

## YOTKOM. UGANDA

**FOUR QUARTERS REPORT:**  
**Q3'16, Q4'16, Q1'17, Q2'17,**  
**1 July 2016 to 30 June 2017**

**In addition to and included**  
**TWO QUARTERS REPORT**  
**1 July 2017 to 31<sup>st</sup> December 2017**

Report provided by Andrew Wright designated role : Director . Date :

A declaration is to be signed by Andrew Wright as ASP at the end of this report.

### 1.0 GENERAL PROJECT INFORMATION

Name of Project	Yotkom Uganda Ltd
Name of Overseas Partnering Organisation	Yotkom Uganda
Name(s), if any, of other donor organisations	Healthserve Yotkom Australia Gateway Baptist Church
Date Project Approved	--
Name of Australian Supervisor of Project/ mob	Dr Andrew Wright
Approx funds spent to date on these Objectives	Period 1: 1 July 2016 to 30 <sup>th</sup> June 2017= \$89900 Period 2: 1 July 2017 to 31 December 2017= \$88,900  Details of these funds are available in the attached documents (Yotkom Quickbooks account reports)

	Note for purposes of this report 1 AUS dollar = 2600 UG SH
HSA Project <b>funds received</b> in the period being reported on.	Period 1: \$18,900 Period 2: \$41,074
HSA Project <b>funds spent</b> in the period being reported on.	Period 1: \$18,900 Period 2: \$41,074
<b>Unspent</b> HSA project <b>funds held</b> by partner at the end of the period being reported on.	Period 1: NIL Period 2: NIL
Funds from <b>other sources</b> spent in period being reported on. (estimate)	Period 1: \$71,750 Period 2: \$53,000
HSA <b>Fund request</b> for next 6 months	<b>Request for January 1 2018 to June 30 2018 = \$40,000 AUS</b>

**PROJECT QUALITY RATINGS GUIDE for ACTIVITY>>OUTPUTS**

Please use the following rating scale to report on apparent quality of implemented Activity/ Outputs achieved this Quarter, where 5 = *Best Practice*, 4 = *Fully Satisfactory*, 3 = *Satisfactory*, 2 = *Marginally Satisfactory*; 1 = *Weak*, 0 = *not yet done* and 9 = *Output no longer required*

(5) **BEST PRACTICE** is a rare score where the **ACTIVITY** was excellent and the **RESPONSE** was much better than best-practice such that it received unexpected wide acclaim and would be recommended as a great model to follow elsewhere if possible.

(4) **FULLY SATISFACTORY** is normally as good as it gets. As for Output 2.1 - x mobile health team visits, full team and great village response. Maybe a few minor weaknesses eg timing, equipment, attendance etc, which we'll address next time.

(3) **SATISFACTORY OVERALL** represents satisfactory **ACTIVITY** with a reasonable **RESPONSE**. This score usually means that there are strengths but weaknesses remain. Discussion with target group and a changed approach may improve next quarter.

(2) **MARGINALLY SATISFACTORY** means that a few benefitted but the planned **ACTIVITY** really missed the mark – activity not appropriate, poorly communicated, bad weather or timing, political unrest, local violence, custom activity. Try again next quarter.

(1) WEAK This rare score indicates that the planned ACTIVITY got virtually no response. Eg mobile team visited and told to go away. Immediate and decisive action is needed to address the situation. Objective may have to be dropped.

## 2.0 PROJECT ACHIEVEMENTS: Planned Objectives, Outputs, Achievements and Costs

This section describes **PROGRESS** in relation to listed **OUTPUTS** in terms of dollars spent and quantitative results.

The Project Outputs are listed and numbered under their Objectives *as stated in the original project proposal*.

*Using the Project Quality Ratings Guide in Appendix 1 to describe how each Output has been achieved, where 5 = Best Practice, 4 = Fully Satisfactory, 3 = Satisfactory, 2 = Marginally Satisfactory; 1 = Weak, 0 = not yet done and 9 = Output no longer required.*

This report includes a file of photos in subfolders which support the narrative. Please see attached folders				
Output	AU\$ spent this period (Other funds spent)	R a t i n g	Comments to describe the Output	AU\$ for next 6 mths
<b>OBJECTIVE GROUP 1 : LAND, BUILDINGS AND INFRASTRUCTURE</b>				
<b>1:1 Complete the internal fit out of Yotkom Medical Centre stage 1</b>	<i>Period 1: \$30000 Period 2: \$3300</i>	5	Watoto Uganda were commissioned to provide built in cupboards, office shelves and a reception area. They also fitted out the operating theatre with cupboards and shelves Desks chairs and benches were purchased for use in the facility Repairs and maintenance spent on building/solar/grounds/pit latrines	\$5000
<b>1.2 Acquire medical diagnostic</b>	<i>Period 1: \$15000</i>	4	An Ultrasound machine was purchased in Uganda with a warranty and service agreement	

<p><b>equipment</b> and devices for treatment</p>	<p><i>Period 2:</i> \$7500</p>	<p>Haematology analyser Biochemical analyser</p> <p>An ECG machine was donated from Australia and delivered and use commenced. This is the only operating ECG machine in Northern Uganda servicing a population of 300,000</p> <p>The emergency room was fitted out with drug cupboards, an emergency trolley, oximetry, BP machines, oxygen concentrator, suction device</p> <p>Air conditioners for theatre and lab New steriliser. Theatre bed and light Dental start up equipment Fans</p>	
<p><b>1.3</b> Improve road access to the medical centre</p>	<p><i>Period 1:</i> \$580</p> <p><i>Period 2:</i> \$1700</p>	<p>4 Chinese road construction created access problems for the facility , as the roadway was several metres above the level of the building .Funds were spent on purchasing adjacent land and constructing a gently sloping driveway and pathway from the main road to the medical centre.</p>	
<p><b>1.4</b> Provide a shaded area on the southern side of the building</p> <p><b>1.5</b> Construct a canteen for use by staff, patients and carers</p> <p><b>Also construct a food</b></p>	<p>Period 1: \$1800</p> <p>Period 2: \$0</p> <p>Period 1: \$0</p> <p>Period 2: \$14000</p>	<p>5 A shaded area has been constructed on the southern side of the building to reduce the heat in the pathology laboratory. It also provides parking space for motorbikes, bicycles and motor vehicles. There is also space for patients, relatives and staff to sit in the cool.</p> <p>5 Yotkom Medical centre is approximately 2km from the town centre. Our staff often come to work without eating. They find it difficult to get food for lunch due to the distance and lack of transport. It is also costly. Patients admitted to the wards require</p>	

<p><b>preparation area</b> for patients and carers</p>		<p>carers to feed them. Carers need to be able to buy food or buy ingredients and cook.</p> <p>The leadership team decided that construction of a canteen on site would help meet these needs</p> <p>A plan was drawn up</p> <p>A builder made a quotation</p> <p>Work started and was completed in December 2017</p> <p>The canteen has take away and eat in facilities. Gas and charcoal cooking facilities and refrigeration available with power and water connected.</p> <p>It is a stand alone business.</p> <p>A local married couple with cooking experience have taken up the lease, will run the facility and pay rent to Yotkom.</p> <p>Staff will be given lunch food vouchers to use at the facility.</p>	
<p><b>1.6 Plan and Build Stage 2: Maternal and Child Health Admissions block and Teaching facility</b></p> <p>Plan for fit out of this building with</p>	<p>Period 1: \$6000</p> <p>Period 2: \$48000</p>	<p>0 Space needs to be found on our site in order to create a food preparation area. Land has been bought in December 2017 next door and this will be a site used in the future for this purpose</p> <p>3 Preliminary planning involved input from a group of architects and professionals from Finland.</p> <p>Their site visit resulted in community consultation and feedback through interviews and meetings. (see attached meeting and report from M4ID Labour Ward team)</p> <p>There was also input into planning from an Australian construction engineer. A final plan was agreed upon.</p>	<p>35000</p>

<p>furniture and equipment</p> <p><b>1.7</b> <b>Plan to acquire more land</b> surrounding the existing building to allow for future expansion</p>	<p>Period 1: \$14000 Period 2: \$2000</p>	<p>3</p> <p>Neighbours have been approached to ask for interest in selling their land. We would like to procure land before it is developed by others. An additional block of land next to the canteen fronting the main road was</p>	<p>Funding commitments were made by donors in Australia Quotations were sought from three Ugandan building teams. One was selected: Kidega Patrick . (Contract to Build is attached) Building commenced October 2017 Completion due December 2018 A plan of the new building is attached Monitoring of construction is undertaken by regular visits from Australian directors as well as the Australian construction engineer overseeing On site Ugandan directors are also responsible for monitoring. An independent builder also makes regular site visits and reports. The estimated cost of the building is approximately \$300,000 AUS A large proportion of this money has been pledged and raised for this building project from within Australia. More funds will be raised in 2018. A container has been pledged to be sent from Samaritans Purse in the USA with medical and hospital equipment for the second stage building. It should be sent around mid 2018. When the new building is completed, rooms in the current building will be used to add OPD consulting room and dental consulting room space.</p>
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<p><b>1.8</b> <b>Land titles and documents</b> are to be finalised</p>	<p>Period 1: \$1000</p> <p>Period 2:</p>	<p>3</p>	<p>acquired in December 2017 It is 400m2 Land behind our property may become available as part of a council grant. This possibility is being explored through contacts within the Kitgum Town council.</p> <p>There are several steps to follow in gaining land title documents for purchased land within Uganda We continue to pursue this task and undertake the steps necessary to gain all the documents needed for security of tenure. This is an ongoing process. Peter Omara is supervising this process.</p>	
<p><b>1:9</b> <b>Develop and maintain reliable energy sources</b> for the facility</p>	<p>Costs included in fit out/maintenance</p>	<p>3</p>	<p>Yotkom Medical Centre is equipped with a 3kW solar system made up of panels and storage batteries. We have a back up generator We connected to the electricity grid in mid 2017. We have experienced equipment failures which have been expensive to fix. Some failures are due to power surges within the grid. Voltages are erratic and power outages frequent. As a result we have burned out voltage controllers, inverters and charge controllers in our system. Our solar system provides for much of our needs thus saving us money and reducing green house emissions. We have an electrical engineer, Dominic, who built our solar system and continues to provide ongoing support and responds quickly to our energy crises.</p>	

<p><b>1:91</b>  <b>Continue to procure hospital furniture and medical equipment</b> to fully fit out all the Yotkom facilities</p>	<p>Costs included in fit out and maintenance</p>	<p>4</p>	<p>As the new building comes on line at the end of 2018 further evaluation will need to be made of our energy needs. We plan to buy a bigger diesel generator.</p> <p>Furniture purchased includes seats, desks, benches.  A mobile trolley for use in the emergency room. A mobile trolley for use in the theatre.  Air conditioner for the theatre  Air conditioner for the laboratory  Medical equipment procured includes ECG machine, Ultrasound, Biochemical analyser, Haematology analyser.</p>	
<p><b>1:92</b>  <b>Procure a small transport fleet</b> to provide for the needs of the project and facility</p>	<p>Period 1: \$22000  Period 2 \$1000</p>	<p>4</p>	<p>A 4WD second hand motor vehicle  Toyota Prado  Purchased  For use in outreach clinics  And to facilitate transport for visitors from Australia within the country and within Kitgum/  A part time driver was employed. George.  He is also responsible for vehicle maintenance</p> <p>A motor cycle was purchased for use by one of the doctors on call and to be used by the administration staff for errands within town. Paying local taxi operators for deliveries and errands was identified as a potential cost which could be avoided by purchasing our own motorcycle</p> <p>A mobile ambulance trailer was</p>	



<p><b>1:93 Renovate existing laboratory room</b></p>		<p>purchased to hook on the back of the motorcycle to assist us to transfer sick patients to local hospitals when requiring referral. Obtaining an ambulance when required by other means was often impossible. We have identified a need to replace an old motorcycle being used by our administrator as it is costly to maintain.</p> <p>1 New benches and cupboards are required in the existing laboratory Tiling is also required on the floors It is intended to undertake this activity once the second stage building opens. At this point, one of the current admission rooms will be converted to a second laboratory room, allowing renovation of the current one.</p>	
<p><b>OBJECTIVE GROUP 2: HUMAN RESOURCE MANAGEMENT</b></p> <p><b>2.1 Create and maintain a model work environment</b> for the Yotkom Medical Centre employees</p> <p>Pay salaries Provide support services/food allowance etc</p>		<p>4 Every employee has a work contract and has clear roles and responsibilities. The employees also undertake orientation on arrival. There is a Policy and Procedure manual which employees can read for clear understanding of Yotkom policies and procedures There is a disciplinary committee formed to manage staff discipline and disputes. Regular staff performance reviews are undertaken.</p> <p>Aside from the medical staff there are allied health professionals, dental staff and</p>	

<p><b>2:2</b>  <b>Recruit new employees</b>  Building capacity to deliver higher quality services</p>		<p>administrative staff  Yotkom also has maintenance staff and a Ugandan driver responsible for the motor vehicle.  Accordingly there has been a delineation of departments with department heads who provide written reports on a weekly basis for all project directors.  The main departments are:  <b>Medical</b> : Dr Charles Abonga  <b>Nursing</b> : Collins  <b>Dental</b> : Godfrey  <b>Xray and Ultrasound</b> : Samuel  <b>Pathology</b>: Ponsciano  <b>Pharmacy</b>: Dr Robert  <b>Administration</b>: Peter Omara  <b>Chaplaincy/ Pastoral Care/ Cleaners and Groundsmen</b>: Rev Concy Amigo</p> <p>Peter Omara has been confirmed in his place as the Administrative Director and Human Resource Manager at Yotkom.  The current monthly total salaries as of December 2017 are approximately 14 million UGSH (\$5000 AUS)</p> <p>4 Some nurses left to pursue Government positions  These nurses were replaced after advertising and interviews by directors on site  A full time medical doctor was employed to supervise the clinical staff on site.  Previously the doctor was working one week a month and being on call for advice to clinical officers and nurses</p> <p>One of the Yotkom Directors completed training in Internal Medicine, receiving a Masters Qualification  He took over responsibilities for Medical supervision/ Clinical Governance  He is on site for one week per month with the intention of increasing this time in the coming year in preparation for the opening of the</p>	
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		<p>second stage.</p> <p>Newly recruited staff include  Dentist  Dental assistant  Theatre Nurse  Laboratory assistant  Radiographer/Ultrasonographer  A midwife has been employed one day a week to start undertaking antenatal care services and prepare for the commencement of MCH services which will commence once the new building is opened.  A medical doctor was employed full time In March 2017, to provide increased on site supervision of the junior medical staff in their clinical work  In the future, Yotkom will need more clinical staff capable of performing surgery and also we will need to develop an anaesthetic service.</p> <p>An orientation manual has been developed to guide new staff through a full orientation process when they start at Yotkom</p>	
<p><b>2:1</b>  <b>Encourage life-long learning</b> and educate existing medical team members. Identify evidence of ongoing in-service training and new qualifications being gained (certificates of attendance, diplomas etc).</p>		<p>4 Onsite Continuing Medical Education seminars are held for 1 to 2 hours once a week.  These are led by Dr Charles Abonga or visiting Medical professionals from Australia.  a list of these topics and signed attendees is kept.  The Ugandan Medical Board requires that these CME activities continue in order to register the medical doctors and the facility.</p> <p>Ward rounds are undertaken of inpatients</p>	

<p><b>2:2 Sponsor students to upskill in health sciences and support services</b> from within our team and from the general community</p>	<p>Period 1: \$600 Period 2: \$3400</p>	<p>4</p>	<p>on a daily basis and these are used as teaching opportunities with Doctors, Clinical Officers and Nurses attending. Visiting health practitioners from Australia also attend to teach. eg: Dr Andrew Wright Dr Matthew Durden Pat Holdsworth (Paramedic) Matthew Davenport (Paramedic) Robin Day (Nurse/midwife)</p> <p>A compassionate/ Scholarship Fund has been established to fund ongoing education and provide scholarships to staff members and other gifted students in the community. A separate Ugandan bank account is opened for this purpose.</p> <p>Donors in Australia often give specifically toward this need.. Funds from this account have been used for the following: Richard Yulam: sponsorship to study Medicine at Gulu University Peter Omara: Sponsorship to study Medical Administration degree at University in Kampala by distance education. Godfrey : sponsored in Lab technology Sheila Omara sponsored to study medical record keeping. One off bursaries for medical and nursing staff to attend educational events within Uganda. eg : Rheumatic Heart disease conference in Kampala</p>
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<p><b>2:3 Develop a strong and united Ugandan leadership team</b></p>		<p>4 Directors of the project meet on a regular basis. The goal is for the Yotkom Medical Centre Management Committee to meet weekly. This facilitates open communication and sharing of information and decision making. Usual attendees include Peter Omara, Charles Abonga, Richard Yulam and Rev Concy Amigo. Minutes of the meetings are emailed to directors in Australia. Dr Andrew Wright has undertaken leadership training seminars with the directors to discuss roles and responsibilities and leadership styles. Other Australians (Jason Elsmore, Neil Shuker) have also visited and undertaken workshops on team building and leadership skills. We work hard to maintain unity and understanding One of the issues which has caused some tension is the conflict between professional standing and designated leadership //lines of authority. For instance, one employee doctor found it difficult to be under the authority of directors who had less medical standing. Also the issue of professional and director components of salaries amongst the leadership also needed to be clarified and worked through in meetings. We were able to agree on a scale of professional salaries and a uniform director fee for reference. Regular communication takes place between Uganda and Australia via email, skype and whats app</p>	
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<p><b>2:4</b>  <b>Maintain regular on site visits to Uganda from Australia</b>  To foster close relationships  To allow regular monitoring and evaluation of the project work and identification of problems.</p> <p>Costs covered by directors on voluntary basis  Wrights  Holdsworths</p> <p><b>2:5</b>  <b>Encourage a culture of reliability and punctuality</b>  within our Ugandan team</p>			<p>4 Dr Andrew Wright has established a regular visit program.  He spends 6 to 7 weeks on site in April/May, July/August and November/December.  Dr Wright is usually accompanied by other volunteers from Australia.  For instance:  Matt Durden : final year Medical student  James Cook University  Anne Wright : practice manager and accreditation consultant.  Phil Usher : Project manager and builder  Robin Day : Registered Nurse/Midwife  Architects from Finland  Matthew Davenport (Paramedic)</p> <p>Pat Holdsworth , (Paramedic ) and Maree Holdsworth, Administrator , have committed to making annual visits to the Yotkom site for 10 years.  They are also directors of the Australian Yotkom Uganda charity.</p> <p>3 Teaching and mentoring is often focussed on encouraging a culture of punctuality and reliability within our Yotkom community. This is sometimes seen as countercultural in a Ugandan setting where relationships take priority over agendas and appointments.  However we stress the need particularly within a health setting to have reliability, keeping to rosters, being on time and</p>	
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<p><b>3:2 Seek to increase acceptance of Yotkom Medical centre as a preferred provider of medical services to Insured clients in Northern Uganda.</b></p>		<p>We can track our income and split this into various categories, including consultation, inpatient fees, radiology, pathology and pharmacy Expense are also allocated to various categories so we can track these and detect changes and challenges A monthly profit and loss statement is printed and circulated to all directors in Uganda and Australia. (see attached Profit and Loss and Balance statements for Period 1 and Period 2 of this report ) Because we are a registered company in Uganda we have tax office obligations. Accordingly we submit a tax return to the Ugandan tax office at the end of each financial year following an audit from a qualified accountant and accompanied by full financial statements for the year. These are included in this report</p> <p>4 Some Ugandan citizens are able to access health insurance through their employers. Local organisations and NGOs provide this for their employees. Yotkom has had several visits from Insurance companies and from Employers including the Red Cross, AVSI and UNHCR We have been successful in establishing health service provider relationships with the following Insurance companies: UAP Insurance IAA Insurance Case Medicare Insurance Sanlam Insurance Negotiations are underway with Prudential Insurance and Jubilee Insurance. Payments from these companies can assist our project to be sustainable and can allow us to lower our fee for service to the general community, most especially the poor and disadvantaged so that we maintain access and affordability while still maintaining the highest quality services.</p>	
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<p><b>3:3</b>  <b>Seek to pay for all salaries and wages at Yotkom medical centre from locally generated income .</b>  (The number of Ugandan employees has reached 32. At the time of writing this report )  ( a photo list is attached)</p> <p><b>3:4</b>  <b>Register as a Non Government Organisation</b> within Uganda. To raise our profile and improve legitimacy.</p> <p><b>OBJECTIVE GROUP 4</b></p>		<p>4</p> <p>5</p>	<p>One of the challenges we have faced is the delay in payment by insurance companies which has at times created a cash flow crisis for Yotkom. We have had to continue pressure on these companies to pay their debts in a timely fashion.  This unfortunately is an endemic problem in the Ugandan setting.</p> <p>Monthly salaries are approximately 13 million UGSH per month as at 31/12/2017. ( \$5000 AUS).  This employs 30 staff.  The Yotkom Medical centre operates from a local bank account with Stanbic Bank in Ugandan Shillings.  Donor funds are sent to Uganda and deposited into a USD account.  The USD account is only accessed for pre approved payments designated for purchase of land, construction of buildings or purchase of equipment.  On only one occasion in the 18 months of operation of the medical centre have funds been taken from the USD account to assist payment of monthly medical centre salaries. This occurred when insurance companies owed a large sum of money for services delivered to clients .</p> <p>Peter Omara ,the Yotkom Administrative director was tasked with fulfilling registration within Uganda as a Non Government Organisation.  This took several months and lots of paperwork and correspondence but the goal was achieved in mid 2017.  (see copy of registration attached)</p>
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<p>in Government or private.</p> <p><b>4:3 Palliative care and pain management</b></p> <p>We recognise that pain management and palliative care are priority areas to address in this health care setting. Health professionals perceive curative approach as a priority and are not well trained in palliation, relief of suffering. This includes adequate control of pain for procedures such as burn dressings or orthopaedic work in children and adults</p> <p>Make sure we keep adequate supplies of recommended medications for pain relief</p> <p><b>4:4 Develop our maternal and child</b></p>		<p>2</p> <p>1</p>	<p>In the first month, 90 patients were seen and treated.</p> <p>A CME session was undertaken on pain management Pain assessment tools were introduced. The concept of the pain ladder was discussed with clinical staff as a guideline to prescribing for pain. A medical team was given the task of exploring the procurement of Nitrous Oxide gas and Morphine to assist the medical team with more adequate pain control A Ugandan anaesthetic practitioner has started a relationship with Yotkom, performing a Spinal Anaesthetic for one of our patients in December 2017. Exploring regional anaesthesia options for pain relief will be on the agenda over coming months An anaesthetic service will need to be developed. Skilled Anaesthetic practitioners may also be able to assist with regional pain blocks for procedures.</p> <p>A midwife is employed one day a week We will need to plan for advertising and recruitment of other midwives We will need to ensure we have doctors in</p>	
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<p><b>health service</b> capacity in preparation for the completion of the new building in December 2018</p> <p><b>4:5</b> <b>Improved diagnostic services Laboratory and Imaging</b></p> <p><b>4:6</b> <b>Develop a Yotkom Clinical Guidelines document</b> This will be used to create a uniform</p>		<p>4</p> <p>3</p>	<p>place who can supervise clinical obstetric work and also undertake Caesarian sections . We have started this process slowly</p> <p>The capacity of the Laboratory to perform more helpful tests has been expanded. We have purchased : 1. A haematology analyser 2. A biochemical analyser We have employed a third laboratory technician to reduce the work load on our other staff. Yotkom Medical Centre now has the capacity to do full blood counts which help differentiate between viral and more serious bacterial infections. This helps us target strong antibiotics to children and adults who need them and avoid unnecessary prescribing We can also do testing for liver function and renal function as well as sodium and potassium estimations. A new Ultrasound machine was purchased in 2016. In late 2017 we were able to employ a full time radiographer trained in Xray and Ultrasound. Prior to this we were relying on part time visits from a Government employee to undertake Ultrasound. The radiographer is also trained in interpretation of Xrays which assists our clinicians with more accurate diagnosis.</p> <p>Topics from CME activities are included into the Guidelines Book The topics are increasing and the book is being expanded. Current topics covered include: Malaria</p>
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<p>evidenced based approach to common presenting medical surgical and dental problems . The clinicians at Yotkom will be encouraged to follow these evidenced based approaches to diagnosis and treatment.</p> <p><b>4:7</b> <b>Develop rural outreach capacities</b> to deliver health care to isolated regions where access is most limited</p> <p><b>4:8</b> <b>Develop the capacity to</b></p>	<p>Period 1: \$700</p>	<p>2</p> <p>Typhoid fever Brucellosis Gastroenteritis Pneumonia Asthma Intravenous fluids Brucellosis Shock Pain management And others This list will continue to be added to over time . Attached to this report are some examples of the chapters in the Guidelines book. The medical and nursing staff will continue to be encouraged to refer to this when managing patients.</p> <p>Over a 6 month period Yotkom conducted a rural outreach clinic once a week in Orom, a village 100km north east of Kitgum A team of 4 medical staff travelled by vehicle to the facility and under took a medical clinic Many patients had been travelling from this centre to attend Yotkom at some expense, so we felt that this service would be embraced and supported. Unfortunately the local community did not regularly support the outreach and Yotkom could not afford the ongoing costs so the clinics were ceased in March 2017. In December 2017, parcel of land has been donated to Yotkom in a village called Amianyima , which is 50km from Kitgum. We have visited the site We have plans to use this site to construct a small facility in the future. Meantime we plan to use an existing building and start a dental outreach in April 2018 as a trial.</p> <p>3</p> <p>The Yotkom Compassionate account was set up as a separate bank account. Funds are directed to this account from the</p>	
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<p><b>subsidise the very poor</b> to gain access to curative life saving surgery Most especially through the establishment of a <b>Yotkom Compassionate Fund</b></p> <p><b>4:9</b> Develop and make use of high quality <b>Information Technology</b></p>	<p>Period 2: \$8000</p>	<p>USD account if donors send money targeted to compassionate needs. Money was drawn from this account to facilitate surgery in Kampala for an 18 month old child called Brian who was born with Hirschsprungs disease and presented to Yotkom with severe chronic bowel obstruction and malnutrition. His parents were poor peasant farmers. They were assisted in transport to Kampala and all medical fees paid for 2 surgeries which ultimately have cured the boy. His treatment cost approximately \$1000 Money was raised in Australia and targeted toward cardiac surgery at the Uganda heart Institute for a 12 year old boy, Makmot who had a cyanotic congenital heart disorder called Fallots Tetralogy. He is now well post operatively and has returned to school. This treatment cost approximately \$7000 AUD. A child from a nearby South Sudanese refugee camp was assisted to attend Gulu regional hospital for a bone marrow biopsy as part of investigation into aplastic anaemia. We continue to raise funds in Australia so that we can assist the very poor to gain access to curative life saving treatments.</p> <p>3 Yotkom is utilising computer based records for administration and finance. Quickbooks Online is used for all billing and monitoring of income and expenses. We also utilise a software program developed in Australia for the use of doctors and nurses in medical record keeping and data base management. This software program is called Best Practice. The licence is donated on an annual basis by</p>	
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		<p>the company in Australia and has a value of at least \$3000 per annum.</p> <p>On site training and familiarisation of the medical staff in its use and application continues.</p> <p>There is some resistance to the uptake as patients and medical practitioners in Uganda are familiar with using paper based records carried by the client.</p> <p>These have several limitations however, they are often lost and different pieces of paper are collected from multiple care providers. It is time consuming to attempt to elicit an accurate medical history from patients so our goal is to collate reliable summaries within our data base. We also plan to develop the capacity to undertake research utilising this soft ware program.</p> <p>Computer hardware in the form of lap tops are donated from Australia to be used in our work stations. Approximately 6 per year are donated.</p> <p>There are computers in each of the 3 consulting rooms. One each in the laboratory, x ray department and dental clinic. Three computers in the reception and administration zone. There is one server located in a secure office..</p> <p>The network cabling within the building has been upgraded and extended to improve connectivity.</p> <p>Yotkom has internet access and wireless This enables quick access to medical research and advice on line. The clinicians frequently use two on line medical consulting tools:</p> <p>Uptodate and Therapeutic Guidelines. These can be accessed while consulting or on ward rounds.</p> <p>Yotkom has a website and a registered domain name.</p> <p><a href="http://www.yotkom.com">www.yotkom.com</a></p> <p>Paul Bakes is an IT consultant in Australia and he is currently assisting us with computer hardware and software issues and</p>	
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<p><b>4:91</b>  <b>Develop a network of Ugandan professionals who can respond to on site equipment failures</b> and attend to regular maintenance</p>	<p>2</p>	<p>procurement of equipment from Australia and Uganda.  He spent time on site in 2017.  We also have a Ugandan computer technician called Gengrwot who is on call.  Internet security was tightened. Web site access by staff on their computers was limited by installing a program called K9.  This prevents inappropriate computer web use by employees by blocking access to many sites.</p> <p>A major problem identified in a rural area of Northern Uganda is the challenge of locating reliable professionals and technicians who are truly capable of providing ongoing support and responding to crises.  This is the case across all areas.  Laboratory  Radiology  Computers  One advantage of buying equipment in country is that companies often provide ongoing maintenance, monitoring and repairs.  This has been the case for our laboratory and for Ultrasound.  Two Xray machines were donated and delivered from Australia.  One is functioning well  The second machine is not functioning. We have had several local “engineers” inspect the machine and give advice . Parts have been removed and taken away.  Still after 12 months the machine is not fixed.  We need to work to find a reliable radiology equipment technician  We also need to keep a list of reliable people to call when needed for all of our equipment.  Our staff need to know who to call.</p>	
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<p><b>4.92 Pharmacy Streamline inventory sales and purchases</b> Ensure minimal run outs.</p> <p><b>4:93 Develop a specialised Day Surgical Unit</b></p> <p><b>4:94 Develop a Gastroenterology / Endoscopy specialist service</b></p> <p><b>OBJECTIVE GROUP 5: Develop local strategic partnerships</b></p>		<p>4</p> <p>1</p> <p>1</p> <p>3</p>	<p>We identified a problem with essential medications running out of stock To address this we have implemented a robust recording system and inventory of pharmaceutical stocks. Minimum and maximum stock levels have been identified for each drug. The pharmacy nurses are responsible for reporting to the clinic doctor on the medications which need ordering. He gives final approval before orders are sent. We have had less stock outs since this process was introduced.</p> <p>When the second stage building is completed by the end of 2018 it is planned to convert one of the current admission areas adjacent to the operating theatre into a day surgical ward.</p> <p>One of the medical practitioners, Dr Charles Abonga has had experience in Gastroenterology and endoscopy. It is planned to establish an endoscopy unit. Assistance with this may be possible through partnership with a Gastroenterologist in the USA and also through provision of endoscopy equipment coming from the USA in a container mid year.</p> <p>We have been building closer relationships with the following agencies within country: District Health Office Uganda Government. South Sudan Medical Training College Health Insurance Companies (listed) Ugandan Health Practitioners Council Protestant Health Association Ugandan Health Marketing Group Ugandan Heart Institute Gulu Regional Referral Hospital Kitgum Government Hospital;</p>	
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<p><b>7:1 Formalise the structure of Yotkom Uganda in Australia</b></p>		<p>3 Since 2008, Yotkom Uganda has been operating informally in Australia, primarily under the control of the founding directors, Dr Andrew and Annette Wright. A group of Yotkom supporters has been gathering every three months to meet and support the work and hear reports from those who visit the site . This group has been called YASTIES (The Yotkom Australia Support Team) IN 2017,the decision was made to create a Company registered in Australia . 20 people agreed to be founding members of the company. 7 individuals were nominated as Directors of the Company The directors are : Dr Andrew Wright (Chairman) Annette Wright Patrick Holdsworth Maree Holdsworth (Secretary ) Lynne Pemberton Shirley Kampe (Treasurer) Dora Lee</p> <p>Yotkom Uganda Ltd is now registered as a Company in Australia and exists for the purposes as outlined in our Constitution and in line with the articles of association of our partner organisation in Uganda. Yotkom has an ABN and a new bank account was opened in December 2017 Currently work is being undertaken on an application to the Australian Charities Commission to register as a Public Benevolent Institution. All these undertakings will improve accountability, transparency and legitimacy as we seek to broaden our support base in Australia.</p>	
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<p><b>7:2</b> <b>Develop a strong support base in Australia.</b> Work with partner organisations</p> <p><b>7:3</b> <b>Find opportunities to advocate on behalf of the Acholi people of Northern Uganda, highlighting their struggles and raising awareness amongst the people of Australia</b></p> <p><b>7:4</b> <b>Be involved in fund raising opportunities</b></p>		<p>4</p> <p>3</p> <p>3</p>	<p>Strong supportive relationships exist with the following organisations and are continuing to be strengthened: Gateway Baptist Church Healthserve Australia Christian Medical and Dental Fellowship of Australia As a result of Andrew and Anne Wright receiving the Order of Australia in January 2017 for their work in Uganda , opportunities to share in the Order of Australia Organisation have opened up as well as in the media. All these things have raised our profile .</p> <p>Several speaking engagements have been taken up in Australia by the Australian directors. The time following the Order of Australia award ceremonies in 2017 provided a good deal of opportunities to share in various venues and via the media.</p> <p>A major Building Fund drive through Gateway Baptist Church was underway in December 2017. It is called “Hospitals of Hope” We stress maintaining our support base by giving regular feedback to donors and thanking donors for their gifts to the work. The Yotkom Uganda website plus regular email and newsletter publishing are some ways in which we keep our supporters and partners connected and informed.</p>	
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<p><b>OBJECTIVE GROUP 8</b>  <b>Exploration of alternative local income producing activities to promote self reliance</b></p> <p><b>OBJECTIVE GROUP 9</b>  <b>Improve onsite monitoring and evaluation.</b>  Develop tools to assist on site directors  In key areas:  Recording of patient numbers  OP. IP. Dental  IN adherence to practice policies:  1.Log in/Log off  2.Use of Best Practice  3.Use of Clinical Guidelines and evidence based medicine</p> <p>In measurement of impact of the Yotkom project on the community</p>		<p>1</p> <p>3</p> <p>2</p>	<p>Ideas we are looking into include investing into agriculture and tree planting ventures . This would provide local employment as well as a possible future income stream to reduce reliance on overseas donor funds. In Australia there is some interest in following up on these ideas and donors have expressed interest in assisting with agricultural land purchase.</p> <p>In June 2017, several on site monitoring tools were introduced and local Ugandan leadership trained in their application. This has helped monitor patient numbers and also the continuing adherence to practice policies by the team. (some of these monitoring tools are attached to this report )  Team leaders need continuing encouragement to continue undertaking this monitoring, evaluation and reporting. It has helped to maintain progress and reduced the tendency to slip backward in between visits by the Australian directors. It is also a measure which encourages self reliance and sustainability.</p> <p>More work needs to be done on obtaining local district health statistics and working in collaboration with the local department of health on this. Ensuring good quality , reliable health statistics are available from the department is also important.  Tracking the impact of the Yotkom project on</p>	
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<p>1, Accessing Kitgum district health statistics 2. Encouraging and recording feedback from patients and the community In the form of evaluations and letters</p>			<p>the community of Northern Uganda will involve monitoring disease prevalence and incidence. Feedback from the patients often occurs in an ad hoc manner through letters of thanks and word of mouth. Yotkom has also introduced a suggestion/feedback box in the waiting room.</p> <p>We know the Yotkom clinic has ensured improved access to healthcare as it is currently treating over 10,000 patients a year.</p>	
<p><b>Total AU\$ spent</b></p>	<p><i>Period 1:</i> \$89,882 <i>AUS</i> <i>Period 2:</i> \$88,900</p>			
<p>Total <u>local</u> funds generated and spent in AU\$</p>	<p>Period 1: \$75,609 Period 2: \$38,752</p>			
<p>HSA funds remaining unspent</p>	<p><b>Period 1:</b> <b>AU\$00</b> <b>Period 2:</b> <b>AU\$00</b></p>	<p>Therefore</p>	<p><b>Total AU\$ requested for next 6 months</b></p>	<p><b>\$40000</b></p>

SEE ATTACHED PHOTOGRAPHS AND DOCUMENTS for evidence of work on Outputs described above.

### 3.0 Changes to Project Objectives and/ or Outputs and Reasons

This section describes the **CHANGES** (if there are any) to the project during implementation.\*\*\*

Original Project Outputs	Revised Project Outputs	Reasons for Amendments
<p><b>Changes have been made since the last report to reflect advances made and goals already reached.</b>  <b>The objective list has therefore been entirely updated for this report.</b></p>		

\*\*\*Attach any further information regarding changes or any anticipated revisions as an Appendix.

### 4.0 FINANCIAL FLOWS

#### 3.1 Report Against Budget for 18 months:

Made up of two periods: 1 July 2016 to 30 June 2017 plus  
 1 July 2017 to 31 December 2017

	Equiv AU\$ amount	
<i>from the Table in 2.1 Total <b>HSA</b> AU\$ spent</i> <i>Period 1 : \$18,900</i> <i>Period 2: \$41,074</i>	<b>PERIOD 1</b> <b>\$18,900</b>	<b>PERIOD 2</b> <b>\$41,074</b>
<p><b>Other Significant Donors THIS REPORT (not through HSA)</b>  <b>(Mainly via Yotkom Uganda Australia and Gateway Baptist Church Australia)</b></p>		
Period 1 : \$71,750 Period 2 : \$53,000	<b>\$71,750</b>	<b>\$53000</b>

Total Donation in AU\$ equivalent	<b>\$90,650</b>	<b>\$94,074</b>
<b>Local Contributions to Project Outputs</b>	<b>Equity AU\$ amount</b>	
<b><u>Value of non-monetary materials and equipment in AU\$</u></b> (see attached Quickbooks Balance Sheet of Yotkom Uganda assets)	As at July 1 2017:  <b>\$314,340</b>	
Value of seconded <u>local</u> labour and other <u>local</u> labour estimated at AU\$40/day <b><u>Value of wages paid to Yotkom Medical Centre staff</u></b> Period 1:\$73,814 AUS (see quickbooks profit and loss) Period 2:\$40,807 AUS (see quickbooks profit and loss) Note: Costs of these wages are met by locally generated Yotkom income through patient fees (see below)	<b>PERIOD 1</b>  <b>\$73,814</b>	<b>PERIOD 2</b>  <b>\$40,807</b>
<b><u>Value of volunteer Australian labour</u></b> spent at project sites estimated at AU\$200/day  <b>Andrew and Anne :</b> Period 1: Andrew days on site = 149= \$29,800 AUS Anne days on site = 54 = \$10,800 AUS Period 2: Andrew days on site= 37= \$7,400 AUS Anne days on site = 37=\$7,400 AUS <b>Pat and Maree :</b> Period 1: days on site = 0 Period 2: days on site = 25= \$ 5,000AUS <b>Other volunteers from Australia</b> (builders, medicos etc) Period 1: days on site = 41 = \$8,200 AUS Period 2 : days on site = 19 = \$3,800 AUS	<b>PERIOD 1</b>          <b>\$48,800</b>	<b>PERIOD 2</b>          <b>\$23,600</b>
<b><u>Value of local income from local services provided</u></b> in AU\$ equivalent Locally generated income as part of service provision at YMC  Period 1: \$75,609	          <b>\$75,609</b>	          <b>\$38,752</b>



Period 2: \$38,752		
<b><u>Total value of all Local Contributions</u></b> Period 1=.\$ \$198,223 Period 2= \$103,159	<b>\$198,223</b>	<b>\$103,159</b>
<i>from the Table in 2.1</i> <b>Total HSA AU\$ requested for next 6 months by date...30/6/2018.....</b>	<b>\$40000</b>	

## 5.0 Risk Management

This is the real adventure of bringing about improvement in the lives of the poor. If it was easy, they would have done it..

*Please address the Risk Management issues listed in the HSA documentation using the **Ratings Guide** for Managing Risk where 5 = Best Practice transparency, 4 = Transparency is Satisfactory, 3 = Transparency is being improved, 2 = Problems affecting Outcomes; 1 = Problems seriously impacting outcomes.*

Listed Risk	Rating	Management Strategy going forward into next Qr
Political unrest	4	Not a current issue
Lower than expected income from clinic . Lack of donors.	4	<p>Expand insured patient coverage. Seek out local health insurers to approve Yotkom Medical centre as a preferred clinic for their clients. Review charges for consultations and services.</p> <p>Maintain where possible a good local Ugandan bank balance which provides a buffer in the event of a fall in ,local income or bad debts.</p> <p>Seek to improve the standing of the medical facility in the community. The good reputation of Yotkom Medical Centre will ensure a steady flow of patients seeking help from a wide catchment.</p> <p>Keep donor funding through good communication and updates to supporters. Personal interaction with donors in Australia, emails, newsletters etc</p>

		Keep good financial accountability and integrity.
Fraud. Corruption at village level	4	Appropriate documentation required from implementing organisation on a regular basis. Local knowledge of our Ugandan directors helps us to identify potential problems with dishonesty, fraud and corruption
Bribery or corruption from local officials	4	Implement policies against dealing with corrupt officials or community leaders Monitor meetings by having more than one person present from Yotkom to improve accountability. Keep good financial records which are constantly monitored and checked by Ugandan and Australian leadership
<b>Other emerging risks</b>	<b>Rating</b>	<b>Management Strategy</b>
Logistical challenges, vehicle breakdown Machinery and equipment failure	3	Employ a driver, George to be responsible for Yotkom vehicles.  Identify key “go to” professionals and tradesmen to assist with local equipment failure: mechanical, plumbing, electrical, specialised medical machinery We are gradually finding reliable people to fill these roles
Staff turnover	4	To retain good staff: <i>Seek to raise wages where possible. Seek regular feedback from staff. Provide the best work environment, Listen to concerns. Provide ongoing training</i> <i>Develop an effective recruitment policy when new staff are required. Eg: interview structure, questions, referee requirements.</i> <i>Do a good job at orientation when staff begin work</i> <i>Provide resources needed to do their jobs properly.</i> <i>Fix things when broken</i> <i>Provide after work social activities for team building</i> <i>Provide on site chaplaincy and counselling services for staff/employees</i>

		<p><i>Provide extra benefits such as family health insurance cover for employees</i></p> <p><i>We are currently doing all these things</i></p>
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## 6.0 CROSS CUTTING ISSUES

### 6.1 Gender Analysis

Yotkom Uganda has partnered with the Days For Girls organisation providing education to communities regarding female health. Nurses at the Yotkom pharmacy are trained to educate women on sanitary issues and provide free DFG re-usable sanitary materials.

Yotkom Uganda has also identified a need to involve women in leadership roles. In response to this need Concy has been brought into the leadership team as a chaplain for the clinic and staff. Concy has been counselling patients and staff and leading devotions and worship within the clinic. Concy has also been attending Director's meetings as an important member of the leadership team at Yotkom.

Domestic Violence has been identified as a major issue . Many patients present with physical and emotional trauma related to the high incidence of domestic violence and alcohol abuse in the community. Yotkom is seeking to develop partnerships with other NGOs operating in the community to improve response to this community issue ,

### 6.2 Environment Assessment

Yotkom has researched the possibility of developing a recycling business in Kitgum district in order to deal with the problem of bottles and plastic bags littering the streets or being burned . Yotkom has identified other individuals within Kitgum community who could operate such a business and encouraged them in this task, sharing our knowledge and contact details. Yotkom collects all our plastic bottles and IV giving sets to be sent to Kampala for recycling.

Yotkom also uses old IV bags for making spacer devices for use in Asthma.

Yotkom has a solar generating power system which makes use of solar energy to provide for a large percentage of our needs.

Yotkom has a designated incinerator and ash pit for appropriate disposal of medical waste and sharps.

Yotkom is planting trees on our property

Yotkom may develop an interest in tree farming as part of an income generating activity in Northern Uganda

### 6.3 Family Planning Activities

Family Planning advice is given upon request at the clinic. Education to prevent unwanted teenage pregnancy is provided in partnership with Days For Girls. The clinic also provides counselling and contraception to women.

We have a midwife employed part time

Our nurses and clinical officers have received extra training in family planning which includes educating and informing patients and also being capable of inserting contraceptive devices like Implanon or IUD/Mirena

## **6.4 Disability**

### **Nodding Syndrome:**

Nodding Syndrome is common throughout rural areas often producing epilepsy and other disabilities in children who contract the disease. In April 2014 Dr Andrew Wright attended a World Health Organisation meeting that aimed to discuss approaches to Nodding Syndrome.

Dr Andrew Wright also visited the rural village of Okidi which has 200 children affected by the disease.

Our medical facility is involved in managing and treating some of these patients

Some of these patients present with complications associated with this condition, such as seizures, trauma, burns or sexual abuse.

Our team of health professionals are trained to deal with these issues through medical management, wound care, grafting, and access to counselling and support services.

### **Disability Care:**

The clinic has an ongoing relationship with two organisations in the community that specifically care for disabled persons. Yotkom clinical officers participate in home visits with Tender Trust which focuses on caring for disabled children. The second organisation that Yotkom partners with is NUCBACD.

## **6.5 Other issues...**

## **7.0 Australian Identity**

The Australian identity of the project is specifically demonstrated through the Yotkom logo. The logo represents the partnership between Australia and Uganda through picturing one black and one white person who join together to make the 'trunk' and 'branches' of the tree, as well as the growth of African sausage tree tubas and wattle from the branches. The Australian identity and input in the clinic is at times promoted through segments on local Ugandan FM radio

At a community level, the Australian identity has been developed through the presence of Australians at the clinic and within the local community through short term teams. Members of these teams have included professionals in the business and IT industries who have worked with the local team at the clinic to further develop business models, practices and procedures.

Finally, the exchange of letters, emails and weekly Skype 'hangouts' are regular occurrences to enable the building of strong relationships between the Ugandan and Australian communities. A team of 17 people from Australia visited the clinic in April 2016 to attend the opening ceremony. The Australian flag flies outside our clinic, along with the Ugandan flag.

Dr Andrew Wright and Annette Wright are well known Australians in the Kitgum community. They were both awarded the Member of the Order of Australia (AM) on Australia Day 2017 for International relations and their service to improve the health and wellbeing of the Acholi community of Northern Uganda.

## 8.0 DECLARATION

*The following declaration is made DR. ANDREW WRIGHT.*

I declare:

- this report is complete and accurate;
- the acquittal attached is a correct record of income and expenditure for this Project;
- the expenditure detailed in the acquittal has been extracted from the ADO's (or the In-country delivery organisation's) financial accounting records;
- a detailed record of income and expenditure at an individual item level is available if called upon;
- the funds allocated to the Project were used in accordance with the HealthServe Australia approved Project Proposal, including any variations to the proposal approved by HealthServe Australia in writing.

Signature: \_\_\_\_\_

Dr Andrew Wright  
Australian Director  
Yotkom Uganda

Date: \_\_\_\_ February 6. 2018 \_\_\_\_\_