COUNTY GOVERNMENT OF KISUMU

THE COUNTY ASSEMBLY OF KISUMU
3RD ASSEMBLY
DATE: 13/03/24
Time: 09607
Day: Wed
TABLED BY: Hon. Emily Ogingo
CLERK AT THE TABLE: Hamisi Mose

COUNTY ASSEMBLY OF KISUMU

THIRD ASSEMBLY - SECOND SESSION

MEDICAL SERVICES, PUBLIC HEALTH AND SANITAION COMMITTEE

REPORT ON THE KNOWLEDGE EXCHANGE EXERCISE BETWEEN THE COMMITTEE, MULAGO NATIONAL REFERRAL HOSPITAL AND UGANDA CANCER INSTITUTE (UCI).

Presented by;

Hon Vincent Jagongo,

Chairperson.

March, 2024

Clerk's Chambers

County Assembly Buildings

Kisumu, Kenya

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CHAIRPERSONS FORWARD

Mr. Speaker and Hon. Members,

I am pleased to present this report detailing the outcomes of the Committee on Medical Services, Public Health and Sanitation's visit to Mulago National Referral Hospital (MNRH) and Uganda Cancer Institute (UCI), which took place from 17th to 17th October, 2023, as part of our commitment to fulfilling our mandate and ensuring continued improvement of healthcare system in Kisumu County.

By visiting Mulago, the committee's intendment was to gain valuable insights into the best practices for managing a large referral hospital. This knowledge is aimed for application at JOOTRH and KCRH among others, ensuring they function efficiently and deliver high-quality care.

UCI being a leading center for cancer treatment and research in East Africa, the Committee settled on it with intention to leverage on the experience the institution has so far gained in its years of research and cancer treatment for application in the ongoing establishment and its operations to improve healthcare delivery within Kisumu County and potentially the surrounding region.

Findings

AT MULAGO NATIONAL REFERRAL HOSPITAL

Hon Speaker,

Serving as a teaching hospital for Makerere University College of Health Sciences, MNRH is one of the largest and most prestigious publicly funded hospital serving not only Uganda but also receiving patients from the neighbouring countries.

By a publicly funded hospital, it is intended to mean that services for patients are free. However, this oftentimes is not the case as there are instances, as listed below, where patients may be called upon to spend;

1. **Patients are likely to buy medicines if the ward pharmacy is out of stock** of what is needed;
2. **Pay for ultrasound and lab work if the doctor requests test which are not done at the hospital** or in instances that the hospital lab machine is broken down.

Role of the facility in Uganda's healthcare system

The Committee established that Mulago National Referral Hospital plays a pivotal role in Uganda's healthcare system. It serves as a cornerstone of healthcare delivery in the country, fulfilling several key functions:

1. **Specialized care:** The hospital offers specialized medical services, including surgeries, pediatrics, cardiology, and oncology, which are often beyond the capabilities of regional healthcare facilities.
2. **Training and research:** It is a hub for medical education and research, training healthcare professionals and conducting medical research that advances the field in Uganda.
3. **Referral center:** It serves as a referral hospital, receiving patients from lower-level healthcare facilities, offering advanced diagnostics, and specialized treatments.

Key Learnings from Mulago National Referral Hospital

The Committee learnt the following lessons from MNRH;

1. **THAT** the facility has a well-defined decision-making structure, which ensures that decisions are made in a timely and efficient manner.

2. **THAT** the hospital has invested heavily in advanced medical equipment and specialized units, which enables it to offer a wide range of specialized medical services.
3. **THAT** the hospital places a high emphasis on infection control and sanitation practices to ensure the safety and well-being of patients, staff, and visitors.
4. **THAT** the fact that the hospital has 10 large washing machines and one large industrial iron machine is a good indication of the importance the facility places on cleanliness and hygiene.

Best Practices for Kisumu County

The Committee identified the following as the best practices Kisumu County can emulate from the experiences from MNRH;

1. **Specialized units**: Establishing specialized units within healthcare departments is beneficial for offering advanced and specialized care.
2. **Medical equipment and facilities**: Kisumu County can learn from Mulago Hospital's investment in state-of-the-art medical equipment and facilities. Adequate diagnostic and treatment equipment, as well as modern operating theaters, are crucial for providing high-quality care.
3. **Teaching and research**: Training healthcare professionals and conducting research are vital components of healthcare improvement.
4. **Emergency care**: Ensure the availability of well-equipped emergency departments with trained staff to provide immediate care to patients with life-threatening conditions. Quick access to emergency care is crucial in saving lives.
5. **Mental health services**: Exemplary mental health services, which is often an underserved area in healthcare. Mental health services should be integrated into the healthcare system.

6. **Infection control**: Implement rigorous infection control practices to prevent hospital-acquired infections. Proper sterilization of instruments and hand hygiene are crucial for patient safety.
7. **Waste management**: Proper waste management practices, including segregation and disposal of biomedical waste, are essential to maintain a safe and clean healthcare environment.
8. **Energy efficiency and sustainability**: Implementing energy-efficient practices and exploring sustainability initiatives reduce hospital's environmental impact. This includes using renewable energy sources and eco-friendly building designs.

AT UGANDA CANCER INSTITUTE (UCI)

Hon Speaker,

This is a summary of UCI's expertise and the key takeaways for the development of the JOOTRH cancer center.

UCI's mandate

UCI plays a critical role in Uganda's fight against cancer by:

1. Coordinating policy development
2. Overseeing cancer care, research, and training
3. Leading prevention, control, and management efforts.

Services offered

The Committee established that UCI offers a comprehensive range of services, including:

1. Preventive measures
2. Screening programs
3. Diagnostic procedures

4. Treatment options
5. Palliative care
6. Cutting-edge research focused on improving cancer prevention, diagnosis, and treatment

Unique funding model

Unlike MNRH whose budget is under the Ministry of Health, UCI has budgetary autonomy, allowing for greater flexibility in resource allocation.

Pre-tour discussions

The Committee and UCI held a productive boardroom meeting in which they covered various aspects of cancer care which included;

1. Treatment approaches
2. Infrastructure needs for specialized treatment and diagnostics
3. Cancer research initiatives
4. Infrastructure requirements for research labs, data management, and collaboration spaces
5. Quality control and radiation safety protocols
6. Evaluating radiation therapy infrastructure
7. Patient and staff safety during radiation treatment
8. Importance of patient-centered infrastructure
9. Outreach programs utilizing mobile clinics and telemedicine
10. Considerations for bunker construction

Lessons learned and best practices

During this exercise, the Committee noted some aspects in the UCI's operations that it thought could offer valuable insights for the JOOTRH cancer center.

By adopting these best practices and learning from UCI's experience, the Committee is inclined to believe that JOOTRH cancer center can effectively serve the needs of the Kisumu County community.

1. **Comprehensive care model**

   THAT it is needful to adopt a comprehensive care model which not only include treatment but also screening, early detection, prevention, and survivorship programs, ensuring a holistic cancer care.

2. **Community engagement**

   THAT it is very important to engage the local community. UCI's outreach programs are successful because they involve the community in cancer awareness and screening efforts.

3. **Infrastructure planning**

   THAT it is crucial to prioritize design and layout of the cancer center to create patient-friendly spaces, including comfortable waiting areas, counseling rooms, and support group spaces. Consideration should also be given to well-lit and soothing treatment areas.

4. **Telemedicine and mobile clinics**

   UCI understands and has taken into consideration the geographical challenges and thus implemented telemedicine infrastructure and mobile clinics to bring cancer care closer to remote areas. It’s success in this area thus far can serve as a blueprint.

5. **Partnerships**

   THAT it is needful to explore partnerships with local and international healthcare providers, NGOs, and research institutions to strengthen cancer center's capabilities.

6. **Training and capacity building**

   UCI's approach to continuous training and professional development is a valuable lesson. The Committee grasped that investing in training and capacity building for healthcare professionals is necessary to address the shortage of skilled personnel.

7. **Research and innovation**

   THAT it is important to encourage research and innovation within the cancer center. Supporting local research initiatives and clinical trials can help advance cancer care and improve treatment outcomes.

Challenge faced by UCI

Despite its overwhelming strengths, UCI faces a significant challenge which is the lack of public awareness and misconceptions surrounding cancer which has oftentimes led to delayed diagnosis. Out of Uganda's 34,000 reported cases, only 20% reach UCI, with children making up 10% of that number.

Recommendations

Hon Speaker,

In order to identify the most effective strategies to improve healthcare outcomes for the citizens of Kisumu County and the surrounding region, the Committee has made its proposals for recommendation's in two-part as seen in pages 28 and 29 of this report.

The first part involves recommendations emanating from the Committees' experience and lessons from Mulago National Referral Hospital, a leading medical facility in Uganda. The Committee has carefully assessed the expertise and insights offered by Mulago's medical professionals and made recommendations for their applicability to suit the needs of Kisumu County (**see page 28**).

The second part of the recommendations focuses on the experiences and lessons from Uganda Cancer Institute, a specialized center dedicated to cancer treatment and research. The Committee has proposed recommendations to be implemented to enhance cancer care services within Kisumu County (**see page 29**).

Acknowledgment

Hon Speaker,
Allow me this opportunity to thank all the Members and secretariat of this committee for their dedication prior, during and after this exercise and in the subsequent production of this report.

Equally, the Committee recognizes the Offices of the Speaker and the Clerk of the County Assembly for offering extreme support and a show of goodwill that culminated to success of this activities.

The Committee's immense gratitude goes to the managements of; Mulago National Referral Hospital led by the Executive Director Dr. Rosemary Byanyima and her deputy Dr. Kabira, Uganda Cancer Institute led by the Executive Director Dr. Jackson Orem and all their staff for the cordial welcome and full cooperation accorded to the Committee during the entire exercise.

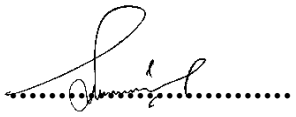
Hon Speaker,

This report has identified areas where the County can make immediate improvements and also long-term strategies for the betterment of our healthcare system.

It is therefore my pleasure on behalf of the Committee to recommend;

THAT this House adopts a report of Medical Services, Public Health and Sanitation Committee on the knowledge exchange between the Committee, Mulago National Referral Hospital and the Uganda Cancer Institute.

I would like to request Hon ……. to second.



Hon. Vincent Jagongo,
Chairperson.

ABREVIATIONS

MNRH	-	Mulago National Referral Hospital
JOOTRH	-	Jaramogi Oginga Odinga Teaching and Referral Hospital
UCI	-	Uganda Cancer Institute
ICU	-	Intensive Care Unit
KCRH	-	Kisumu County Referral Hospital
MoU	-	Memorandum of Understanding
MSPH&SC	-	Medical Services, Public Health and Sanitation Committee
CECM	-	County Executive Committee Member

CHAPTER ONE

1.1. PREFACE

1.1.1. Establishment and mandate of the Committee

Mr. Speaker and Honourable Members,

Medical Services, Public Health and Sanitation Committee was established pursuant to Orders Nos. 156, 158(3) and 193(1) of the Kisumu County Assembly Standing Orders and constituted vied the Selection Committee report of Tuesday 17th July, 2023.

1.1.2. Membership

The committee on Medical Services, Public Health and Sanitation Committee as was constituted pursuant to the Selection Committee report that was adopted by this House during the special sitting of July 17th July, 2023.

As at the time of undertaking this exercise, the committee constituted the following;

SRL NO.	NAME	POSITION
Members		
1.	**Hon Vincent Jagongo**	**Chairperson**
2.	**Hon Emily Oginga**	**Vice Chairperson**
3.	Hon Seth Okumu	Member
4.	Hon Nereah Okombo	Member
5.	Hon Kennedy Ooko	Member
6.	Hon Joachim Oketch	Member
7.	Hon Lumumba Owade	Member

Secretariat		
1.	Mr. Owen Ojuok	Clerk of the County Assembly
2.	Ms. Angelyne Obonyo	Clerk Assistant
3.	Mr. Abraham Odegi	Sergeant-at-arm
4.	Ms. Valery Achieng'	Hansard

1.1.3. Committee mandates

The Committee executes its mandate in accordance with the provisions Orders No. 193 (Second Schedule) of the Kisumu County Assembly Standing Orders from which it draws its mandate to look into and investigate on;

> ***All matters relating to County health services, including, in particular County health facilities and pharmacies, ambulance services, promotion of primary health care, licensing and control of undertakings that sell food to the public, cemeteries, funeral parlours and crematoria and refuse removal, dumps and solid waste disposal; housing; and sanitation.***

CHAPTER TWO

2.1. LEGAL FRAMEWORK

Mr. Speaker and Honourable Members,

The following statute formed the legal framework pre, during and post this exercise.

2.1.1. Article 185(3) of the Constitution of Kenya, 2010

Legislative authority of county assemblies

(3) A county assembly, while respecting the principle of the separation of powers, may exercise oversight over the county executive committee and any other county executive organs.

2.1.2. Section 8(1)(f) of the County Governments Act No.17 of 2012

Role of the county assembly

1) The county assembly shall -

f. perform any other role as may be set out under the Constitution or legislation.

2.1.3. Kisumu County Assembly Standing Orders No. 194(2)(c)

Which provides for preparation of annual workplans by Committees in each Fiscal Year.

2.1.4. Kisumu County Assembly Standing Orders No. 193(second schedule)

Mandates the Committee to investigate and inquire into-

All matters relating to County health services, including, in particular County health facilities and pharmacies, ambulance services, promotion of primary health care, licensing and control of

undertakings that sell food to the public, cemeteries, funeral parlours and crematoria and refuse removal, dumps and solid waste disposal; housing; and sanitation.

2.1.5. Kisumu County Assembly Standing Orders No. 193 (5) (g)

(5) The functions of a Sectoral Committee shall be to —

(g) make reports and recommendations to the County Assembly as often as possible, including recommendation of proposed legislation.

CHAPTER THREE

2.1. Overview history of Mulago National Referral Hospital

Mr. Speaker and Hon Members;

Mulago National Referral Hospital (MNRH) was founded in 1913 as a center for treatment of sexually transmitted diseases (STDs). It was originally located in Old Mulago, but in 1962, a new hospital was built in Upper Mulago. The new hospital was donated by Queen Elizabeth II of England, and it significantly increased the bed capacity. The hospital lies on approximately 85 hectares of land.

MNRH has since grown to become the largest and most prestigious publicly funded hospital, meaning that services for patients are free.

This said however, **it is still not entirely free for a patient to get treatment** because at time **patients are likely to buy medicines if the ward pharmacy is out of stock** of what is needed and **even pay for ultrasound and lab work if the doctor requests test which are not done at the hospital** (or in instances that the hospital lab machine is broken down).

The facility serves as the teaching facility for Makerere University College of Health Sciences, and it provides a wide range of specialized medical services, including surgery, cardiology, oncology, and obstetrics and gynecology.

Over the years, MNRH has played a major role in the development of healthcare in Uganda. It has trained thousands of health professionals, and it has provided care to millions of patients. MNRH has also been at the forefront of introducing new medical technologies and treatments to Uganda.

The Hospital operates under the Ugandan Ministry of Health as one of its departments.

MNRH is divided into two campuses:

Upper Mulago: a large 6 story building with 3 wings, is the main campus and focuses on specialized medical services, advanced surgical procedures, and inpatient care. It is equipped with modern infrastructure, including specialized wards and operating theaters, making it a hub for complex medical cases. It has a capacity of 750 beds.

Lower Mulago: primarily serves as an outpatient center, offering essential medical services, consultation, and diagnostics. It plays a crucial role in relieving the pressure on Upper Mulago by handling less severe cases and providing primary healthcare services with a capacity of 950 beds.

Mission:

The hospital's mission is to provide quality, comprehensive, and specialized healthcare services to all Ugandans and beyond. Mulago Hospital strives to be a center of excellence in medical research, education, and clinical care.

Vision:

The hospital's vision is to be a world-class healthcare facility, providing cutting-edge medical services and contributing to the development of medical science and technology in Uganda and the East African region.

Values:

Mulago National Referral Hospital is guided by a set of core values, which include:

- **Quality:** The hospital is committed to providing high-quality healthcare services to all patients.
- **Compassion:** Staff at Mulago Hospital prioritize compassionate care and support for patients.
- **Integrity:** They uphold ethical and professional standards in all aspects of their work.
- **Teamwork:** Collaboration and teamwork are essential in delivering the best possible care.
- **Innovation:** The hospital promotes a culture of continuous improvement and innovation in healthcare.

2.2. Governance Structure

The governance structure of Mulago National Referral Hospital comprises:

- **Ministry of Health:** The hospital operates under the oversight of the Ministry of Health in Uganda.

- **Hospital Management Board:** This board is responsible for the hospital's overall governance, policy formulation, and decision-making. It is composed of various stakeholders, including government officials, healthcare professionals, and patient representatives.
- **Hospital Administration:** The day-to-day operations are managed by a team of administrators, including the Hospital Director and other departmental heads.

2.3. Safety and Security Measures

Mulago National Referral Hospital has comprehensive safety systems in place to ensure the well-being of patients, staff, and visitors. Some of these measures include:

- **CCTV Coverage:** The hospital is equipped with a network of security cameras to monitor critical areas, ensuring a safe environment for everyone.
- **Fire Safety:** Mulago Hospital has a robust fire safety infrastructure, including fire alarms, extinguishers, and regular fire drills to respond effectively to potential emergencies.
- **Emergency Medical Services:** The hospital has a dedicated team of healthcare professionals trained to respond swiftly to medical emergencies within the premises.

2.4. Legal and Policy Framework

The operations of Mulago National Referral Hospital are governed by:

- **Ugandan Healthcare Laws:** The hospital operates in compliance with Uganda's healthcare laws and regulations, including Objective 20 of the Ugandan Constitution, which set standards for the provision of healthcare services.

- **Ministry of Health Policies:** The Ministry of Health provides policy guidelines that the hospital must adhere to, ensuring consistency with national healthcare goals.
- **Patient Rights:** The hospital respects and upholds the rights of patients, including their right to confidentiality, informed consent, and quality care.

2.5. Role of the facility in Uganda's Healthcare System

Mulago National Referral Hospital plays a pivotal role in Uganda's healthcare system. It serves as a cornerstone of healthcare delivery in the country, fulfilling several key functions:

- **Specialized care:** The hospital offers specialized medical services, including surgeries, pediatrics, cardiology, and oncology, which are often beyond the capabilities of regional healthcare facilities.
- **Training and research:** Mulago Hospital is a hub for medical education and research, training healthcare professionals and conducting medical research that advances the field in Uganda.
- **Referral center:** It serves as a referral hospital, receiving patients from lower-level healthcare facilities, offering advanced diagnostics, and specialized treatments.

Decision-making structure

The decision-making structure at Mulago National Referral Hospital is well-defined:

- **Hospital management board:** This board oversees the strategic direction of the hospital, formulates policies, and ensures compliance with regulations.

- **Hospital director:** The Hospital Director, appointed by the government, is responsible for the day-to-day administration and management of the hospital.
- **Departmental heads:** Each department within the hospital, such as Surgery, Internal Medicine, Obstetrics, and Gynecology, has its head responsible for department-specific decisions and management

2.6. Services offered

i. Internal Medicine

ii. Surgical Services

iii. Pediatrics & Child Health services

iv. Diagnostics

v. Finance and Administration

vi. Private Patients' Services.

2.7. Departments in the facility including specialized units and advanced medical equipment.

MNRH is committed to providing the best possible healthcare to its patients. The hospital's investment in advanced medical equipment and specialized units reflects this commitment.

1. **Department of surgery**
    - The Department of Surgery at Mulago Hospital is a vital component of the hospital's services, offering a wide array of surgical specialties,

including general surgery, orthopedic surgery, neurosurgery, and plastic surgery.

- Equipped with state-of-the-art surgical facilities, including modern operating theaters, surgical instruments, and monitoring equipment.
- Specialized units such as the Cardiothoracic Surgery Unit and the Pediatric Surgery Unit provide advanced surgical care.

2. Department of internal medicine

- The Department of Internal Medicine deals with the diagnosis and non-surgical treatment of complex medical conditions.
- This department comprises specialized units such as the Nephrology Unit (for kidney diseases), the Gastroenterology Unit (for digestive disorders), and the Cardiology Unit (for heart-related conditions).
- Advanced medical equipment includes ECG machines, echocardiography, endoscopy, and dialysis machines.

3. Obstetrics and gynecology department

- This department focuses on women's health, pregnancy, and childbirth.
- Wards and units include labor and delivery rooms, antenatal and postnatal units, and a neonatal intensive care unit (NICU) for premature and high-risk infants.
- Equipped with fetal monitors, ultrasound machines, and advanced labor and delivery equipment.

4. Pediatrics department

- The Pediatrics department caters to the healthcare needs of children, including specialized care for neonates and infants.
- Has a capacity of 30 beds and a mini-morgue.

- Features a Pediatric Intensive Care Unit (PICU) with advanced ventilators and monitoring systems.
- Equipped with pediatric specialists, incubators, and neonatal resuscitation equipment.

5. Radiology and imaging department

- The Radiology Department plays a crucial role in diagnostic and interventional procedures.
- Equipped with a range of imaging technologies, including MRI, CT scans, X-ray, ultrasound, and interventional radiology.
- Specialized equipment aids in accurate diagnosis and minimally invasive treatments.

6. Laboratory unit

- The hospital's laboratories provide comprehensive diagnostic services, including clinical chemistry, hematology, microbiology, and pathology.
- Equipped with cutting-edge laboratory equipment, automated analyzers, and expert staff.
- Supports disease diagnosis and monitoring treatment effectiveness.
- Patients are not required to have replacement donors in order to receive blood.

7. Intensive care unit

- The government funds 80% of the ICU bill
- Has a capacity of 27 beds 9 of which are common admissions and 18 are ICU.
- Has a inside the ward a fully insulated room for isolation purposes.
- Admissions here include major surgeries, concussions, neuro, abdominal surgeries among others

- Maximum stay is 9 days but the longest stay the facility has had is 1 year 3 months.

8. Oncology unit

- The Oncology Unit specializes in the diagnosis and treatment of cancer.
- Equipped with radiation therapy machines, chemotherapy suites, and cancer-related diagnostic equipment.
- Collaborates with other departments for comprehensive cancer care.

9. Emergency department

- The Emergency Department at Mulago Hospital is a critical service for urgent medical care.
- Equipped with resuscitation equipment, trauma bays, and a 24/7 team of healthcare professionals.
- Provides immediate care to patients with life-threatening conditions.

10. Orthopedic department

- This department specializes in the diagnosis and treatment of musculoskeletal conditions.
- Equipped with modern orthopedic surgery theaters, rehabilitation facilities, and advanced imaging for orthopedic conditions.

11. Psychiatry and mental health services

- The hospital offers mental health services, including inpatient and outpatient care.
- Equipped with psychiatric wards, counseling services, and medications for mental health conditions.
- A multidisciplinary team provides support for mental health patients.

12. Pharmacy and drug dispensing

- Mulago Hospital maintains well-stocked pharmacies that dispense medications prescribed by healthcare professionals.
- Ensures access to essential medications for patients throughout the hospital.

13. Advanced diagnostic services

- The hospital offers advanced diagnostic services, including molecular diagnostics and genetic testing.
- Equipped with advanced diagnostic machines for accurate and specialized testing.

The table below shows a list of some of the key departments and wards, along with their specialized units and advanced medical equipment.

Srl No.	Department	Specialized Units	Advanced Medical Equipment
1.	Accident and Emergency	Acute Care Unit, Burns Unit, Trauma Unit	CT scanner, MRI scanner, X-ray machines, ventilators, defibrillators
2.	Anesthesiology	Intensive Care Unit, Pain Management Unit	Anesthesia machines, ventilators, monitors, patient warmers
3.	Cardiology	Cardiac Catheterization Laboratory, Electrophysiology Laboratory	Cardiac catheterization equipment, electrophysiology equipment, echocardiography machines, stress test machines
4.	Dermatology	Dermatopathology Unit, Phototherapy Unit	Dermatoscopes, skin biopsy machines, phototherapy units
5.	Ear, Nose, and Throat (ENT)	Cochlear Implant Unit, Head and Neck Surgery Unit	Cochlear implant devices, microscopes, surgical instruments

6.	Endocrinology	Diabetes Clinic, Thyroid Clinic	Blood glucose meters, insulin pumps, thyroid function analyzers
7.	Gastroenterology	Endoscopy Unit	Endoscopes, endoscopic accessories
8.	Hematology	Blood Bank, Hematology Laboratory	Blood collection and processing equipment, hematology analyzers
9.	Infectious Diseases	HIV/AIDS Clinic, Tuberculosis Clinic	HIV/AIDS testing equipment, tuberculosis testing equipment, microscopes
10.	Internal Medicine	Nephrology Unit, Respiratory Unit, Rheumatology Unit	Dialysis machines, ventilators, rheumatologic testing equipment
11.	Neurosurgery	Neurointensive Care Unit, Pituitary Surgery Unit	CT scanner, MRI scanner, microscopes, surgical instruments
12.	Obstetrics and Gynecology	Labor and Delivery Unit, Neonatal Intensive Care Unit (NICU)	Fetal monitors, neonatal ventilators, incubators
13.	Oncology	Chemotherapy Unit, Radiotherapy Unit	Chemotherapy equipment, radiotherapy machines
14.	Ophthalmology	Cataract Surgery Unit, Glaucoma Surgery Unit	Microscopes, surgical instruments
15.	Orthopedics	Trauma Unit, Joint Replacement Unit	C-arm fluoroscopes, microscopes, surgical instruments
16.	Pediatrics	Pediatric Intensive Care Unit (PICU), Pediatric Oncology Unit	Neonatal ventilators, incubators, chemotherapy equipment
17.	Psychiatry	Child and Adolescent Psychiatry Unit,	Electroconvulsive therapy (ECT) machines, transcranial magnetic stimulation (TMS) machines

		Substance Abuse Treatment Unit	
18.	Radiology	CT Scan Unit, MRI Scan Unit, X-ray Unit	CT scanner, MRI scanner, X-ray machines
19.	Surgery	Cardiac Surgery Unit, Neurosurgery Unit, Orthopedic Surgery Unit	Microscopes, surgical instruments

2.8. Specialized medical services

MNRH offers a wide array of specialized medical services, catering to various healthcare needs. Key specialized services include:

Internal medicine

- The hospital's Department of Internal Medicine provides comprehensive care for adults with complex medical conditions.
- Specialized units focus on cardiology, nephrology, gastroenterology, and pulmonology, offering specialized diagnostics and treatment for diseases in these areas.
- Equipped with advanced diagnostic tools, including echocardiography, endoscopy, and hemodialysis machines.

Pediatrics

- The Pediatrics Department specializes in children's healthcare, including neonatal and pediatric care.
- Features a Pediatric Intensive Care Unit (PICU) with advanced ventilators and monitoring systems.
- Offers specialized care for pediatric medical and surgical conditions, ensuring the well-being of young patients.

Surgical services

- The Department of Surgery at Mulago Hospital conducts a wide range of advanced surgical procedures, including general surgery, orthopedic surgery, neurosurgery, and plastic surgery.
- Advanced operating theaters and state-of-the-art surgical equipment are available.
- The hospital houses specialized units such as the Cardiothoracic Surgery Unit and the Pediatric Surgery Unit.

Diagnostics

- The Radiology and Imaging Department provides essential diagnostic services, offering MRI, CT scans, X-ray, ultrasound, and interventional radiology.
- Advanced laboratory facilities perform clinical chemistry, hematology, microbiology, and pathology testing.

2.9. Advanced medical procedures

The facility is equipped to perform advanced medical procedures, including:

Laparoscopic surgeries

- The hospital offers minimally invasive laparoscopic surgeries for various conditions, reducing patient recovery time and minimizing scarring.

Organ transplants

- Mulago Hospital has the capacity to conduct organ transplant procedures, including kidney transplants, providing a lifeline for patients with end-stage organ failure.

Therapeutic endoscopy

- The endoscopy unit performs therapeutic endoscopic procedures, enabling the diagnosis and treatment of gastrointestinal conditions without invasive surgery.

2.10. Infection control and sanitation practices

Mulago Hospital places a high emphasis on infection control and sanitation practices to ensure the safety and well-being of patients, staff, and visitors. Key measures include:

- **Sterilization protocols:** The hospital employs strict sterilization protocols for surgical instruments and medical equipment to prevent infections.
- **Hand hygiene:** Encourages handwashing and the use of hand sanitizers throughout the hospital.
- **Isolation units:** There are isolation units to manage contagious diseases and prevent their spread within the hospital.

Waste management

There are 5 certified firms in Uganda that collect wastes from the hospitals for incineration.

2.11. Lessons learnt from MNRH

The Committee learnt the following lessons from MNRH;

1. **THAT** the facility has a well-defined decision-making structure, which ensures that decisions are made in a timely and efficient manner.

2. **THAT** the hospital has invested heavily in advanced medical equipment and specialized units, which enables it to offer a wide range of specialized medical services.

3. **THAT** the hospital places a high emphasis on infection control and sanitation practices to ensure the safety and well-being of patients, staff, and visitors.

4. **THAT** the fact that the hospital has 10 large washing machines and one large industrial iron machine is a good indication of the importance the facility places on cleanliness and hygiene.

Hon Speaker, it is sad to say that when the Committee carried out surveillance exercise in our facilities, we established that a good number of these facilities do not have washing machine and rely on casual workers to do hand laundry, which is extremely unhygienic.

2.12. Best Practices

1. **Specialized units**: Establishing specialized units within healthcare departments is beneficial for offering advanced and specialized care.
2. **Medical equipment and facilities**: Kisumu County can learn from Mulago Hospital's investment in state-of-the-art medical equipment and facilities. Adequate diagnostic and treatment equipment, as well as modern operating theaters, are crucial for providing high-quality care.
3. **Teaching and research**: Training healthcare professionals and conducting research are vital components of healthcare improvement.
4. **Emergency care**: Ensure the availability of well-equipped emergency departments with trained staff to provide immediate care to patients with

life-threatening conditions. Quick access to emergency care is crucial in saving lives.

5. **Mental health services**: Exemplary mental health services, which is often an underserved area in healthcare. Mental health services should be integrated into the healthcare system.
6. **Infection control**: Implement rigorous infection control practices to prevent hospital-acquired infections. Proper sterilization of instruments and hand hygiene are crucial for patient safety.
7. **Waste management**: Proper waste management practices, including segregation and disposal of biomedical waste, are essential to maintain a safe and clean healthcare environment.
8. **Energy efficiency and sustainability**: Implementing energy-efficient practices and exploring sustainability initiatives reduce hospital's environmental impact. This includes using renewable energy sources and eco-friendly building designs.

Hon Speaker, in 2021, the department brought to this assembly a budget, in which one of these facilities included an allocation for purchase of a laundry machine, which the Committee then vehemently refuted. This exercise has opened our eyes to what a great disservice the facility was dealt (**see annexed).**

CHAPTER FOUR

THE UGANDA CANCER INSTITUTE (UCI) – FRED HUTCH CANCER CENTRE

4.1. Overview of UCI

Mr. Speaker and Hon Members,

The Uganda Cancer Institute (UCI) is an agency that spearheads cancer control program in Uganda. It is a leading cancer treatment and research center located in Kampala, Uganda. Was established in 1967 as an institute for experimenting, which brought together various parties including Makerere University. UCI has been at the forefront of providing comprehensive cancer care and conducting groundbreaking cancer research in Uganda and the East African region.

4.1.1. Mandates

UCI has three major mandates;

1. Coordinate policy development
2. Coordinate cancer care, research and training.
3. Coordinate prevention, control and effectively management of cancer.

4.1.2. Services

UCI offers a wide range of cancer services, including;

1. prevention,
2. screening,
3. diagnosis, treatment,
4. palliative care.
5. The institute also has a strong research program, focused on developing new and innovative ways to prevent, diagnose, and treat cancer.

4.1.3. Budgeting

Unlike MNRH budget which is under the ministry of health, UCI enjoys budget autonomy as its budget is different from that of the ministry.

4.1.4. Milestones

Currently, the Institute developed an MOU under the East African Center of Excellence for the construction of the Oncology center, whose construction is underway (**see annexed**).

4.2. UCI approach to cancer care

UCI adopts a holistic approach to cancer care, focusing on the physical, emotional, and social well-being of each patient. UCI's team of experienced and compassionate doctors, nurses, and other healthcare professionals work

together to provide patients with the best possible care, emphasizing the following key aspects:

- Multidisciplinary Care: employed a team of specialized oncologists, surgeons, radiologists, nurses, and support staff who collaborate to create personalized treatment plans for each patient.
- Early Detection: promotes early cancer detection through screening programs and awareness campaigns to identify cancer at its earliest stages when treatment outcomes are most favorable.
- Treatment Modalities: The institute offers a wide range of treatment modalities, including surgery, chemotherapy, radiation therapy, and targeted therapies.
- Palliative Care: provides palliative care to enhance the quality of life for patients facing advanced-stage cancer.

4.2.1. Design and infrastructure requirements for specialized treatment and diagnostics

UCI's infrastructure is designed to meet the specific needs of cancer diagnosis and treatment. It boasts a modern facility with state-of-the-art equipment for cancer treatment and diagnosis.

Some of the **key design and infrastructure requirements for specialized cancer treatment and diagnostics include**;

- Radiation Therapy: state-of-the-art radiation therapy equipment, including linear accelerators, to deliver precise radiation treatments. Specialized rooms are designed with lead shielding and safety measures to protect both patients and staff.

- Diagnostic Imaging: modern imaging facilities, including CT scanners, MRI machines, Linear Accelerator (LINAC) machine and PET/CT scanners for accurate cancer diagnosis and staging.
- Surgical Suites: equipped with advanced surgical suites for cancer surgeries, with integrated technology to support minimally invasive procedures.
- Inpatient and Outpatient Facilities: The institute has dedicated inpatient wards and outpatient clinics to provide a continuum of care to cancer patients.

4.3. Cancer research initiatives and collaborative research infrastructure

4.3.1. Overview of cancer research initiatives

UCI is actively involved in cancer research initiatives, focusing on improving treatment outcomes and understanding the unique cancer patterns in Uganda and the region. This includes:

- Clinical Trials: it conducts clinical trials to evaluate the efficacy of novel cancer therapies and treatments, ensuring patients have access to cutting-edge care.
- Collaboration with international organizations: collaborates with international cancer research organizations and institutions to share knowledge, resources, and best practices.

4.4. Infrastructure

4.4.1. Requirements for research labs, data management, and collaborative spaces

UCI has a strong research program focused on developing new and innovative ways to prevent, diagnose, and treat cancer. The institute's research program is supported by a team of experienced researchers and a network of collaborators around the world.

Some of the key infrastructure requirements for cancer research include:

- Well-equipped research laboratories
- Access to advanced research equipment and technologies
- Collaborative spaces for researchers to work together
- A supportive environment for innovation and creativity

In addition, to support cancer research, the institute has:

- Research Laboratories: equipped with well-equipped research laboratories for basic and translational research, allowing scientists to conduct experiments and analysis.
- Data Management: a robust data management infrastructure to store and analyze patient data, research findings, and clinical trial data securely.
- Collaborative Spaces: dedicated spaces for researchers and clinicians to collaborate, exchange ideas, and work on joint projects.

4.4.2. Quality control and radiation safety infrastructure

The Institute has a robust quality control and radiation safety infrastructure in place to ensure the safety and well-being of patients and staff. The institute's

quality control program includes regular inspections and maintenance of all equipment, as well as training for staff on best practices.

Such radiation safety infrastructure includes:

- Well-designed radiation therapy rooms with adequate shielding
- Regular safety drills and training for staff
- A comprehensive radiation safety plan

4.4.3. Evaluating the infrastructure for radiation therapy

A strong emphasis has been placed on radiation safety and quality control through;

- Radiation therapy rooms: designed to minimize radiation exposure to surrounding areas and ensure precision during treatment delivery.
- Safety measures: The institute strictly adheres to international safety standards for radiation therapy, with regular safety audits and quality control checks.

4.4.4. Importance of infrastructure in ensuring patient and staff safety during radiation treatments

Proper infrastructure and safety measures are essential to protect the health and safety of both patients and staff during radiation therapy. UCI's commitment to quality infrastructure ensures that radiation treatments are delivered with precision, minimizing risks and side effects by;

1. Investing in adequate infrastructure to ensure the safety of patients and staff during radiation treatments. Radiation therapy machines are powerful devices that can emit harmful radiation if not properly used.

2. Radiation therapy rooms that are designed to minimize the risk of radiation exposure to patients and staff. The rooms are well-shielded to protect staff and the surrounding environment from radiation.
3. Having staff who are highly trained in radiation safety procedures. The staff regularly undergo safety drills and training to ensure that they are able to safely operate and maintain radiation therapy machines

4.4.5. Patient-centered infrastructure

As a comprehensive cancer center, UCI is dedicated to providing holistic care to cancer patients, including infrastructure and support services that focus on the well-being of the patients. These include;

1. **Patient care and support services**: the facility offers a range of services to support cancer patients, including counseling, survivorship programs, and psychosocial support. The infrastructure supporting these services includes dedicated counseling rooms, support group meeting spaces, and facilities for physical and occupational therapy. The counseling services help patients and their families cope with the emotional and psychological aspects of cancer diagnosis and treatment. Survivorship programs focus on helping patients transition to life after cancer treatment, emphasizing healthy living and psychological support.

2. **Design of patient-friendly spaces**: significant emphasis has been placed on designing patient-friendly spaces. The layout and design of the center prioritize the comfort and well-being of patients. Waiting areas are designed to be comfortable and calming, with natural light and green spaces to create a healing environment. The treatment rooms are equipped with advanced medical technology while maintaining a soothing ambiance.

3. **Psychosocial support**: the infrastructure includes areas for psychosocial support, such as therapy rooms, meditation spaces, and recreational

areas. These spaces are vital for the emotional well-being of patients and their families.

4.4.6. Infrastructure for outreach and remote services

UCI recognizes the importance of reaching underserved populations and providing cancer care to remote areas through outreach programs and mobile clinics. The institute has a number of outreach and remote services programs in place to reach patients in rural and underserved areas.

- Mobile Clinics: operates a fleet of mobile clinics that travel to rural areas to provide cancer screening and treatment services.
- Telemedicine: offers telemedicine services to patients in remote areas. This allows patients to consult with UCI specialists remotely, without having to travel to Kampala.

4.4.7. Mobile clinics and telemedicine infrastructure and its role in expanding access to cancer care

Mobile clinics and telemedicine play an important role in expanding access to cancer care in Uganda. By providing services in rural and underserved areas, these programs help to ensure that all Ugandans have access to quality cancer care.

4.5. Other findings

Mr. Speaker and Hon Members,

During the guided tour at the facility, the Committee established as follows;

4.5.1. Pediatric cancer unit

1. Focuses on treatment of children (below 18 years) with cancer and non-cancerous diseases, blood problem and sickle cell.
2. There is a space for daycare and a separate space for those that need hospitalization.
3. Traffic is around 40-60 children per day for 5 working days.
4. Because of the big number, the days have been divided into tumor specific. Meaning specific cases are dealt with at specific days except in cases of emergency.
5. There are available to the unit a team of trainees doing fellowship on oncology, nursing team, medical officers and the supervisors.
6. All the drugs needed for the patients are available as the budget is centralized within the Uganda Cancer Institute, thus allowing them to directly arrange for their drugs directly with suppliers. They do not suffer from stockouts.
7. Services are free.

4.5.2. Radiation and oncology

1. This arm uses machines, equipment and drugs to treat cancer.
2. UCI has 4 highly specialized bunkers for purposes of radiation and oncology.
3. There are two machines here called Linear Accelerator (LINAC) that is specially designed for patients undergoing radiation.
4. The machine:
    - Is huge enough for the patient to go in and out in the required position. It displays images of particular areas of treatment, the images are electronically sent to medical physicists who use them images to draw a plan for whatever dose that is needed for that particular area. The information from the Plan room is subjected to deliberations by a team of doctors who sit down to critic the plan

submitted so as to ascertain whether it is the best plan or not, and what needs to be adjusted.

- Performs 3 functions; a cancer treatment machine, an X-ray machine and a CT-scan machine (You can do onboard imaging; x-rays, CT-scan).
- Enable treatment of surface tumors, surface cancers to deeply seated cancers as it has different energies.
- Has better outcome results in patients without side effects.

4.6. Challenges

Despite its many strengths, UCI faces one major challenge;

1. Lack of awareness and myths that make people shy away from seeking early medication. For example, out of 34,000 cancer cases reported in Uganda, UCI only receives 20% out of which 10% are children

4.7. Lessons learned

4.7.1. Purchase and maintenance of machines

The team at UCI recommended the following for maintenance of such machines;

1. **THAT** experts with knowledge of what is required must be present during specification process prior to purchasing of these machines.

2. **THAT** maintenance should be included as part of the clauses when buying as the cost of their maintenance is quite high (between 200,000 to 500 000 US dollars per year). UCI included a ten-year maintenance plan at the time of buying the machines.

3. **THAT** negotiation is very important and should be done at the beginning with utmost keenness as it is where the service and maintenance clause can be factored in, in the contract.

4.7.2. Construction of the bunkers

The Committee established that when constructing a bunker, the following factors are to be considered;

1. **THAT** upfront planning for the type of machine to put in a particular bunker is extremely important because after construction, it may not be possible to bring in a machine which cannot be accommodated in a particular bunker. For example, you cannot build a bunker aimed at accommodating a 15MV machine and then purchase a 20MV machine and expect it to fit because it will not.

2. **THAT** it is recommended to build huge bunkers which can accommodate the highest MV machine such that it can still house a lower MV machine. During their construction, UCI planned for 50 years and built their bunkers to accommodate any updates as far as technology is concerned.

3. **THAT** when building the structure for bunkers, it is advisable to ensure pouring of concrete is done in one swim. Any break would lead to cracks in the structure, which will lead to decline of clearance certification from the International Atomic Energy Agency. In the case of UCI concrete was poured for 48 hours non-stop, the walls have a thickness of 2.5 meters of concrete.

4.8. Key lessons UCI has learned through its experience in cancer care infrastructure planning

The following are key lessons that the Institute has learned through its experience in cancer care infrastructure planning:

- **Flexibility**: Being adaptable and open to changes in the healthcare landscape is crucial. They have built their health infrastructures envisioning new technologies and evolving treatment protocols.
- **Community engagement**: Involving local communities in the planning and execution of outreach programs which has enhanced their effectiveness and sustainability.
- **Partnerships**: Collaborating with international organizations, NGOs, and academic institutions has provided access to expertise and resources for infrastructure development.
- **Research and innovation**: Staying at the forefront of cancer care requires investing in research infrastructure and fostering innovation in treatment and diagnostics.

4.9. Action plan for collaboration between JOOTRH and UCI

Since the County Government of Kisumu is in the process of constructing a cancer center at JOOTRH, the following elements were deliberated to and agreed to form baseline for collaboration between the UCI and JOOTRH cancer cneter.

- Infrastructural development.
- Information sharing.
- Capacity building.
- Research collaboration.
- Outreach and remote services.

4.10. Best practices for emulation

In its strife to establish a cancer center at JOOTRH, the County Government can emulate the following best practices;

1. **Comprehensive care model**: Kisumu County should adopt a comprehensive care model like UCI, which includes not only treatment but also screening, early detection, prevention, and survivorship programs. This approach ensures holistic cancer care.
2. **Community engagement**: Engaging the local community is crucial. UCI's outreach programs are successful because they involve the community in cancer awareness and screening efforts. Kisumu County should similarly involve community leaders, organizations, and local healthcare providers in their initiatives.
3. **Infrastructure planning**: Learning from UCI, Kisumu County should prioritize the design and layout of the cancer center to create patient-friendly spaces, including comfortable waiting areas, counseling rooms, and support group spaces. Consideration should also be given to well-lit and soothing treatment areas.
4. **Telemedicine and mobile clinics**: Considering the geographical challenges, Kisumu County can implement telemedicine infrastructure and mobile clinics to bring cancer care closer to remote areas. UCI's success in this area can serve as a blueprint.
5. **Partnerships**: UCI collaborates with international organizations and academic institutions to access resources and expertise. Kisumu County should explore partnerships with local and international healthcare providers, NGOs, and research institutions to strengthen their cancer center's capabilities.
6. **Training and capacity building**: Invest in training and capacity building for healthcare professionals to address the shortage of skilled personnel.

UCI's approach to continuous training and professional development is a valuable lesson.

7. **Research and innovation**: Encourage research and innovation within the cancer center. Supporting local research initiatives and clinical trials can help advance cancer care and improve treatment outcomes.

CHAPTER FIVE

RECOMMENDATIONS

Mr. Speaker and Hon Members,

In order to identify the most effective strategies to improve healthcare outcomes for the citizens of Kisumu County and the surrounding region, the Committee makes a two-part recommendation.

The first part involves recommendations emanating from its experience and lessons from the Mulago National Referral Hospital, a leading medical facility in Uganda. The Committee has carefully assessed the expertise and insights offered by Mulago's medical professionals and made recommendations for their applicability to suit the needs of Kisumu County.

The second part of the recommendations focuses on the experiences and lessons at the Uganda Cancer Institute, a specialized center dedicated to cancer treatment and research. The Committee has proposed recommendations to be implemented to enhance cancer care services within Kisumu County.

5.1. Recommendations from lessons learnt at MNRH

Following its activities at the MNRH, the Committee thus recommends;

1. **THAT** County should increase budget allocation for medications and have stringent agreements for timely supply of drugs in order to improve the availability of essential medications in its healthcare facilities.

2. **THAT** the County government should increase government funding for healthcare to enable it improve the availability of healthcare services, renovate/rebuild existing facilities, train healthcare professionals, upgrade its medical equipment, including diagnostic tools, surgical instruments, and advanced treatment facilities. This will enhance the quality of care provided.

3. **THAT** the county should invest in emergency care enhancement to ensure the availability of well-equipped emergency departments with trained staff for prompt response to critical medical cases.

4. **THAT** mental health services be integrated into the healthcare system thus ensuring access to psychiatric care and counseling for mental health patients. Currently Kisumu only has mental care services at KCRH whose state is more than meets the eye.

5. **THAT** the department of Medical Services, public Health and Sanitation strive to engage the local community, community leaders, and healthcare providers in the planning and development of healthcare services. Local input is essential for understanding community healthcare needs.

6. **THAT** the department of medical services should invest more on the hygiene of the facilities. A clean and hygienic healthcare environment is essential for preventing infections and ensuring the safety of patients, staff, and visitors.

5.2. Recommendations from UCI

Hon Speaker,

Since the County is establishing a cancer center at JOOTR and in line with the earlier mentioned baseline for collaboration the committee therefore recommends as follows to the County Government and specially department of Medical Services, Public Health and Sanitation (MSPH&S);

1. **THAT** the CECM responsible for MSPH&S should carry out a thorough research on the quality and take into consideration all factors to consider as detailed in, and beyond this report in the ongoing construction cancer center at JOOTRH.

2. **THAT** the CECM responsible for MSPH&S should consider reaching out to UCI and other leading cancer centers on infrastructural development, sharing expertise and resources to improve the facility under construction and its expected services.

3. **THAT** the department of MSPH&S should establish a secure platform for information sharing between the two institutions, ensuring that the latest research, treatment protocols, and patient data are accessible to both.

4. **THAT** prior to operationalization of the cancer center at JOOTRH, the department of MSPH&S should invest in training and education for healthcare professionals in Kisumu County on cancer diagnosis and treatment. This will ensure that patients have access to high-quality cancer care at all levels of the healthcare system.

5. **THAT** the department of Medical Services, Public Health and Sanitation should consult closely with UCI and other leading cancer centers, develop a comprehensive cancer research program and cancer control plan that addresses all aspects of cancer prevention, diagnosis, treatment, and

palliation. This plan should be submitted to this house within 12 months of adoption of this report.

6. **THAT** the department of Medical Services, Public Health and Sanitation and the County should partner with international cancer research organizations to share knowledge and resources, and to conduct joint research studies aimed at advancing cancer research and improve treatment outcomes in Kisumu County.

7. **THAT** the department of Medical Services, Public Health and Sanitation should develop, and submit to this Honourable House within 90 days of adoption of this report, a sustainable funding model for the underway cancer center at JOOTRH that will ensure all patients have access to affordable and high-quality cancer care, regardless of their financial status.

8. **THAT** the County should put in place a multidisciplinary team of healthcare professionals, promoting early cancer detection, offering a wide range of treatment modalities, and providing palliative care.

CHAPTER SIX

CONCLUSION

Mr. Speaker and Hon Members,

Such spaces, as knowledge exchange programs, offer strategic opportunity to learn from the best. By examining a successful organization's structure, practices, and achievements, participants are able to gain valuable insights into efficient decision-making, advanced medical techniques, and the importance of well-equipped facilities and specialized units.

Adaptation of these best practices can potentially lead to improved service quality, streamlined processes, cost savings, and even innovation in healthcare delivery.

The Committee believes that the knowledge it gained from MNRH provides valuable insights for improving Kisumu County's healthcare system. Implementing the recommended best practices will enhance service quality, accessibility, and overall patient care.

It is now my pleasure on behalf of the committee, to present this motion:

THAT this House adopts a report of Medical Services, Public Health and Sanitation Committee on the knowledge exchange between the Committee, Mulago National Referral Hospital and Uganda Cancer Institute.

I call upon Hon … to second.

APPENDICES

Appendix 1: Letter to Mulago National Referral Hospital

P.O Box 86-40100, Kisumu
Email: kisumuassembly@gmail.com

Email: owenojuok@gmail.com
Web: www.kisumuassembly.go.ke

County Assembly of Kisumu

OFFICE OF THE CLERK

REF: CAK/CGK/RU/MH/28/8/23 (1) **DATE: 28/08/2023**

To Executive Director,
Mulago National Referral Hospital,
P.O Box 7051,
Kampala Uganda.

Dear Madam,

RE: REQUEST TO CARRY OUT STUDY TOUR AT MULAGO NATIONAL REFERRAL HOSPITAL FROM 12TH OCTOBER TO 17TH OCTOBER, 2023.

The above matter refers;

On behalf of the Kisumu County Assembly Medical Services, Public Health and Sanitation Committee, I am writing to formally request the opportunity to visit Mulago National Referral Hospital. The committee is dedicated to the enhancement of healthcare services, public health, and sanitation within our county, and we believe that a visit to your esteemed institution would provide us with invaluable insights and experiences to help us achieve our goals.

We are particularly interested in;

1. Understanding your hospital's strategies for managing patient care, advanced medical procedures, infection control, medical research, public health initiatives, sanitation practices, and waste management.
2. Exploring the hospital's cancer treatment programs, advanced medical procedures, patient care protocols, and innovative approaches to addressing healthcare challenges.
3. Discussing the potential for collaboration and knowledge exchange between our institutions in the field of oncology.

Kisumu County is currently in the process of establishing a top-tier cancer center and given your facility's expertise in cancer treatment and research, we believe that this visit to your facility would greatly enrich our understanding of best practices in cancer care and management and excited about the prospect of learning from your achievements in cancer care and incorporating these insights into our efforts.

We also believe that this exercise will enable us identify best practices that can be adapted to benefit our own county.

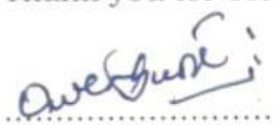
We kindly request your assistance in coordinating the logistics for our visit, including scheduling meetings, arranging tours of the facility including the cancer research center, and facilitating discussions with hospital administrators and medical experts.

Our preferred dates for the visit are from **Thursday 12th October, 2023 to Tuesday 17th October, 2023,** but we are flexible and willing to adjust our schedule to align with your availability.

For any inquiry or clarification, kindly reach our Committee clerk, Ms. Obonyo Angelyne, on **+254 711 141495.**

We look forward to the opportunity to deepen our understanding of your exceptional healthcare practices, and to your kind response.

Thank you for considering our request.



.....

OWEN OJUOK.

CLERK OF THE ASSEMBLY.

Cc:

i. Hon. Elisha J Oraro - Speaker of the County Assembly

Appendix 2: Response from Mulago National Referral Hospital

TELEPHONE: +256-41-554008/1
FAX: +256-414-5325591
E-mail: admin@mulago.or.ug
Website: www.mulago.or.ug
IN ANY CORRESPONDENCE ON THIS SUBJECT PLEASE QUOTES NO: D/GC/138

MULAGO NATIONAL REFERRAL HOSPITAL
P.O. Box 7051
KAMPALA, UGANDA

THE REPUBLIC OF UGANDA

31st August, 2023

Clerk of the Assembly
Office of the Clerk
County Assembly of Kisumu
P. O. Box 86-40100
Kisumu – Kenya

PERMISSION TO CARRY OUT STUDY TOUR AT MULAGO NATIONAL REFERRAL HOSPITAL FROM 12TH OCTOBER TO 17TH OCTOBER 2023

The above subject refers;

This is to inform you that permission has been granted for you to visit and carry out a study tour in the above stated dates in our Hospital.

Mulago National Referral Hospital (MNRH) offers arrange of services. This include; Pediatric, Surgery and Internal Medicine services with all their subspecialties. The diagnostic services include Radiology, Clinical Laboratory, Pathology and Nuclear Medicine.

Our emergency services include Acute Care Unit for Pediatrics, Accident & Emergency (commonly known as Causality) for surgical cases and Medical Emergency Unit for adults and these are operational 24/7. We also run wide range of specialized clinics on designated days.

I am sure that your visit to our facility will greatly enrich your understanding in delivery of health care services and management.

The Office of the Deputy Executive Director will coordinate this activity.

Dr. Byanyima Rosemary
AG. EXECUTIVE DIRECTOR

EXECUTIVE DIRECTOR
MULAGO NATIONAL REFERRAL HOSPITAL
P.O. BOX 7051, KAMPALA
MULAGONATIONALREFERRALHOSPITAL

Copy to: Deputy Executive Director
: Assistant Commissioner Nursing
: Principal Hospital Administrator

Appendix 3: Program of activities for the knowledge exchange between the Committee and MMNRH

DAY	TIME	ACTIVITY	RESPONSIBLE PERSON
ONE **Objective of the day;** • To leverage on the visit to improve the quality, safety, and efficiency of healthcare services in Kisumu County and enhance the healthcare system's overall performance.	10:00 AM - 12:00 PM	**Boardroom meeting:** **Introduction and Overview**	
		Introductions • Introduction to the program and objectives for the visit.	• Hon Vincent Jagongo • Deputy Executive Director
		Overview of Mulago National Referral Hospital: • Brief presentation on the history, mission, vision, values, and governance structure of the hospital.	• Deputy Executive Director and his team
		Safety and security measures; • Presentation on the hospital's safety systems, including CCTV coverage, fire safety, and emergency medical services.	
		Policy Framework and Legal Aspects	

		• Presentation on the legal and policy frameworks governing the operations of Mulago National Referral Hospital. • Discussion on the role of the hospital in Uganda's healthcare system.	
		Management and Governance Structure • Understanding the decision-making structure at the hospital, including the Hospital Management Board and the roles of different management teams.	
	2:00 P.M - 4:00 PM	**Tour of the facilities**	• Deputy Executive Director and his team
		Guided tour of the Upper Mulago • Visit to key departments and wards to observe healthcare facilities, including specialized	

		units and advanced medical equipment.	
TWO **Objective of the day:** • To enhance the quality of medical services, expand medical capabilities, and improve healthcare infrastructure, safety, and sustainability in Kisumu County, ultimately benefiting the health and well-being of the local community.	10:00 AM - 12:00 PM	**Boardroom meeting:** **In-Depth Understanding and Specialized Services** **Introduction to specialized services offered** • Detailed discussion on the specialized medical services offered at the hospital, with a focus on Internal Medicine, Pediatrics, Surgical Services, and Diagnostics. **Advanced Medical Procedures** • Discussion on advanced medical procedures available at Mulago, including laparoscopic surgeries, organ transplants, and therapeutic endoscopy. • Infection Control and Sanitation Practices	• Deputy Executive Director and his team

		• Waste Management and Sustainability Initiatives	
	12:00 P.M - 1:30 PM	**LUNCH BREAK**	
	2:00 P.M - 4:00 PM	**Action Plan and Closing Remarks** • Action plan for collaboration, emphasizing infrastructure development and information sharing.	• Committee Members • Deputy Executive Director, MNRH and his team
		Plenary session • Engage in a question and answer session with the MNRH team	
		• Vote of thanks	• Owen Ojuok - Clerk of the County Assembly
		• Closing remarks	• Hon Elisha Oraro - Speaker of the County Assembly • Hon Vincent Jagongo • Deputy Executive Director MNRH.

THREE **Objectives of the day:** • To gain insights into the operations, best practices, and infrastructure of the Uganda Cancer Institute. • To identify key factors to consider while establishing a cancer center at Jaramogi Oginga Teaching and Referral Hospital in Kisumu County.	10:00 AM - 12:00 PM	**Boardroom meeting:** **Welcome and Orientation** • Welcome address and introduction to the program. • Overview of the Uganda Cancer Institute and its mission. **Discussion with UCI Medical team** • UCI approach to cancer care. • Design and infrastructure requirements for specialized treatment and diagnostics. **Presentation on Cancer Research and Collaborative Research Infrastructure** • Overview of cancer research initiatives, including clinical trials and collaboration with international organizations. • Discuss the infrastructure requirements for research labs,	• Executive Director UCI and his team

		data management, and collaborative spaces.	
		Quality Control and Radiation Safety Infrastructure • Evaluating the infrastructure for radiation therapy, including the design of radiation therapy rooms, safety measures, and shielding. • Importance of infrastructure in ensuring patient and staff safety during radiation treatments.	
	12:00 P.M - 1:30 PM	**LUNCH BREAK**	
	2:00 P.M - 4:00 PM	**Guided tour of the UCI** • To the departments, including clinical areas, diagnostic facilities, and patient rooms. • Assess the infrastructure and layout of clinical and research areas, considering the	•

		adaptability for various cancer treatments and patient needs. • To observe the infrastructure and design considerations	
FOUR **Objectives of the day** • To identify best practices and explore collaborative opportunities with the Uganda Cancer Institute for the development of a cancer center at Jaramogi Oginga Teaching and Referral Hospital in Kisumu County.	10:00 AM - 12:00 PM	**Boardroom meeting: Understanding the infrastructure of a cancer center** **Patient-Centered Infrastructure** • Explore the infrastructure supporting patient care and support services, including counseling and survivorship programs. • Discuss the design of patient-friendly spaces and the layout of areas for psychosocial support. **Infrastructure for Outreach and Remote Services** • Understanding the infrastructure and technology	• Executive Director, UCI and his team

• To discuss the challenges and solutions related to cancer care infrastructure.		used for outreach programs and mobile clinics. • Mobile Clinics and telemedicine infrastructure and its role in expanding access to cancer care.	
		Infrastructural Challenges • Share experiences, challenges, and best practices in cancer care infrastructure planning.	
	12:00 P.M - 1:30 PM	**LUNCH BREAK**	
	2:00 P.M - 4:00 PM	**Action Plan and Closing Remarks** • Action plan for collaboration, emphasizing infrastructure development and information sharing.	• Committee Members • Executive Director, UCI and his team
		Plenary session • Engage in a question and answer session with the Uganda Cancer Institute team.	

		• Vote of thanks	• Owen Ojuok - Clerk of the County Assembly
		• Closing remarks	• Hon Elisha Oraro - Speaker of the County Assembly • Hon Vincent Jagongo • Executive Director UCI.

Appendix 4: Committee minutes

COUNTY GOVERNMENT OF KISUMU

COUNTY ASSEMBLY OF KISUMU

P.O BOX 86-40100, KISUMU

MINUTES OF THE MEDICAL SERVICES, PUBLIC HEALTH AND SANITATION COMMITTEE MEETING HELD ON THURSDAY 7TH MARCH, 2024 AT 1100HRS IN THE ASSEMBLY CHAMBER.

MEMBERS PRESENT

1. **Hon Vincent Jagongo - Chairperson**
2. Hon Nereah Okombo - Member
3. Hon Seth Okumu - Member

Secretariat present

1. Angelyne A. Obonyo - Clerk Assistant
2. William Ogada - Serjeant at arm
3. Jacklyne Otieno - Hansard

MIN NO.1/CAK/MSPH&S/MAR/2024 PRAYER

The meeting was called to order at 1125hrs by a word of prayer from the Vice Chairperson, Hon Nereah Okombo.

MIN. NO.2/CAK/MSPH&S/MAR/2024 PRELIMINARIES

i. **Apology-**

The following Members registered their apologies;

1. Hon Emily Oginga - Vice Chair
2. Hon Kennedy Ooko - Member
3. Hon Joachim Oketch - Member
4. Hon Lumumba Owade - Member

ii. **Communication from The Chairperson**

The Vice Chairperson welcomed Members to the Committee's 1st meeting of the Third Session, held on Thursday 7th March, 2024.

MIN. NO.3/CAK/MSPH&S/MAR/2024 ADOPTION OF AGENDA

The agenda was adopted as below;

1. Prayers.
2. Preliminaries.
   i. Apologies.
   ii. Communication from the Chair.
3. Adoption of the Agenda.
4. **Deliberating on the draft report on the study tour to Mulago National Hospital.**
5. **A.O.B**
6. Adjournment.

The agenda was adopted without amendment upon being proposed by Hon Seth Okumu and seconded by Hon Nereah Okombo.

MIN.NO.4/CAK/MSPH&S/MAR/2024 DELIBERATING ON THE DRAFT REPORT ON THE STUDY TOUR TO MULAGO NATIONAL HOSPITAL

The Chairperson reminded Members that the report had been circulated beforehand and asked them to submit their suggestions for amendments, additions, or removals. However, members acknowledged that they hadn't had time to review the report and requested more time.

Resolution

Consequently, the committee decided to:

1. Allow members more time to review the report and submit their feedback before the next meeting on Monday,11th March, 2024.
2. Adopt the report at the next meeting.

MIN.NO.5/CAK/MSPH&S/MAR/2024 A.O. B

1. **Audit Reports of Health Facilities:**
   Hon. Seth Okumu raised concerns about negative audit opinions (adverse or disclaimer) for health facilities that he noted during interrogation of the reports with the Committee on PIC/PAC. He invited the attention of

Members and how the Committee can come through to assist these facilities to realize better opinions.

Resolution
The Committee resolved to invite In-charges and Medical Superintendents of referral/county hospitals for a meeting on March 15th, 2023, to:

i. Discuss reasons behind negative audits and find possible solutions.
ii. Explore challenges with the Health Facilities Improvement Act, 2021 and potential amendments for better implementation.

2. **Rescheduled Radio Talk Shows:**
The Chairperson acknowledged that the planned radio shows with Network for Adolescent and Youths of Africa (NAYA) during recess, could not happen due to county assembly workload.

Resolution
The Committee resolved;

i. To have the Clerk confirm with NAYA if the opportunity is still available.
ii. If available, begin the talk shows on Friday 15th March, 2024, with 4 committee members per show.

3. **Review and Presentation of Committee Reports:**
The Clerk informed the committee of four additional reports requiring review, adoption, and presentation to the House.

Resolution
The Committee resolved to present the reports at a rate of two per month, starting with the one on the day's agenda

MIN. NO.8/CAK/MSPH&S/MAR/2024 **ADJOURNMENT AND DATE OF NEXT MEETING**

There being no any other business for consideration, the meeting adjourned at 1200hrs until Monday 11th March, 2024 at 1400hrs.

Minutes approved by;

Hon Vincent Jagongo,

Committee Chairperson.

Angelyne A. Obonyo,

Committee

Appendix 5: Pictorials

The Committee posing for a photo at the Mulago National Referral Hospital

The Committee chairperson Hon Vincent Jagongo (right) receiving the facilities annual report from the deputy director Mr. Kabira.

The committee gearing up to enter into the facility's intensive care unit

MNRH Kitchen

The facility's laundry area

Back-up generators at MNRH

Inside the automation lab at MNRH

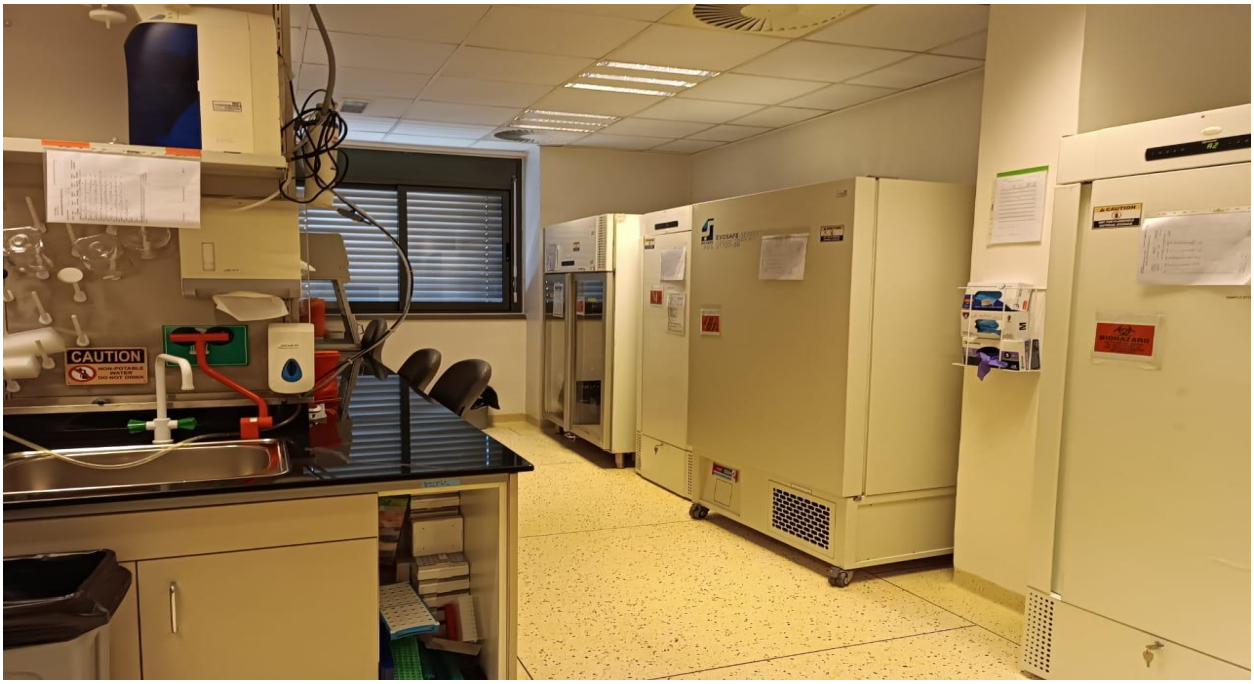
Members of the Committee posing for a photo at the Uganda Cancer Centre Institute

Committee Members and the UCI team in a boardroom discussion

Guided tour: Committee members being taken through the oncology procedures

Inside the research lab: A cepheid geneXpert machine used to offer tests for TB, detection of the novel corona virus that causes COVID-19 among others.

Inside the research lab: An Illumina Miseq Desktop Sequencer machine used for research services.

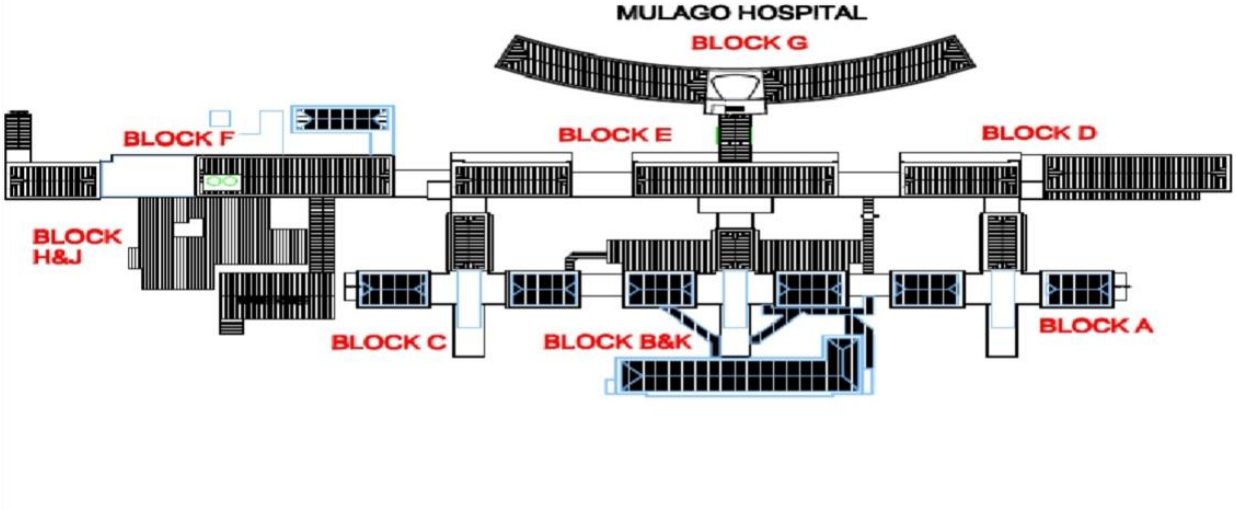


Biobanks used to provide samples for different types of studies. The freezers help biobanks sustainably maintain well-organized sample collection.

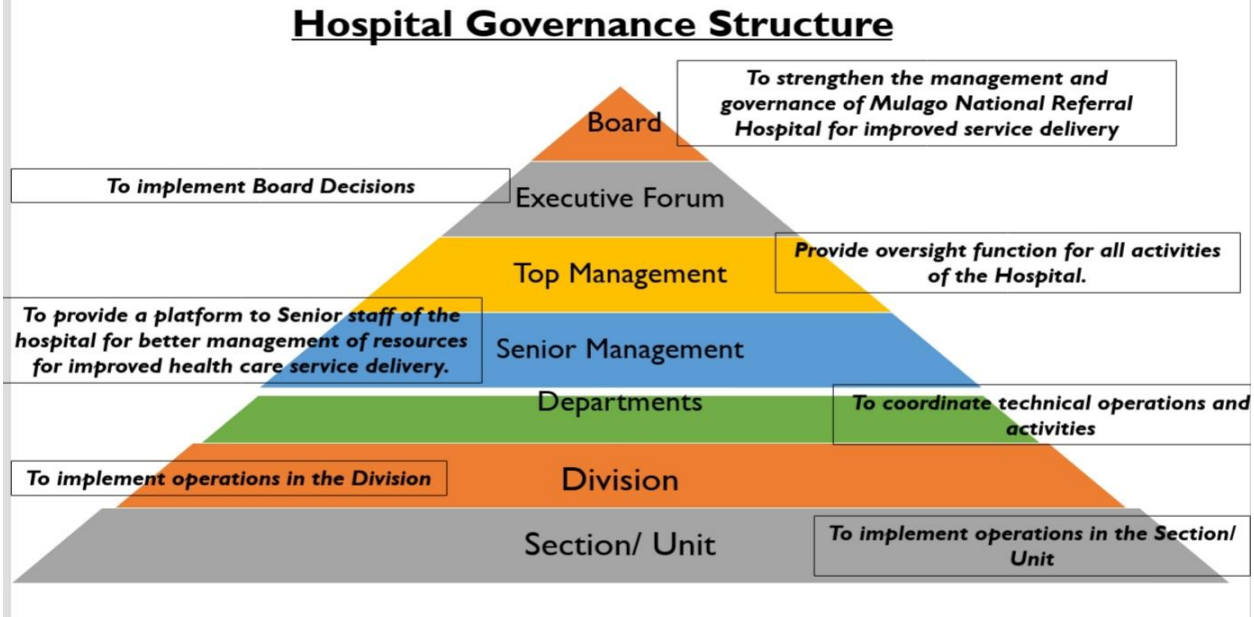
A Linear Accelerator machine (LINAC) inside a linear accelerator treatment room (also known as a bunker). LINAC is a machine that aims radiation at cancer tumors.

The East African Oncology Center of excellence at the UCI under construction.

Appendix 6: layout of Lower Mulago Hospital



Appendix 7: MNRH governance structure



ADOPTION SCHEDULLE

We, members of the Committee on Medical Services, Public Health and Sanitation do here below declare that this report correctly captures the proceedings and recommendations of our deliberations as regards this subject matter and in witness thereof, we hereby append our signatures to adopt this

SRL NO.	NAME	POSITION	SIGNATURE
1.	**Hon Vincent Jagongo**	**Chairperson**	
2.	**Hon Emily Oginga**	**Vice Chairperson**	
3.	Hon Nereah Okombo	Member	
4.	Hon Kennedy Ooko	Member	
5.	Hon Seth Okumu	Member	
6.	Hon Lumumba Owade	Member	
7.	Hon Joachim Oketch	Member	