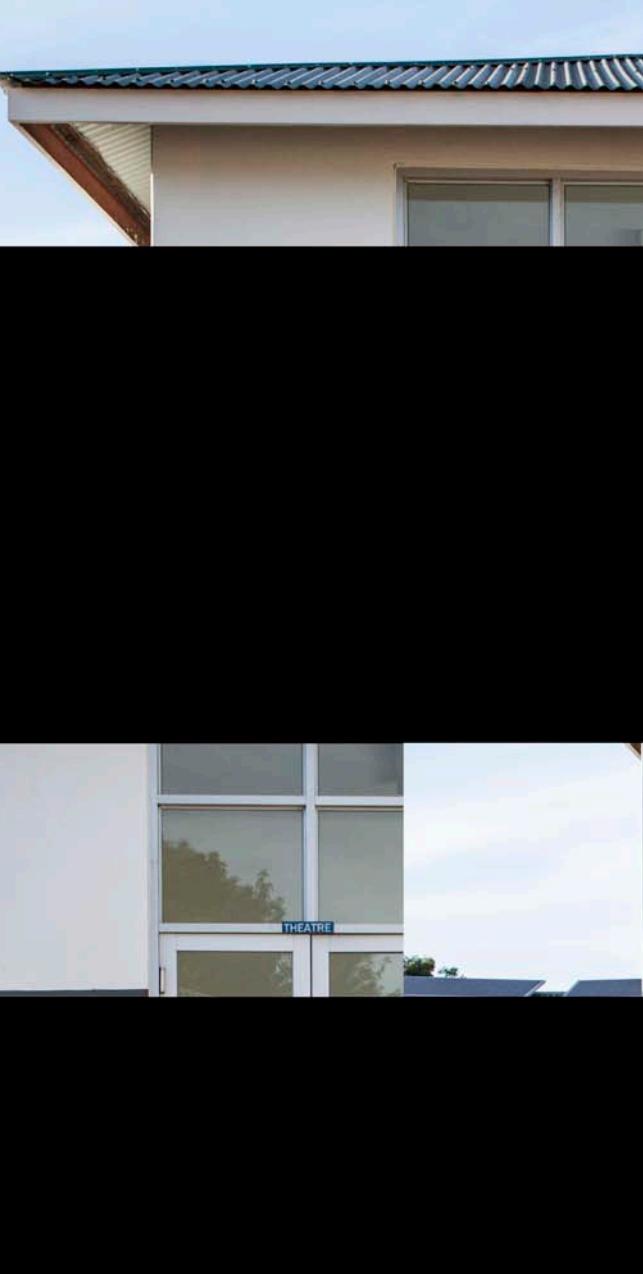




SG3 STRATEGIC OBJECTIVE 3.2

- Identification of a **working group** (i.e. a project team) for assessment of needs and requirements analysis, the inventory of the existing documents and plans of development (e.g. "Staff Quarter – Report and way forward" master- plan and "Dr. Ambrosoli Memorial Hospital – Wash Report")
- Development of a **Master Plan** and an **Action Plan**
- **Improve space utilization** reviewing the accommodation currently used and consider options for contributing to overall rationalization and relocating hospital services.





SG3 STRATEGIC OBJECTIVE 3.3

- Seek for **external funding** (both national and international) through the application to calls for proposals creating projects on health infrastructures and equipment (maintenance, renovation, construction).
- Establishment of a **Fundraising Department with Research and Development Office** (see Strategic Objective 2.1)



STRATEGIC GOAL #4

Strategic Objective 4.1

To expand the teaching capacity of St. Mary's Midwifery Training School



Strategic Objective 4.2

To Ameliorate and upgrade the St. Mary's Midwifery Training School to prepare the School for the Strategic Objective 4.3



Teaching and Training Services upgraded and broaden



Strategic Objective 4.3

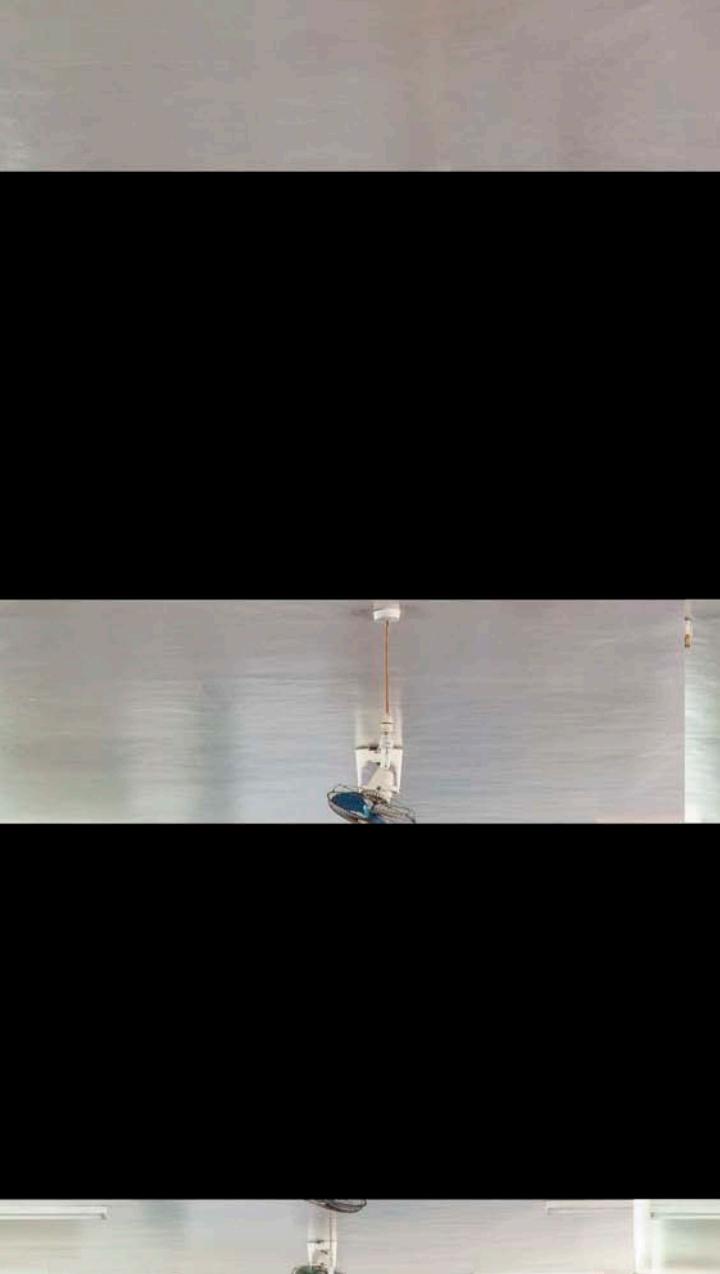
Creation of the Bachelor's Degree course in Midwifery at St. Mary's Midwifery Training School.



SG4 STRATEGIC OBJECTIVE 4.1

Improve the Diploma in Midwifery (DM) and Certificate in Midwifery (CM) through actions in the following areas:

- **Students' selection & admission:** transparent and fair access process, reducing iniquities
- **Teaching & learning:** teachers and tutors are the main asset of the school for high-quality education provision. Teaching programs will be reviewed and updated to meet the changing environment and the national standards
- **Staff appraisal & professional development:** provide a workplace that values and supports employees offering opportunities for personal and career development.
- **New forms of education organization:** the Distance Learning Department



SG4 STRATEGIC OBJECTIVE 4.2

Ameliorate and upgrade the St. Mary's Midwifery Training School preparing the creation of **Bachelor of Science degree in Midwifery** (B.Sc. midwifery degree course). This objective can be pursued acting on:

- **Employees:** improvement of the teaching staff and the acquisition of new human resources
- **Infrastructures:** foundation of a new Campus creating dynamic teaching and learning environments with state-of- the-art facilities in line with the NCHE requirements and criteria.



SG4 STRATEGIC OBJECTIVE 4.3



The program of the **Bachelor of Science degree in Midwifery** will be articulated in theoretical experience and clinical training, covering two academic years, clustered in five semesters.

- **Planning committee:** program conceptualization for B.Sc. Midwifery Degree course
- **Accreditation to teach** of the Bachelor of Science degree in Midwifery following the requirements from NCHE

MONITORING AND EVALUATION

Monitoring and Evaluation helps improve performance and achieve results, providing timely and accurate data through a *results-based management approach* (focusing on both processes and results, hence the emphasis on quality in service delivery)

Monitoring

Set of detection devices (performance indicators) and data.



Evaluation

Critical interpretation of the measured data

The M&E process will serve as a framework for measuring the organizational performance and the success of strategy and for tracking progress.

The implementation of the plan will be **evaluated annually** and a **midterm review** will be undertaken 3 years after launching, putting in place corrective measures or new thinking and actions to address new challenges.



SG1

SG1: Health Care Service Delivery

- % of HIV+ people on ART (for 6 months) with suppressed viral load (UNAIDS target)
- % of neonatal asphyxia
% of people living with HIV receiving ART (UNAIDS target)
- % of people with HIV knowing their status (UNAIDS target)
- % pregnant women who attended ANC service 4 times (or more)
- % of properly filled WHO Surgical Safety Checklist over the number of surgical procedures performed
- % of staff trained and re-orientated each year
- % stock-out of 10 tracer indicator drugs/month
- Immunization coverage per disease (see UNEPI)
- Maternal mortality ratio
- Neonatal mortality ratio
- Stillbirth rate

SG2

SG2: Institutional Development

- Sustainability Ratio
- % of patient satisfaction levels
- % of staff satisfaction levels
- % projects completed on proposed

SG3

SG3: Infrastructure renovation and maintenance

- Fault and failure frequency
- % of construction, renovation and maintenance
- projects completed on time

SG4

SG4: Teaching and training services

- % of candidates who passed the final end-of-course examinations
- % of teaching staff who upgraded their qualifications
- % of NCHE accreditation criteria satisfied



MONITORING AND EVALUATION

M&E will be a multi-step process carried out by the following activities:

- **Action Plan:** before the end of every FY including budget analysis.
- **Monitoring:** collecting data monthly.
- **Annual Activity Report:** annually, each WG will monitor and assess progresses and achievements of their plans producing a report.
- **Mid-term review:** end FY 2018-19. Data collected from Annual Activity Report will be extensively discussed and analysed by WG and presented to the Stakeholders.
- **Final evaluation and Report:** first semester FY 2021-22, analysis of data and indicators from the SG and their critical interpretation, underlining accomplishments and failures and explaining their motivation.
- **New Strategic Plan:** based on the Final evaluation and Report.

The working groups will be responsible of their Strategic Goals and their implementation!



CONCLUDING REMARKS

- The Strategic Plan will be monitored, reviewed and revised by the staff, stakeholders and experts who wrote it in first place, continuing that **participatory process designed for its creation.**
- At the core of our strategy is the **financial sustainability** of Dr. Ambrosoli Memorial Hospital
- The strategic plan is more a guideline rather than set of rules and might end up changing its course as it proceeds through the years, the **budget will be estimated yearly** reflecting the plans of action from the working groups.



THANK YOU FOR YOUR ATTENTION

DR. AMBROSOLI MEMORIAL HOSPITAL - KALONGO

