

Bwindi Community Hospital

Annual Report
2010/2011



Vision: A healthy and productive community, free from preventable diseases and with excellent health services accessible to all.

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Introduction from the Medical Superintendent

Over the past three years, we have been implementing our first health Investment plan with a vision of attaining a healthy and productive community free from preventable disease and with excellent health services accessible to all. I am happy to report that we have achieved 80% of our short and medium term objectives strategic plan has been one of the most interesting experiences for the staff of Bwindi Community Hospital. There has been lots of challenges and some failures but obviously with more reason to celebrate.

Our community engagement has been focused on empowering community members to make informed choices concerning their health promotion and disease prevention. Consequently, community members are involved in planning, implementation and evaluation of our health care interventions. Client satisfaction is our top priority.

We have also ensured that our interventions achieve what we purpose to do through regular audits and Annual household survey that measures key impacts. This has formed a basis to inform our activities and ensuring that we produce health results at the lowest cost possible while promoting accountability and transparency at all levels of engagement.

Through Child Access Program (CHAP) and *eQuality Health* membership scheme, we have improved access to essential primary healthcare by over 70% across all age groups. CHAP has enabled children aged less than five years access services at an affordable cost of 500 UGX and 1,000 UGX for outpatient and inpatient services respectively. As a result, service utilization in this age group has improved by over 80% to 9,000 outpatient consultations a year. Under *eQuality Health* membership, the risk of having to pay for healthcare is shared by all community members in the scheme rather than individuals at a time they fall sick. In a way, the healthy contribute for the sick and so do the rich for the poor. Today over 19,000 members have subscribed

Since 2007, we have gained ground on other fronts. Deliveries at the hospital have increased by 75% to over 100 per month and so has been uptake of long term birth control methods. The percentage of women using modern birth control methods (CPR) in the area has increased from 25% to 40% while malaria diagnoses among children attending outpatients' clinic have declined from 23.2% to 13.5%. Neonatal mortality on the ward has also reduced from 24% to 9%.

For the last three years, we have been testing about 10,000 people for HIV annually. HIV diagnoses stand at 5% and we have got about 1,000 clients in our clinic.

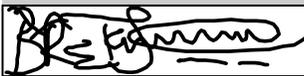
Last year, TB treatment compliance was 97%. 91% of the babies discharged from our PMTCT clinic tested negative for HIV at 18 months.

To realize such achievements has taken team work from all the hospital staff, the community, and all our various partners. Therefore, I wish to thank all of you who have supported us in many ways. Funding from the Uganda government has been increased to the level of a Private-Not-For-profit hospital and together with user fees and *eQuality* health premium, will account for about 20% of the running costs during 2011/12 compared with 10% last year. We have now launched our next three year health investment strategic plan worth \$ 3.2 M (7.4 billion UGX) with emphasis on performance management and quality improvement.

There remains a big funding gap for which we are grateful to all our partners for your continued support as we continue to work towards sustainable health care financing.

Together we can improve our lives for a better future.

I salute you all.



Dr. Birungi Mutahunga R.
Medical Superintendent BCH, August 2011.



Launching the 2011/12– 2013/14 BCH strategic plan: Dr. Birungi hands a copy of the plan to Rt. Rev. Dan Zoreka, Chairman Board of governors during the Board meeting.

Child Health

Goal: Improve child health through education, prevention & high quality treatment services in a child-centered environment

Pediatric services are offered both at the hospital and in the community. Our Pediatric unit has a 38 bed capacity and comprises of a neonatal room, a general ward, isolation area, nutrition and rehabilitation unit, a high-dependency area, a demonstration garden and a play area.

Many diseases have affected children in this area with malaria and malnutrition being the most common. On average, we admitted 15 malnourished children every month. It costs us a minimum of 540,000 shillings (\$245) to give a full package health care to every malnourished child on the ward. However, often it is the poorest members of the community who suffer from severe malnutrition and therefore cannot afford to pay for this service. Thanks to the Sustain for Life Charity for supporting this department.

As children admitted on our Pediatric recover, nurses take the opportunity to equip mothers with skills on how to prevent most of the diseases when they get back home.

Achievements

- Dr. Leonard Tutaryebwa finished training to offer specialist service as a pediatrician
- Acquired new heating system for the neonatal unit
- Reduced neonatal mortality rate on the ward further from 14.3% to 8.9%
- Created separate entrance for mothers to the Neonatal room to minimize cross infection
- Ran chronic care clinic
- Created a resuscitation and high-dependency area
- Reviewed policies and guidelines for management of various childhood conditions
- Improved follow-up of malnourished children using the HIV outreach team



Dr. Leonard and Jenny (VSO) review children on the ward

Aspirations

- Maintain the CHAP database and service delivery at a level that the Euro change Charity would continue supporting.
- Continue doctor-led chronic care clinics for all children with long-term health conditions
- Work with the Community Health & Batwa department to reduce child malnutrition in the community (baseline 10%)
- Reduce malnutrition mortality on ward to less than 4% (baseline 6.2%)
- Collaborate with the community leaders and other government agencies to improve child protection.
- Maintain high quality of care in the department
- Reduce deaths associated with neonatal conditions and malnutrition on the ward to less than 8.9% and 6.2% respectively.



Child Health staff prepare a child with head injury for transfer to Mbarara regional referral hospital

This department will cost us \$ 78,395 to run during 2011/12. Thank you to all our partners in improving child health.

HIV/AIDS & TB

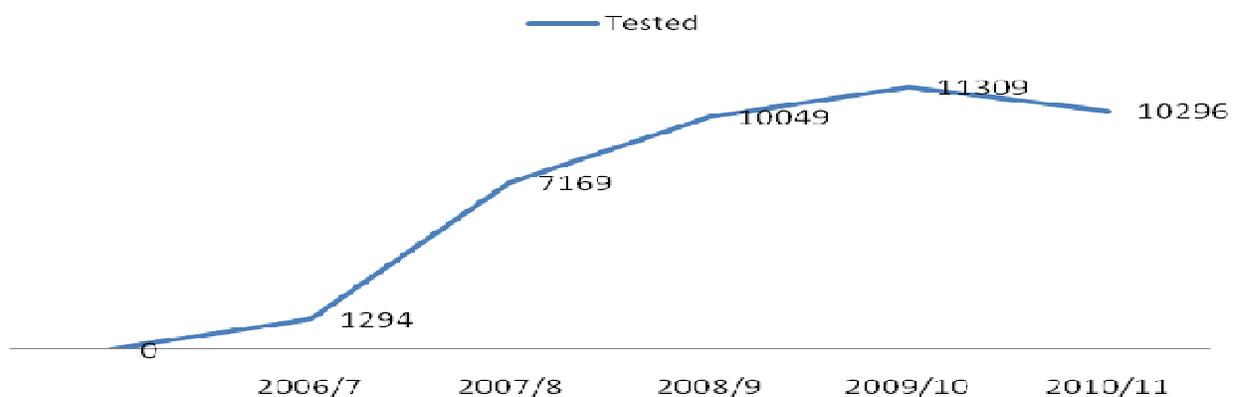
Goal: A community free from HIV/AIDS and TB transmission & with all infected clients accessing treatment programs in a safe, confidential & friendly environment.

This program area is progressing well with great support from the Elton John Aids Foundation (EJAF), STAR SW (Strengthening of TB and AIDS Responses in South Western Uganda) and all other well wishers.

HIV/AIDS & TB awareness has been created throughout the community. We have improved access too through Treat outreaches.

Over the last three years, we have been testing over 10,000 clients each year. Last year, we tested 10,296 people of whom 4.2% were positive for HIV. We also host a weekly Sexually Transmitted Infections (STIs) clinic with free consultation and treatment to adolescents. During the last quarter of 2010/11, more than 200 trained Village Health Promoters (VHPs) participated in our community TB screening program and referred TB suspects to a makeshift clinic for clinical examination. Sputum samples were tested right in the community. This approach has increased the number of TB diagnosis in the community since it started two years ago.

HIV tests done by BCH 2006 to 2011



HIV diagnoses were 4.2% among the 10,296 clients tested during 2010/11.

Achievements

- Partnered with STAR-SW in implementation of HIV/AIDS & TB activities
- Enrolled 332 HIV positive persons into care
- Offered HIV test to all pregnant women attending antenatal care at the hospital.
- Have maintained high quality Prevention of Mother-To-Child-Transmission of HIV services. 30 out of the 33 (91%) babies discharged from our PMTCT care were HIV free at 18 months. All the three positive for HIV had presented to our program later than one year.
- 105 patients with TB were identified and initiated on treatment
- Attained TB treatment compliance rate of 96.7%
- We have maintained high level of community sensitization through radio programs, Bataka group meetings, churches, and drama shows.

Aspirations

- Early detection of Tuberculosis of suspects in the community, prompt diagnosis using evidence based protocols, quality clinical assessment and successful completion of treatment
- Bi-monthly radio broadcasts to sensitize communities about HIV/AIDS and TB
- Be a model partner for organizations that support the hospital in delivery of HIV/AIDS and TB services
- To reduce the HIV and TB prevalence rates in the community.
- All pregnant women in our catchment area are tested for HIV and offered PMTCT services to all those found positive

Sexual Reproductive Health (SRH)

Goal: To reduce maternal morbidity and mortality, under fives mortality and TFR through , quality antenatal and post-natal care, safe deliveries for all women in our catchment area, improved access to treatment for STI's and all individuals having access to Family Planning.

Every day, an estimated 16 women in Uganda die due to complications related to giving birth. The majority of these complications are preventable. The main aim and goal of our SRH department is to reduce maternal morbidity and mortality, under fives mortality and TFR through , quality antenatal and post-natal care, safe deliveries for all women in our catchment area, improved access to treatment for STI's and all individuals having access to Family Planning.

This program is progressing with support from Marie Stopes International for the Reproductive Health Voucher Project (RHVP) .The Embassy of Japan is funding expansion of the Maternity ward to double bed capacity 40, and with additional consultation and office space. Our family planning team has been working hard to increase use of modern birth control methods in the community currently at 30%.

The team has embarked on the strategy of involving men in Family planning uptake and dialogued with them, 188 men are already involved from 9 parishes. We are also focusing on long term methods. Last year, over 500 clients either used implants or permanent methods

Aspirations

- Continue community sensitization about safe motherhood.
- Open the new maternity ward extension
- Continue offering high quality obstetric care.
- Maintain high standards and training in PMTCT
- Have 200 new clients for antenatal and 75% returning for fourth visit
- Offer a regular ultra sound scan service during antenatal clinics
- Get linked with other facilities for obstetric web consultations
- Increase deliveries to 200 each month



Deborah reviews mothers with MSI vouchers before discharge after delivery

Achievements

- Completed the SRH policy manual
- Had training for 28 staff on post-partum Intra Uterine Device
- Conducted 33 outreaches in regard to Family planning through Bataka groups (burial societies)
- Had the Reproductive Health Voucher program extended to April 2012
- Conducted over 900 deliveries with high quality obstetric care



Florence reviewing a mother in antenatal clinic

Surgery

Goal: Be able to offer emergency surgical care for obstetrics, trauma & non-trauma conditions at any time, and reduce disability.

This department has continued to offer quality surgical service in the area mostly dealing with obstetric emergencies. We have also continued to do planned surgery every week in addition to hosting camps.

Last year, we held a gynecology & surgical camp in May in which a variety of conditions ranging from goiters to obstetric fistulae were corrected. Thanks to our Swiss partners led by Dr. Forat for their huge investment. Dr. Seth and Meg Frenzen from USA were here again for the orthopedic camp.

Both teams are expected next year to continue mentorship and sharing of skills in the fields of radiology & imaging, surgery and anesthesia. Our staff and community sincerely appreciate this partnership.



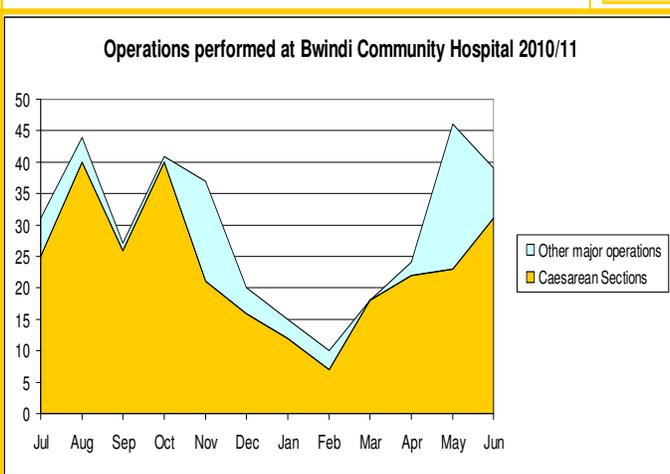
Screening of the patients who had come for the surgical camp

Achievements

- Have maintained high infection control standards
- Quality pre and post operative care
- Maintained surgical intervention time within 15-20 minutes target
- Had a Gynecology surgical camp and worked on 57 patients
- Had an Orthopedic camp
- Widened the scope of surgical interventions
- Acquired a Cystoscope and an Electrocautery machine

Aspirations

- Sealing floor with terrazzo
- Maintaining Cesarean section rate between 15-20%
- Procure more surgical equipment
- Sending anesthetic assistant for a refresher course in general anesthesia
- Start orthopedic services with both conservative and operative services
- Handling more complicated emergencies



Surgical team in action.

Community Health and Batwa

Goal: Effective and efficient health promotion and disease promotion through health education.

Uganda still has the highest deaths from malaria in Africa and some of the highest recorded malaria transmission rates in the continent. In this area of Kayonza, Mpungu and Kanyantorogo sub counties served by Bwindi Community Hospital, we are seeing a downturn trend of malaria cases.

Partnering with Buy-A-Net Canada in an effort to increase the number of people sleeping under Insecticide Treated mosquito bed Nets (ITN's), has brought great progress in the fight against malaria. In 2007, malaria in children seen at our OPD was at 23.2%. It has since reduced 13.5% in spite the number of children utilizing healthcare increasing seven-fold.

The team has also partnered with 694 Bataka leaders (burial society leaders) to complement the work being done by the over 200 Village health Promoters previously trained by the hospital.

Achievements

- Continued to teach men and women about good household sanitation
- Improved immunization coverage to 96% and 94% for DPT3 and Measles respectively.
- Reached 53 primary and secondary schools with health messages.
- Screened most children in Kayonza and Mpungu for malnutrition



Rev. Sam advising mothers to use mosquito nets to protect their children from malaria during a vaccination exercise at the hospital.



Agnes talks to mothers before malnutrition screening exercise at one of the outreaches

Aspirations

- Promote nutrition and food security especially among the Batwa population.
- Maintain high immunization coverage above the MoH set targets
- Collaborate with Child Health department to promote Child Protection
- Continue household sanitation & hygiene improvement
- Ensure constant supply of mosquito nets at village level for malaria prevention

Running this program will cost us \$78,395 during 2011/12. We appreciate all our supporters in this area.

Byumba Health Centre II

Goal: To provide sustainable quality healthcare with focus on disease prevention and improving utilization of health services.

In June 2008 we started a satellite health center nearby the Batwa pygmy settlement in Byumba in a bid to extend all our health care services nearer to the Batwa pygmies.

The Batwa are the minority group who initially lived in the Bwindi Impenetrable forest before they were displaced to protect the endangered mountain gorillas living there. These people have a much lower life expectancy than their neighbors, they are poorer, and have limited access to health care.

Over the past year, Byumba health center achieved tremendous progress in improving access to healthcare by the marginalized groups.



Patrick and Julius, both working at Byumba, review health center data



Byumba team attends to one of the patients

Achievements

- Attended to over 2,600 clients
- Over 90% of the Batwa utilized healthcare services at the facility including health education, reflecting an increase of 20% from the previous year.
- Offered HIV counseling and testing to every client
- Delivered quality family planning services
- Maintained the regular teachings in the community about disease prevention
- Offered quality antenatal and post-natal services
- Ensured that every child in the Batwa settlements complete the course of immunization

Aspirations

- Maintain high level of immunization coverage
- Maintain availability of child survival commodities
- Promote eQuality health membership scheme to improve service utilization
- Host a visiting dental team from BCH twice a month
- Offer basic eye care clinic once a month
- Delivering quality Family planning services to the population
- Maintain focused high quality antenatal and post natal services
- Health education for disease prevention

Running Byumba for the next 12 months will cost us \$ 13,101. Our hearty thanks go to all who have supported this unit.

Out Patient, Dental and Eyes department (OPD)

Goal: Any person with a health problem can access prompt and high quality services including health promotion and education.

This department is the gateway of most patients to the hospital. It enables us give quality health care and treatment that does not require an overnight stay in the hospital. There were Last year over 22,000 consultations of which 30% were children aged less than five years.

In OPD, attending to the very sick swiftly is a priority. Disease treatment and prevention are equally emphasized.

Achievements

- Continued to manage common eye problems
- Have maintained dental services
- Revised triage protocol
- OPD attendance increased by over 25% due to increased uptake of eQuality health membership scheme.
- Maintained the monthly chronic care clinics for epilepsy, hypertension and diabetes.
- Introduced an electronic database to monitor follow up of patients with chronic health problems.
- Run a daily clinic for Sexually Transmitted Illnesses (STI's).



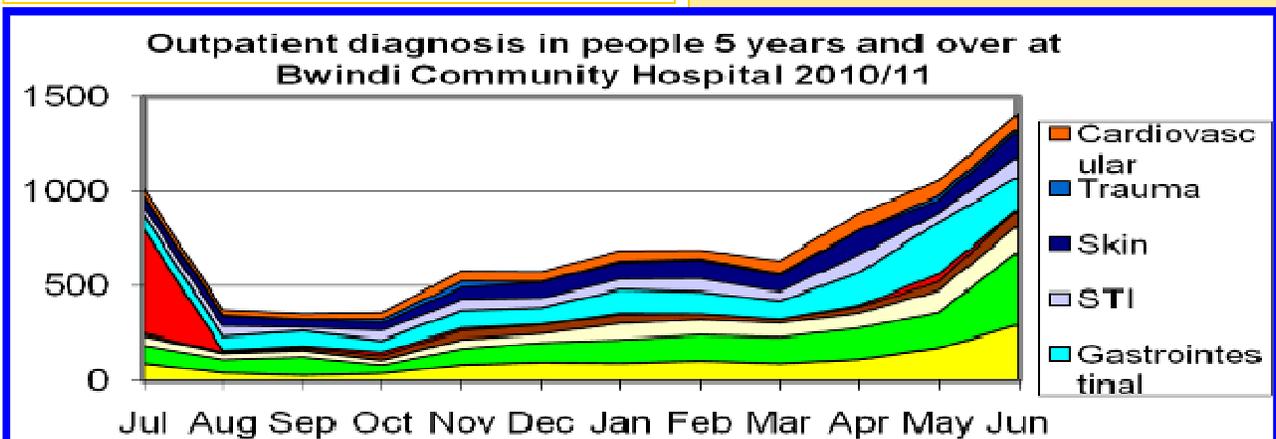
In the picture above, Elly teaches about Dental health



Clinical officer, Diana Among sees a patient in the OPD

Aspirations

- Maintain chronic care clinics
- Make sure every patient attending OPD is offered an HIV test
- Place a television in OPD waiting area for health information.
- Hope to start a monthly mental clinic
- Employ 1 clinical officer, 1 nurse and one customer care provider to improve the triage process and guiding clients
- Create more room for consultations and emergency treatment



Adult Inpatient and Diagnostics (AIP)

Goal: To ensure the provision of excellent medical and nursing services for adult in patients that cares for the sick , save lives, prevent spread of infectious diseases and reduce disability.

Inpatient treatment is the most intensive form of care here at the hospital, indicated for a phase of illness that requires a great deal of nursing and medical intervention. At Bwindi Community Hospital we pride ourselves on offering a high nurse-to-patient so that each patient can receive the individual attention he or she requires.

With the patients' permission, we encourage family participation and invite consultative discussion from doctors in and outside the hospital.

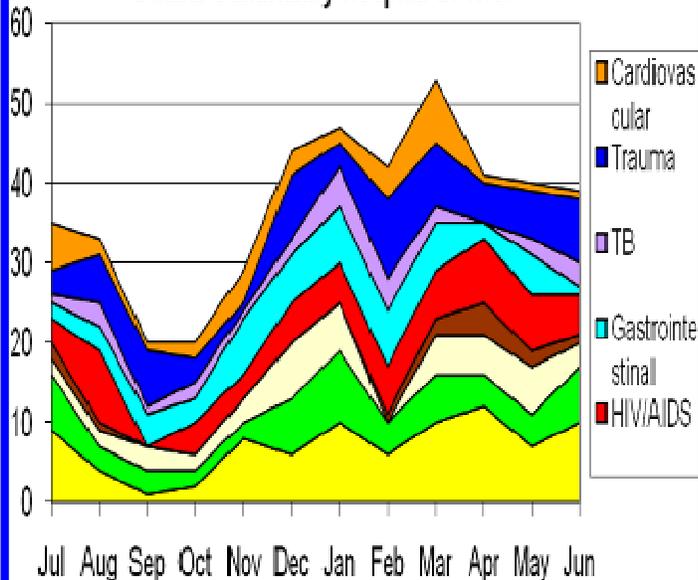
Achievements

- Did palliative care training and developed guidelines for managing terminally ill patients
- Provided a high level of services to over 9,000 patients with quality investigations
- Acquired a fridge, second microscope and centrifuge for the laboratory
- Improved quality control
- Provided regular high quality x-ray and ultra-sound services



Moses and an attendant administer medicine to a patient on adult ward

Reasons for admission in people > 5 years at Bwindi Community Hospital 2010/11



Aspirations

- Complete Adult inpatient manual including operational and clinical policies
- Complete the formulary review process of medicines management
- Improve quality of care for the dying
- Manage people with mental health illnesses
- High quality control levels in the Laboratory
- Introduce new tests and equipment in the Laboratory including a Complete Blood Count machine (CBC), ECG machine, a Hematocrit centrifuge machine and a new fridge

This department will cost us \$ 58,985 in 2011/12. We are grateful to all who have supported this program area.

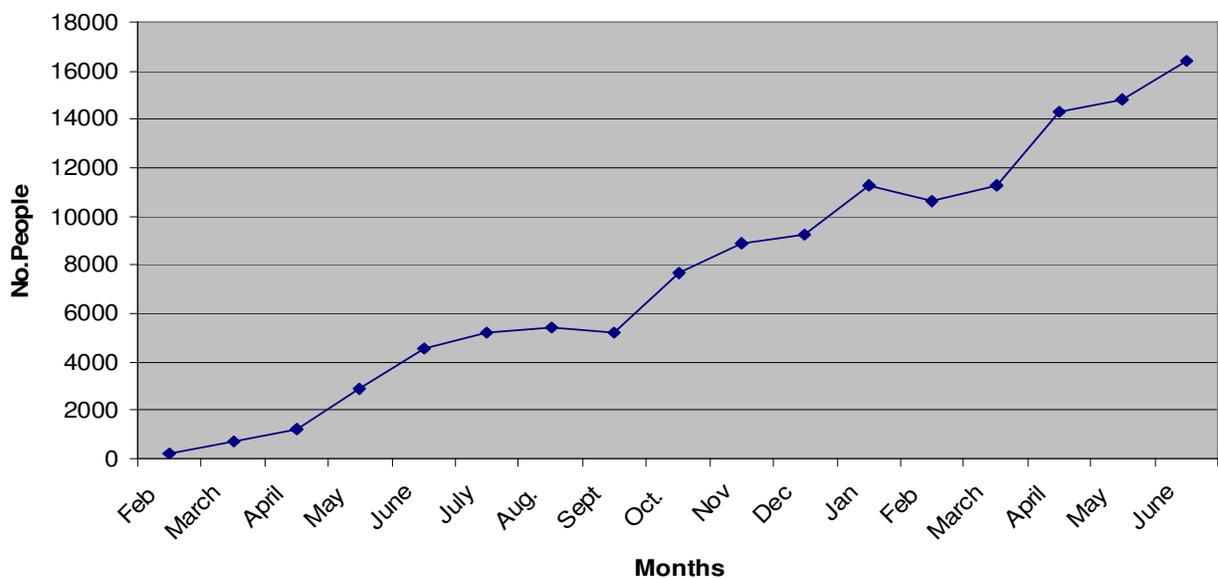
eQuality Health Bwindi

This health membership scheme was launched at the beginning of 2010 not only as a possible solution to sustainable funding of healthcare in the area, but also a measure of promoting equity.

This program has now gone beyond the initial two sub-counties of Kayonza and Mpungu, to include Kanyantorogo in an effort to have our range of quality health care services accessible to all. Its membership is currently in excess of 17,000 people the consequence of which consultations at the hospital have also increased.

Under this scheme, people aged 5 years and above pay a small annual fee of \$3 and access our range of hospital health care services at shs.1, 000 per visit.

eQuality health membership growth since February 2010



People register with eQuality health insurance scheme

The Scheme is run at Bwindi Community Hospital by International Medical Foundation (IMF)

This scheme offers a wide range of services to its members like admissions to the hospital, operations, dental and eye care, clinics for diabetes, high blood pressure, skin, mental health, Sexually Transmitted Infections (STI's), gynecology and orthopedic problems.

We are grateful to the International Medical Foundation (IMF), Kampala and all our supporters in making this dream come true.

Public Relations and Fundraising

Goal: Keep a positive image of the hospital and keep confidence of all the supporters/ partners and be able to raise enough funds to meet funding gap for both capital and running costs

Over 90% of the hospital activities depend on the money raised through donations. This work is coordinated by the Communications team to ensure total accountability, timely and accurate information sharing with all our partners.

Efforts continue to raise more funds locally through eQuality health membership scheme and the government and the outlook is promising.

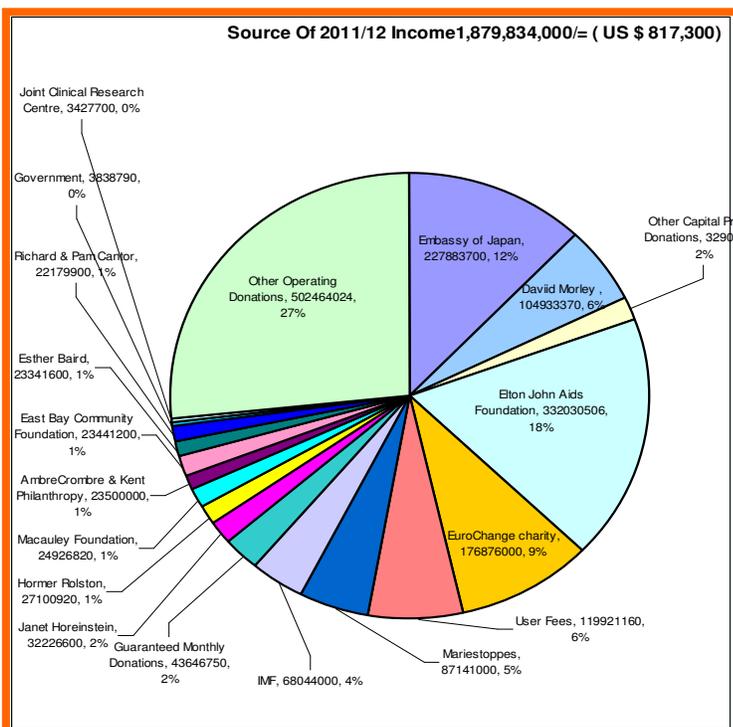
Last year, we were able to raise \$670,000 for which we owe gratitude to all our supporters. Our next challenge is raising \$800,000 to meet running costs during 2011/12.



Entertaining stakeholders during the official launch of the hospital

Achievements

- Produced quarterly newsletters
- Maintained the notice boards with monthly updates inform of Latest news
- Distributed Leaflets, Newsletters and Annual reports
- Timely communications with the donors and partners
- Coordinated the grant support given by the Embassy of Japan
- Maintained relationships with tourists and tour companies
- Planned and hosted Stars Foundation representatives
- Partnered with Imaging the World (ITW)
- Maintained the hospital website
- Designed and printed HIV posters
- Got 6 new computers for the Internet Café



Aspirations

- Raise funds for staff housing
- Identify and establish relationships with prospective major donors
- Research and submit more grant proposals to support health programs
- Maintain relationships with donors and partners
- Give timely updates to donors
- Secure funds for staff scholarships

Administration

Goal: Quality logistics, effective maintenance and steady expansion of the infrastructure of the Hospital to meet the health care needs of the community. Good internal communications & good communication with partners & the community.

The Administration department directly supports all hospital functions which include hospital operations, policies, over sees and maintains the operating budget and human resource functions. While this department does not work directly with patients, their ability to manage efficiently directly affects the quality of care patients receive at the hospital.



Harriet sorts out linen in the laundry

Achievements

- Collected excellent data
- Successfully coordinated hospital activities around the strategic plan
- Maintained efficient motor vehicle services
- Maintained a waste management system that meets government standards
- Developed a comprehensive hospital security policy
- Enriched staff with computer skills
- Re branded the ambulances with 'Bataka Twetambire' to promote eQuality Health membership scheme
- Renovated adult inpatients ward and out patients' department
- Procured modems and routers for stable network
- Engraved most hospital items
- Purchased iron sheets for roofing
- Developed templates to capture fuel supply

Aspirations

- Provide decent staff accommodation
- Ensure good governance of the hospital through accurate recording of decision processes
- Coordinate activities of the hospital
- Enable creation of the a pharmacy program area
- Maintain water and power supply of the hospital
- Maintain safety and security at high levels
- Maintain a clean, Laundry and waste management
- Complete Maternity extension
- Purchase equipment for the maternal extension



Doubling capacity of the Maternal Health unit: work in progress.

Chaplaincy

Goal: To improve spiritual wellbeing of staff, patients and the surrounding community.

It is now about 8 months since the ministry of Chaplaincy began in the hospital as a new program area under support services. This new program area is progressing fast under the leadership of Rev. Canon Benard Bagaba.

The department provides spiritual guidance and counseling services to the community.

Every Sunday, the hospital community has an opportunity of congregating together for praise and worship. There is also weekly spiritual outreach ministry to the Batwa pygmies in their respective settlements.



Rev. Canon Bagaba baptizes a child during one of the Sunday services

Achievements

- Systematic sharing of the word of God and prayer
- Spiritual counseling to patients and their attendants on the wards
- Regular Sunday services
- Conducted a mass wedding
- Instituted the chapel council
- Acquired a fully fledged office
- Got 2 chalices and a Lectern

Aspirations

- Equip more staff members with preaching skills
- Continue patient and staff ministry
- Acquire modern music system and band for praise and worship
- Engage in outreach missions to the community and other institutions

Human Resources (HR)

Goal: Recruitment & retention of the best available staff at every level of the organization.

This program has achieved a lot of progress in recruiting skilled and qualified individuals capable of delivering the hospital's strategic plan. The hospital has maintained 'equal opportunity' policy in staff recruitment and development.

The current workforce stands at 112. This year, we awarded five scholarships in the fields of nursing, obstetrics, imaging, information management and accounting to widen the scope of our specialist services.

Our staff have also had an opportunity to share skills with a couple of volunteers.

Our humble appreciation go to Andy and Jenny Farrer, Nicholas Farrer, Morgan , Nina Hardgrib, Amanda Nielson from Denmark, Walt Liebkemann and Daniel del portal.

Sharing experience with these great people was very enriching to our staff and community.

Achievements

- Involved all staff in preparing the hospital's next three year strategic plan
- Awarded five scholarships to staff.
- Maintained good staff welfare
- Entire staff participated in revision of the Terms and Conditions of service at BCH
- Two staff completed specialist training in Public Health and Pediatrics
- Have ensured that every staff has a clear job description, appointment letter and regular appraisal
- All staff vaccinated against Hepatitis B



Sharing experience with Volunteers: Dan Del Portal and Hope in a triage role play during one of the teachings.

Aspirations

- Provide descent staff accommodation
- Continue providing preventive and curative occupational health service for staff
- Provide staff with up-to-date information for continuous professional development
- Help new staff to understand the organization thoroughly
- Maintain adequate staffing to cover all program areas



Party time: BCH staff take to the floor celebrating end of year achievements

Accounts

Goal: Effective involvement in raising financial resources for the Hospital, their effective management and quality financial reporting

This financial year 2010/11 has a 7% drop in Operating expenditure; from **US\$740,000** in the year 2009/10 to **US\$670,000** in 2010/11 and this is attributed to

- Intergration of outreach and other activities to maximize efficient utilization of resources
- Forfeiture of a few activities that we were not able to get funding for
- and scale down of a few cost items. All of which rhyme with our strategy to consolidate;

The budget for the year 2011/12 of **US\$762 350** indeed upholds the consolidation strategy but has provided for intensifying a few activities to enhance Maternal & Child health and Community Health if we get the Stars Foundation award and the Buy-A-Net Malaria prevention group in partnership with CIDA grant.



Accounts team share a light moment

We are happy to highlight that;

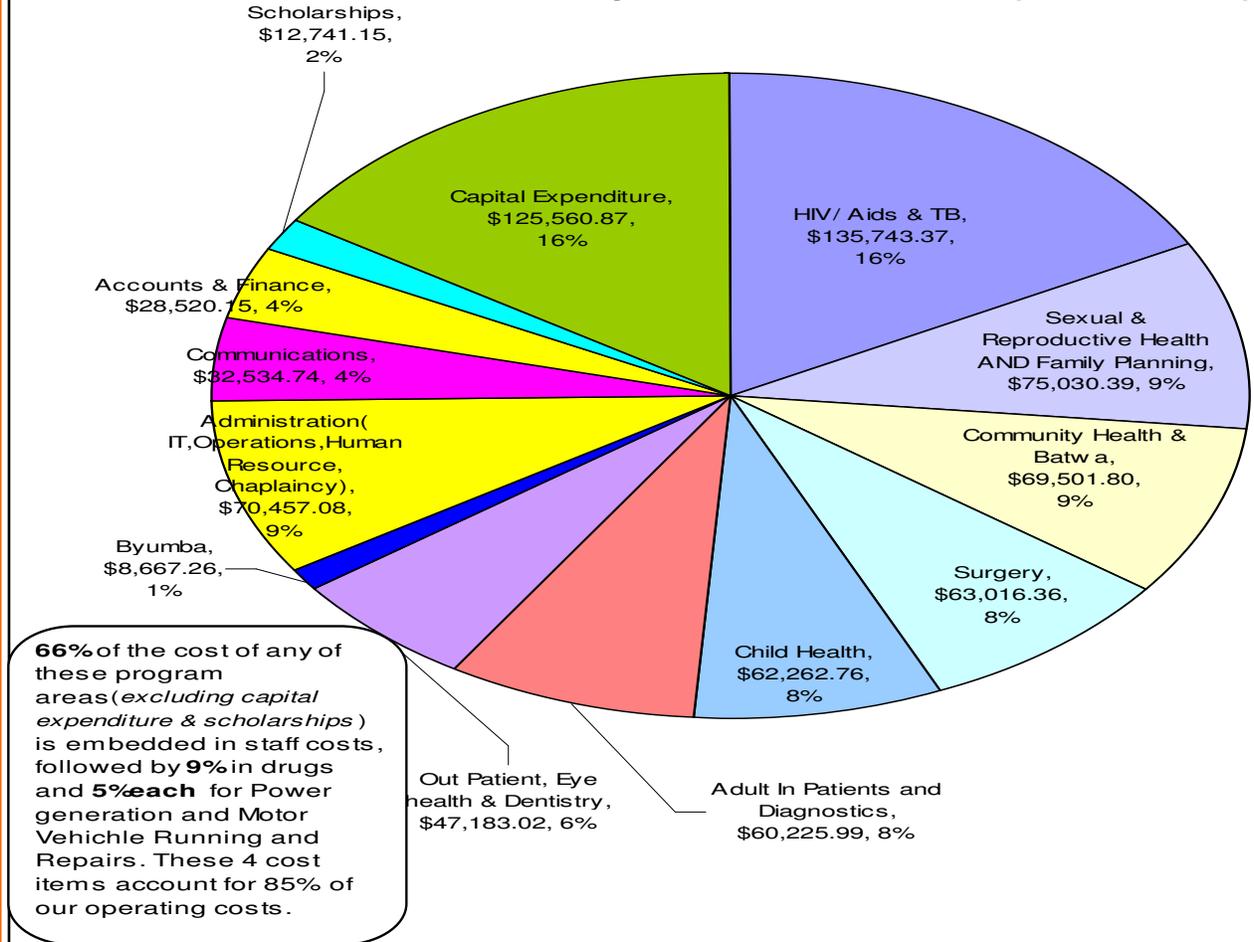
- The income generated from subscriptions to the eQuality health scheme and the user fees is steadily increasing. If maintained we shall soon be less donor dependent.
- We have maintained all the achievements of the past years (accountability to all our stakeholders, financial audits and efficiency in our banking system)
- We are now emphasizing securing grants to answer the issue of non guaranteed income since these are usually for a period of one or more years

Challenges

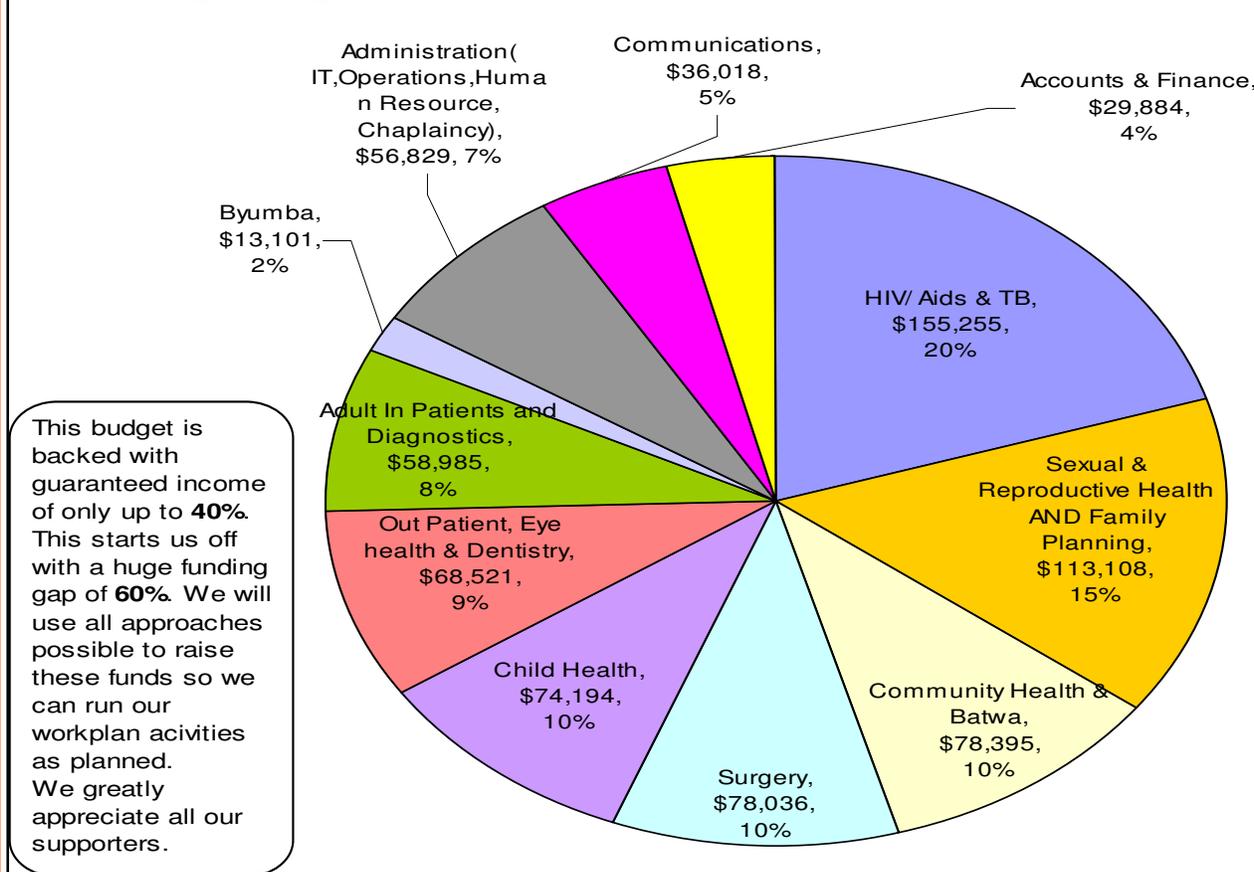
- Non guaranteed funding for our operating costs
- Inability to hold any funds as reserve for future operating costs and asset replacement
- Minimal government support
- Funding for our capital projects

These remain our major focus to eventually accomplish all our work plan activities.

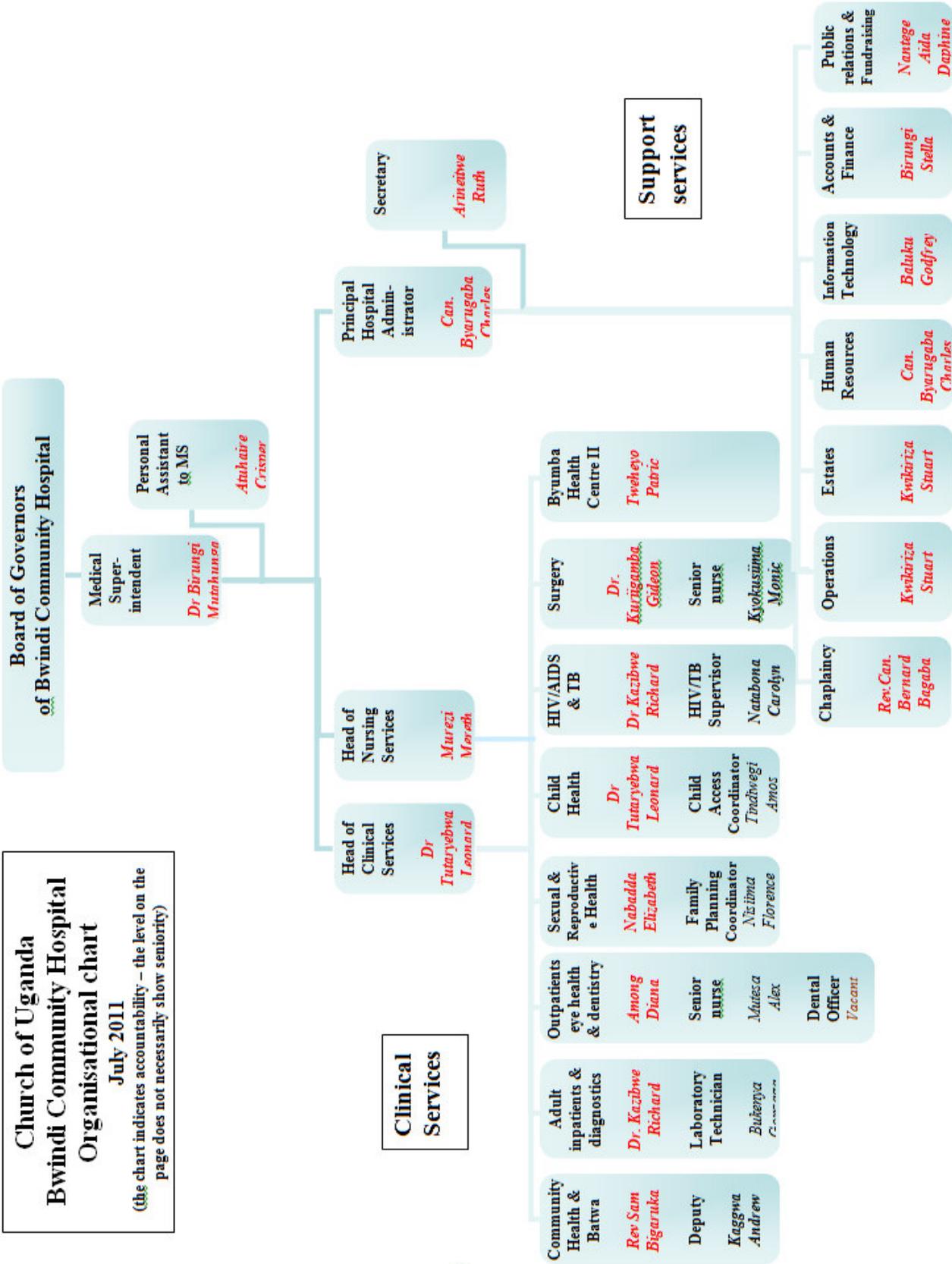
2010/11 Expenditure 1.820Billion (US\$791,450)

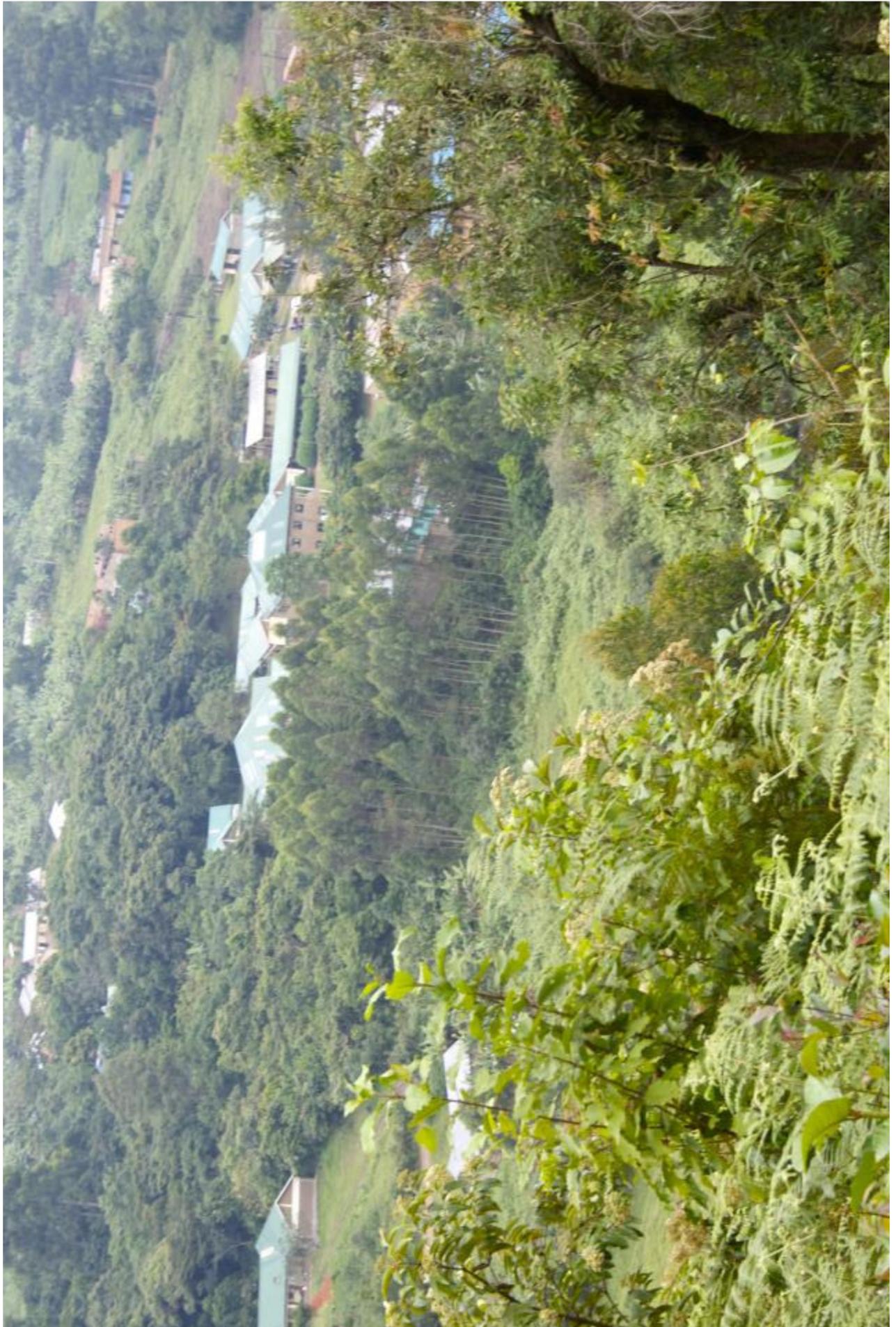


Operating Budget 2011/12 US\$762,326



**Church of Uganda
Bwindi Community Hospital
Organisational chart
July 2011**
(the chart indicates accountability – the level on the page does not necessarily show seniority)







eQuality registration at BCH



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