

FIVE YEAR STRATEGIC PLAN FOR MILDMAY HOSPITAL UGANDA (MHUg)

2023/24 – 2027/28

Consolidating the Gains On The Journey From Good to Great

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**For every house is built by
someone, but God is the
builder of everything.**

Hebrews 3:4 (NIV)

Theme:

Consolidating Gains On The Journey from Good to Great

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List of Abbreviations and Acronyms

ADR	Adverse Drug Reaction	FDCO	Foreign, Commonwealth and Development Office
AHPC	Allied Health Professionals' Council	FY	Fiscal Year
AI	Artificial Intelligence	GCBF	Group Central Business Forum
AIDS	Acquired Immune Deficiency Syndrome	GCLP	Good Clinical Laboratory Practice
ANC	Antenatal Care	GCP	Good Clinical Practice
AOP	Annual Operational Plan	GDP	Gross Domestic Product
ART	Antiretroviral Therapy	GF	Global Fund
BMZ	Germany Ministry of Economic Cooperation and Development	GKMA	Greater Kampala Metropolitan Area
CAA	Civil Aviation Authority	GLT	Group Leadership Team
CBO	Community-Based Organization	GNI	Gross National Income
CCCP	Comprehensive Customer Care Plan	GoU	Government of Uganda
CDC	US Centers for Disease Control and Prevention	GSDR	Global Sustainable Development Report
CDDPs	Community Drug Distribution Points	HDU	High Dependency Unit
CEO	Chief Executive Officer	HIV	Human immunodeficiency Virus
CI	Compassion International	HMIS	Health Management Information System
CIQA	Chartered Institute of Quality Assurance	HQ	Headquarters
CLADs	Client-led ART Distribution Groups	HRM	Human Resources Management
CLP	Customer Loyalty Program	HSR	Human Subjects Research
CME	Continuing Medical Education	HTM	HIV, TB and Malaria
COMESA	Common Market for Eastern and Southern Africa	ICU	Intensive Care Unit
COVID	Corona Virus Disease	IDI	Infectious Diseases Institute
CPD	Continuing Professional Development	IHI	Institute for Healthcare Improvement
CPHL	Central Public Health Laboratory	IOM	Institute of Medicine
CQI	Continuous Quality Improvement	IP	Implementing Partner
CRM	Customer Relations Management	IPD	In-patient Department
CSR	Corporate Social Responsibility	IPU	In-patient Unit
CSRs	Customer Service Representatives	ISO	International Standards Organization
CT	Computer Tomography	IT	Information Technology
DFID	UK Department for International Development	KPI	Key Performance Indicator
DQA	Data Quality Assessment	KRA	Key Result Areas
DREAMS	Determined, Resilience, Empowered, AIDS-free, Mentored and Safe	LIMS	Laboratory Information Management System
DSDM	Differentiated Service Delivery Model	LIS	Laboratory Information System
ECD	Early Childhood Development	M&E	Monitoring and Evaluation
EID	Early Infant Diagnosis	MCH	Maternal and Child Health
EMDEs	Emerging Market and Developing Economies	MGLSD	Ministry of Gender, Labor and Social Development
EMR	Electronic Medical Records	MHUG	Mildmay Hospital Uganda
ERP	Enterprise Resource Planning	MIHS	Mildmay Institute of Health Sciences
FBOs	Faith Based Organizations	MLG	Ministry of Local Government
FCA	Family-centered Approach	MO	Medical Officer
FCO	Foreign and Commonwealth Office	MOH	Ministry of Health

MOU	Memorandum of Understanding	RIS	Radiology Information Systems
MOV	Means of Verification	RMCH	Reproductive Maternal and Child Health
MRCU	Mildmay Research Center Uganda	S&P	Sustainability and Partnerships
MUg	Mildmay Uganda	SAI	Six Aims for Improvement
NCDs	Non-Communicable Diseases	SBU s	Strategic Business Units
NDA	National Drug Authority	SDGs	Sustainable Development Goals
NDP	National Development Plan	SOP	Standard Operating Procedure
NGO	Non-Government Organization	SP	Strategic Plan
NHS	National Health Services	SRH	Sexual and Reproductive Health
NICU	Neonatal Intensive Care Unit	SRHR	Sexual Reproductive Health and Rights
ODA	Overseas Development Assistance	STI	Sexually Transmitted Infections
OPD	Outpatient Department	TA	Technical Assistance
OVC	Orphans and Other Vulnerable Children	TAT	Turn-Around-Time
OVI s	Objectively Verifiable Indicators	TB	Tuberculosis
PACS	Picture Archiving and Communication Systems	TPP	Transfer Pricing Policy
PAMSCO	Programme Acquisition and Management Steering Committee	TQM	Total Quality Management
PEPFAR	President's Emergency Plan for AIDS Relief	TSA	Technical Support Agency
PLHIV	People Living with HIV	UAC	Uganda AIDS Commission
PMS	Private Medical Services	UK	United Kingdom
PMTCT	Prevention of Mother-to-Child Transmission	UMDPC	Uganda Medical and Dental Practitioners' Council
PND	Project Never Die	UN	United Nations
PNFP	Private-not-for-profit	UNAIDS	Joint United Nations Programme on HIV/AIDS
POC	Point of Care	UNCST	Uganda National Council for Science and Technology
POM	Programme Oversight Mechanism	UNHCR	United Nations High Commissioner for Refugees
POST	Programme Oversight Senior Team	UNMC	Uganda Nurses and Midwifery Council
PSU	Pharmaceutical Society of Uganda	VL	Viral Load
QA	Quality Assurance	VMMC	Voluntary Medical Male Circumcision
QMS	Quality Management Systems	WFP	UN World Food Programme
RBM	Results Based Management	WHO	World Health Organization

Foreword by Board Chairperson

IT is with great pride and anticipation that I present to you Mildmay Hospital Uganda's Strategic Plan for the period 2023-2028 which is an inaugural plan for a budding entity. As we embark on this transformative journey, I am delighted to convey the vision and goals that will define the future of the hospital within the larger context of the Mildmay Uganda Group whose theme is ***“Consolidating our Gains on the Journey from Good to GREAT.”***

In striving to be ***“A Leader in Quality Healthcare for All,”*** this strategic plan marks a significant milestone as it outlines the new direction for the hospital, which is poised to evolve into a comprehensive general hospital. The strategic focus is to ensure the delivery of high-quality healthcare services across diverse sections, catering to the distinct needs of the community. With the establishment of a general section, a private section, a dedicated area for community activities, and an innovative grants section, the hospital is aligning its capabilities with the evolving healthcare landscape. One of the pivotal components therein is the expansion of hospital services particularly by offering comprehensive diagnostics encompassing laboratory and radiology/medical imaging. In so doing, the hospital will enhance its capacity to provide holistic care to its patients. Also at the heart of this plan is a commitment to sustainability, enabling the hospital to not only provide outstanding medical care, but also contribute to research, training, and capacity building. This strategic pursuit is underpinned by the hospital's dedication to quality which will serve as the bedrock of our commitment to excellence in patient care.

As we roll this plan out, we recognize the value of strategic partnerships including with the private sector, the local community in the hospital's catchment area, and esteemed organizations such as the United Nations High Commissioner for Refugees, Compassion International, Uganda Revenue Authority and Civil Aviation Authority among others. Moreover, we are humbled to collaborate with funding partners including the United States Centers for Disease Control and Prevention through the Infectious Diseases Institute, as well as the Government of Uganda through Ministry of Health, Ministry of Local Government and Ministry of Gender, Labour, and Social Development. These partnerships embody our collective determination to elevate healthcare standards for the greater good of our community.

As we gaze into the future, we envision a hospital that stands as a beacon of healthcare excellence, compassion, and innovation. Our commitment to sustainable operations, research, and training will empower us to make lasting contributions to the healthcare landscape. Together, we are forging a path that positions Mildmay Hospital Uganda as a dynamic, transformative force in healthcare provision. As I conclude, I extend my heartfelt gratitude to all hospital staff, valued partners, and the community that entrusts us with their health.

Dr. Jeff Sebuyira
Board Chairman

Message by the Hospital Director

I AM delighted to share the Mildmay Hospital Uganda strategic plan 2023/2028, themed ‘Consolidating gains on the Journey from Good to Great’. Mildmay Hospital Uganda (MHUG) is a private-not-for-profit (PNFP) general hospital operating as one of the entities under Mildmay Uganda (MUG). MHUG presents this strategic plan with a resolute commitment to excellence and the pursuit of our vision, ‘A Leader in Quality Healthcare for All’, guided by our mission to provide ‘Patient centered Care for All’. As we embark on this journey, we draw inspiration from our rich Mildmay legacy and continued learnings in healthcare delivery using a family-centered approach, customer-first culture, quality standards, and health service integration. These foundational elements will guide us in offering quality healthcare services to our valued clients. This will be our maiden strategic plan for MHUG as it charts its path toward autonomy from the parent NGO. Reflecting on the journey that started with the incorporation of MUG as a local NGO in 2011, the Centre of Excellence had a Directorate of Clinical Services, which in 2017 evolved into a General Hospital following the rollout of the MUG 30-year master plan.

We take pride in the achievements of the previous strategic period (2018-2023), during which MHUG expanded its service capacity to a 24-hour general hospital with outpatients and inpatients services for General Medicine, Pediatrics & Adolescent Health, Obstetrics & Gynaecology, Surgery, Emergency Care, Specialist Clinics, Diagnostic Services, Pharmaceutical Services, Rehabilitation Therapies, and Behavioral & Psychosocial Support. Affiliations with sixteen partner health insurance and corporate companies and undertaking community cooperate social responsibility outreaches signifies our commitment to broadening access to quality healthcare in the next period. Our unwavering dedication to quality was exemplified by the attainment and maintenance of ISO 9001:2015 and ISO 15189:2022 for our management systems and laboratory, respectively. MHUG contributed to the national fight against the COVID-19 pandemic in screening, testing and clinical management of COVID-19 patients, serving communities within the Greater Kampala Metropolitan Area and Refugee settlements in collaboration with UNHCR. Our hospital services have impacted the lives of children, adolescents, men, and women, reaching over 100,000 hospital attendances annually. The success of initiatives like the Saving Lives marathons has contributed to our Emergency Care and Neonatal Intensive Care Unit, further reinforcing our commitment to transforming Communities.

None of these accomplishments would have been achievable without the unwavering support of the Mildmay Uganda Board of Governors, the Hospital Development Committee of the Board; our dedicated Hospital, NGO, MIHS and MRCU staff and volunteers with their families; clients and their families and work ecosystems; Line ministries, Wakiso district local government and regulatory authorities; donors, partners, friends of MUG and the visionary leadership of Mildmay Uganda. We are indebtedly grateful to you all.

The 2023/2028 Strategic Plan, shaped through comprehensive consultation and market research, envisions MHUG’s evolution into a modern General Hospital that extends its reach across diverse economic strata of its clientele and their families in Uganda, thus contributing even more significantly to the national economic and global sustainable development agendas. In the new period, we will focus on i) *Expand Equitable Access to Healthcare*, ii) *Enhance capacity of MHUG to host Research and Training* iii) *Strengthen institutional capacity of MHUG to sustainably deliver its mandate*. Our strategic goals are underpinned by a commitment to transform communities through quality healthcare

delivery. As such, I call upon my colleagues to a commitment to diligence, accountability, the pursuit of updated knowledge & ethical practice, compassion, and customer centricity in service towards our clients and their families and in our work with stakeholders. Our business enablers: - Customer First Culture, Leadership Development, Quality Management Systems and Total Marketing, remain relevant in this period to spur us on the journey that strives for excellence.

While the future brings both excitement and challenges living in a Volatility, Uncertainty, Complexity, and Ambiguity (VUCA) environment, we remain cognizant that the ultimate builder of our hospital is God. With faith and determination, we embark on the next five years with a profound sense of strategic guidance. We are poised to shape the future as we continue to put an indelible footprint in sustainable community transformation through quality healthcare for national development.

For God and My Country.

Dr Yvonne E.M. Karamagi/ Hospital Director

Executive Summary

MILD MAY Hospital Uganda (MHUG) has developed this Plan comprising its first Strategic Plan as it embarks on the growth journey that will witness its incorporation as a legal entity under the Mildmay Uganda (MUg) Group. The Board of Directors led the process of developing this MHUG Strategic Plan for 2023-2028. The planning process involved global, national and organizational context analysis using diverse tools. It also involved strategic planning for the Mildmay Uganda (MUg) NGO and the Mildmay Institute of Health Sciences (MIHS). In 2022, MUg had done strategic planning for Mildmay Research Centre Uganda (MRCU). The Strategic Plans for the 4 MUg Entities [i.e., the NGO, MIHS, MRCU and MHUG] run for 5 years from July 01, 2023, to June 30, 2028. The four plans are synchronized to synergize the investments and efforts across MUg Group during 2023-2028. The process included major review and planning exercises conducted during the 2018-2023 period. The planning steps were overseen by the Board and directed by the Executive Director. The 2023-2028 Corporate Planning Team drawn from the NGO, MIHS, MRCU and the Hospital developed the Plans. Key planning steps included (i) strategy review and design sessions; (ii) program design sessions; (iii) leaders and managers planning meetings and workshops; (iv) directors planning meeting and workshops; (v) Board validation meetings; (vi) analyses of policy and strategy frameworks; (vii) stakeholder consultations; and (viii) literature reviews.

Guideposts for 2023-2028 planning included: Uganda National Vision 2040; Uganda's Third National Development Plan (NDP III); Ministry of Health Strategic Plan 2020/21-2024/25; other Government of Uganda Sector Plans; Sustainable Development Goals (SDGs); UNAIDS Fast Track Initiative to End HIV; Global Fund Strategic Plan 2023-2028; PEPFAR's Five-Year Strategy; and Mildmay Uganda 30-Year Master Plan.

The 2023-2028 planning process developed a Vision, Mission and Values for MHUG aligned with the MUg Vision, Mission and Values and contextualized to the Hospital's circumstances.

Over the period 2023-2028, MHUG will focus on the three Strategic Goals below.

Strategic Goal 1: Consolidate and position MHUG as a lead brand in expanding equitable access to quality healthcare.

Strategic Goal 1 will be achieved by implementing the Strategic Objectives outlined below.

- 1.1:** Standardize the business model underlying the MHUG portfolio.
- 1.2:** Run the General Hospital Service as a viable healthcare brand that addresses patients' needs and responds to emerging healthcare needs.
- 1.3:** Run Bethany Private Wing as a viable healthcare brand that satisfies patient expectations and responds to emerging healthcare needs.
- 1.4:** Run MHUG auxiliary hospital services as viable and sustainable business ventures.
- 1.5:** Develop and implement sustainable grants and community projects.
- 1.6:** Institutionalize the MHUG quality philosophy across the Hospital.

Strategic Goal 2: Strengthen the capacity of Mildmay Hospital Uganda (MHUG) to host research and training.

Strategic Goal 2 will be achieved by implementing the Strategic Objectives outlined below.

2.1: Enhance the capacity of MHUG pharmacy and diagnostic services to support research and training.

2.2: Develop and manage effective training and research partnerships and collaborations.

2.3: Building the human resource capacity of MHUG to support experiential learning and research.

Strategic Goal 3: Strengthen the institutional capacity of MHUG to sustainably deliver its mandate.

Strategic Goal 3 will be achieved by implementing the Strategic Objectives outlined below.

3.1: Build MHUG corporate governance for effective oversight.

3.2: Ensure sustainable MHUG resourcing through a dual-track mechanism built on 70% healthcare revenue and 30% grants and other non-healthcare revenue.

3.3: Attract productive inspired human resources with the right skills, attitude and commitment, place them in a progressive MHUG culture and support them excel.

3.4: Provide effective and efficient finance, administration and support.

3.5: Leverage shared Group services and resources.

3.6: Undertake joint Group-level strategic investments.

This Strategic Plan for MHUG will be implemented in synchrony with the Strategic Plans of the MUg entities comprising the NGO, MIHS and MRCU. The Plans have a Rolling Mechanism involving rapid review prior to developing Annual Operational Plans (AOPs) for subsequent years.

Implementing this MHUG Strategic Plan will cost **UGX 30,264,011,814**.

1 Introduction

1.1 What is Mildmay Uganda Hospital (MHUG)?

Mildmay Uganda Hospital (MHUG) is a private-not-for-profit (PNFP) general hospital operating as one of the entities under Mildmay Uganda (MUG). With the incorporation of MUG as a local NGO in 2011, the Centre of Excellence had a Directorate of Clinical Services which in 2017 evolved into a General Hospital following rollout of the MUG 30-year masterplan.

The scope of services offered by the hospital include general medical, paediatrics, surgical, obstetrics and gynecology services, diagnostics for laboratory and radiology as well as pharmaceutical services. Others are rehabilitative services which include physiotherapy and nutrition. The MHUG laboratory is a national back up to the Uganda National Health Laboratory Services (UNHLS) for viral load (VL), HIV testing for Early Infant Diagnosis (EID), and Covid-19 testing. The hospital also offers emergency services as well as specialist clinics for non-communicable diseases (NCDs), mental health, maternal and child health (MCH) services, sexual and reproductive health (SRH) services, elderly care, eye care, palliative care, and dental care. Behavioral and psychosocial services include counselling, social work, economic strengthening and community outreach. The hospital offers both outpatient and inpatient services. It is also a teaching hospital, a site for research, clinical placements, internships, and runs projects including HIV programming, PND Ssuubi, etc.

MHUG is registered and licensed as a health facility by Uganda Medical and Dental Practitioners' Council. Its registrations and licenses comprise (i) AHPC14/0374P for Laboratory under the Allied Health Professionals' Council; (ii) NDA/PRE/RTP/6296 for Pharmacy under Uganda National Drug Authority; (iii) AEC/PU/1578/01 for Radiology under Atomic Energy Council. The hospital has ISO 9001:2015 quality management systems certification and ISO 15189:2022 for laboratory quality and competence. Hospital staff are licensed by Uganda Medical and Dental Practitioners' Council; Uganda Nurses and Midwifery Council; Allied Health Professionals' Council; and the Pharmaceutical Society of Uganda.

MHUG partners with Government of Uganda (GoU) through its ministries and agencies including Ministry of Health (MoH), Ministry of Local Government (MoLG), and Ministry of Gender, Labour and Social Development (MGLSD). It also partners with Civil Aviation Authority (CAA), Uganda Revenue Authority (URA), medical insurance companies, other private sector health facilities and other private sector entities. Its funders include the US Centers for Disease Control and Prevention (CDC) and Infectious Diseases Institute (IDI).

1.2 History of Mildmay

The origin of Mildmay dates back to the mid-1860s from the work done by The Reverend William Pennefather, a vicar at St. Jude's, and his wife Catherine. St. Jude's, located in Mildmay Park, Islington, was a lively Victorian church of over 1,000 people. Reverend William developed several projects known collectively as Mildmay Institutions, providing spiritual guidance and care for the sick. In 1866, there was a cholera outbreak in East London. Two of the Mildmay deaconesses, trained by Catherine, volunteered to go into some of the East End's worst slums in the Old Nichol,

one of the most notorious slums of the nineteenth century, where even the police feared to enter, to care for the sick and their dependents. The Old Nichol was situated between High Street, Shoreditch and Bethnal Green. It consisted of 20 narrow streets containing 730 dilapidated terraced houses which were inhabited by some 6,000 people. Figuring out how to handle the cholera outbreak in the slums of East London marked the beginning of Mildmay's approach to community-based healthcare. Mildmay responded to the health challenges in the slums by offering healthcare services. The work of the deaconesses developed and expanded. In 1877, the first Mildmay Medical Mission was established in a disused warehouse in Cabbage Court (now Little Bacon Street, south of Bethnal Green Road), near to Shoreditch Church. It consisted of twenty-seven beds in three wards, one doctor, three nurses and five deaconesses in training. This was the first incarnation of what was soon to become Mildmay Mission Hospital. In 1892, the first purpose-built Mildmay Mission Hospital was opened. In 1948, the hospital became part of the National Health Service (NHS) but by 1982, as a hospital with less than 200 beds, Mildmay was regarded as uneconomic and was closed, along with many other 'cottage hospitals'. Mildmay's Trustee Board and with many loyal supporters began the fight for Mildmay's survival. After many setbacks, approval was granted by Government and the NHS for Mildmay to reopen in 1988 as Europe's first hospice caring for people with AIDS-related illnesses. Diana, Princess of Wales, visited Mildmay 17 times, both officially and unofficially, and famously shook hands with a patient at the height of fear around the condition, helping to break down some of the stigma surrounding HIV. As knowledge about HIV grew, medication evolved and needs changed, Mildmay changed its focus from end-of-life care to specialized assessment and rehabilitation. Today, Mildmay remains at the forefront of specialist HIV service delivery and care, continuing to adapt and respond to meet new, often complex, and rapidly changing needs. In the 1990s, Mildmay was invited to offer its expertise to areas where HIV and AIDS were hitting hardest—firstly Uganda, Tanzania, and Kenya then Zimbabwe and Rwanda and later into Eastern Europe. The global HIV epidemic demanded that Mildmay offers prevention, management, and treatment to the affected communities.

1.3 Background to Mildmay Uganda (MUg)

Mildmay International's work followed a Presidential invitation to develop paediatric HIV palliative care and capacity building services. It's operations in Uganda date back to a meeting in 1993 between Honorable Manuel Pinto, the first Director General of Uganda AIDS Commission (UAC), and Dr. Veronica Moss of Mildmay International at a global conference in Edinburgh Scotland. Mildmay Uganda was opened in September 1998 by Anne, The Princess Royal, and started receiving patients in October of the same year. In 2007, Her Majesty Queen Elizabeth II visited Mildmay Uganda and the Mildmay Paediatric Care Centre. This was indicative of how significant the work done by Mildmay in Uganda had become. During her visit, Her Majesty said: "Thank you Mildmay Uganda for the work and the remarkable example set in the provision of care and education for the people living with HIV." At the Mildmay Paediatric Care Centre, The Queen unveiled a plaque for the hospital's Elizabeth Ward, named in her honour. The President of Uganda, His Excellency General Yoweri Museveni, marked the 10th Anniversary of Mildmay Uganda with a special visit in October 2008, during which he unveiled the foundation stone of the center's new laboratory. In 2010, the work of Mildmay Uganda was graced with a visit by the

Archbishop of Canterbury, Dr. Rowan Williams. In 2017, the President of the Republic of Uganda launched the Mildmay Uganda 30-Year Master Plan which projected the growth of MUg medical services toward a Teaching Hospital.

1.4 Mildmay Uganda (MUg) Autonomy

In September 2011, Mildmay Uganda (MUg) was registered with the National NGO Bureau as an indigenous Ugandan non-government organization (NGO) Reg. No. S.5914/9191 that focuses on empowering communities for sustainable health and development. MUg is registered with Uganda Registration Services Bureau (URSB) as a company limited by guarantee. (Cert of Inc. No.) Over the years, MUg has grown into a key player in Uganda's health sector and ascribes to several quality standards. These include ISO 9001:2015 for quality management systems, ISO 15189:2022 standards for quality and competence for medical laboratories, and the Chartered Institute of Quality Assurance. In addition to MHUG, the organization comprises of Mildmay Institute of Health Sciences (MIHS); and Mildmay Research Centre Uganda (MRCU). MHUG is affiliated with the two sister companies.

1.5 Overview of MHUG 2018-2023 Performance

The vision of MHUG is to be “a leader in quality healthcare” and the mission is to “provide holistic client and family focused healthcare”. MUg launched a 30-year Master Plan in 2017. MHUG's contribution to the three pillars therein include supporting epidemic control to end HIV, to operate a 24-hour general hospital in order to increase access to healthcare services thereby contributing to economic growth and building a multi-bed teaching hospital as part of infrastructural expansion. The MUg strategic plan for 2018-2023 was then developed and was aimed at positioning MHUG as a leading market-player in healthcare delivery in Uganda. The strategic objectives were to define and institutionalize the philosophy and character of MHUG, to scale up demand and utilization of hospital services, and to empower nursing to drive improvements in healthcare. MHUG's key business enablers were Quality Management Systems, a customer-first culture, total marketing, and leadership development. MHUG uses a family-centered approach (FCA) in an effort to scale up client access to services. The FCA seeks to provide services within dynamic familial relationships and contexts. As such, the FCA offers services in an integrated or ‘one stop’ manner as opposed to being standalone. The integrated package includes medical services, nursing and rehabilitation services; adult and adolescent outpatient and inpatient services, nutritional services, counselling services, and specialist services including paediatric dental, adult and paediatric ophthalmology, and mental health services.

During the FY2018/19 to FY 2022/23 strategic plan period, MHUG has grown from a Directorate of Clinical Services to a general hospital with functions including finance and hospital strategic information among others. As such, patient attendances as well as the scope of services offered have increased during that period. The number of individuals reached by the hospital annual has increased to over 86,000 in FY2022/23 while total OPD attendances at the Private Medical Services (PMS) section increased from 11,838 to over 20,900. The number of clients accessing paid for services excluding HIV increased from 8,198 to over 15,100 while total admissions increased from 537 to over 685.

There has been growth in Maternal and Child Health (MCH) services over the last five years. The structure and staffing of the paediatric and adolescent clinic were reorganized in order to streamline services and to optimize care. The number of children accessing paid for services has since increased from 1,653 to over 2,700 during the period. A Neonatal Unit (NU) with a Neonatal Intensive Care Unit (NICU) which has capacity to nurse premature babies 34 to 36 weeks and weighing over 1.8kg was put in place during the period. Antenatal care (ANC) attendances increased by 34% while maternal admissions increased by over 60% from 251 in FY2018/2019 to over 400 during FY2022/2023. Total deliveries conducted increased from 213 to 346.

Considerable investments in diagnostics were made during the same period. Laboratory services have grown in the areas of molecular diagnostics, microbiology, biochemistry, haematology, phlebotomy, and immunology with corresponding increase in utilization of those services from 4% to 35% in the period. As a result, paid for test volumes increased by over 360% from 13,000 tests in FY2018/2019 to over 60,000 tests. Laboratory research collaborations due to having an ISO accredited laboratory have increased over the years. MHUG also acquired state-of-the-art x-ray and ultrasound equipment for the Radiology Department.

Due to growth in patient attendances, there has been a rise in income from patient fees over the last five years; total hospital ‘unrestricted’ income increased two-fold from UGX 1.6 billion to UGX 3.7 billion of which laboratory services grew to contribute two thirds during FY2022/2023. As such, remittances into MUG reserves have grown during the same period.

MUG in partnership with MHUG rolled out PND Suubi project. In the period since rollout, 30 teenage mothers have been enrolled onto the program and provided with MCH services. As a Corporate Social Responsibility (CSR) activity, MHUG has supported the Government of Uganda (GoU) in the provision of COVID-19 vaccines to more than 11,000 people which is a 10% contribution to Wakiso District Local Government’s vaccination reach. Majority of MHUG’s clients reside in the hospital’s vicinity in Makindye Ssabagabo Municipality in Wakiso District.

1.6 Aim of the Planning Process

The MHUG 2023-2028 strategic planning process aimed to achieve the outcomes below.

1.6.1 Consolidating the Mildmay Uganda Gains

Since its 2013-2018 strategic plan period, MUG adopts a theme for each Strategic Plan period. The 2013-2018 theme was “*Journey From Good to Great*” adopted from Jim Collins’ study of how organizations build sustainable greatness.¹ The theme for the 2018-2023 period was “*The Journey Continues from Good to Great.*” By end of the 2018-2023 period, MUG had grown tremendously by (i) expanding into general healthcare in addition to HIV; (ii) partnering with all leading medical insurance companies in Uganda; (iii) attracting over 7,000 paying clients into its Hospital service; and (iv) adjusting its strategies, structures, systems and processes to support a Hospital service.

For SP 2023-2028 period, MUG has adopted the theme “*Consolidating Gains On The Journey From Good to Great.*” It will be a rallying call to **consolidate** numerous strengths, resources and capabilities gained to date. The word “*consolidate*” that is the core of this theme has its root in the

¹ Jim Collins, *Good to Great: Why Some Companies Make the Leap ... and Others Don't*

word “*consolidare*” which is the Latin word for “*joining together into one whole; making firm, safe or secure; forming into a compact mass; or making solid.*” This is exactly what MUG needs to do to its strengths, resources and capabilities to prepare itself for emerging times. Growth toward a General Hospital is no mean feat and MHUG, too, needs to consolidate that growth.

A key question across the MUG Group is, “*How the momentum of its phenomenal growth can power it toward a great future and not become an obstacle that weighs it down to extinction.*”

1.6.2 Rolling Strategic Plans

Given increasing volatility, uncertainty, complexity and ambiguity (VUCA)—emphasized by the COVID-19 pandemic, MUG Board adopted the rolling strategic planning process for all strategic plans across the Group. The rolling process will entail 4 key steps namely (i) Step 1 – Developing a 5-Year Strategic Plan for every 5-year period; (ii) Step 2 – Keeping an annual log of lessons, challenges, blind spots and new opportunities noted during execution; (iii) Step 3 – Rapid Review of Strategic Plans based on the annual log; and (iv) Step 4 – Updating Plans before using them to develop annual operational plans (AOPs). The process will make MUG strategic plans adaptive to change and enable Entities grasp opportunities and mitigate risks. The HQ Impact Monitoring Unit will keep this process alive across MUG Group.

1.6.3 Synchronizing Plans across MUG Entities

The 2023-2028 strategic planning process sought to synchronize the Strategic Plan periods across four major MUG project and business platforms i.e., (i) The NGO; (ii) MIHS; (iii) Mildmay Research Centre Uganda (MRCU); and (iv) Mildmay Hospital Uganda (MHUG). Synchronized strategic plans for these 4 MUG platforms will run from 01 July 2023 to 30 June 2028.

1.6.4 Aligning with 30-Year Master Plan

The MHUG 2023-2028 strategic planning process sought to anchor the next 5 years of the Hospital in the *MUG 30-Year Master Plan*. The Master Plan was launched in 2017 with intention to execute it in form of six 5-Year Strategic Plans. This MHUG 2023-2028 Strategic Plan period is part of Phase 2 for the entire MUG Group.

2 Situational Analysis

This section discusses key issues at global level, sub-Saharan Africa level and national level likely to influence the success of MHUG during its 2023-2028 Strategic Plan period.

2.1 Global Economic Prospects

The World Bank reported a sharp slowdown in global growth and intensified risk of financial stress in Emerging Market and Developing Economies (EMDEs) amid elevated global interest rates.² 2023 Global Economic Prospects report anticipated global growth to slow down to 2.1% in 2023 with prospects clouded by financial risks. The World Bank projected global growth to decelerate from 3.1% in 2022 to 2.1% in 2023. The forecasts reflected broad-based downgrades. Most EMDEs were projected to face increasingly restrictive global credit conditions, with the squeeze more acute on EMDEs with underlying vulnerabilities subjecting their growth to additional shocks. Their trade was projected to grow at less than a third of their pace in the years before COVID-19. Debt pressures were expected to grow due to higher interest rates in addition to fiscal weaknesses that had already tipped low-income countries into debt distress.

2.1.1 Stagnation Due to Multiple Crises

The *2019 Global Sustainable Development Report (GSDR)* concluded that on the 2019 trajectory the world was unlikely to achieve the SDGs by 2030. The world would need to quicken the pace to (i) eradicate poverty and hunger; (ii) reduce maternal mortality; (iii) increase access to drinking water and sanitation; and (iv) achieve gender equality. The world was slipping back on eradicating inequality. In 2023, halfway to 2030, the situation was more dire. Progress was halted or slowed down by a confluence of crises including (i) COVID-19 pandemic; (ii) rising inflation and cost-of-living crisis; (iii) global environmental and economic distress; (iv) regional and national unrest; (v) conflicts; and (vi) natural disasters. Part of MHUG was affected directly by COVID-19 through closure of business during the lockdown period and allocating resources to address the pandemic.

2.1.2 Lingering Drag of COVID-19

By 2023, the COVID-19 pandemic is still having a profound impact on the mental and physical health and wellbeing of individuals, households and communities. Beyond killing over 15 million people globally, it has slowed, disrupted or temporarily reversed progress across the SDGs. At times it has shut down entire industries causing loss of jobs, livelihoods, incomes and remittances. It cast a shadow over the prospects of children due to closure of schools and exacerbated inequality. Recovery from COVID-19 has been uneven and incomplete. High-income countries recovered faster due to higher rates of vaccination and more effective relief measures. Informality and working poverty rose due to COVID-19. Incomplete recovery implies ongoing shortage of better job opportunities, pushing people into worse job options. Due to interconnection of economies through trade and migration, delayed recovery in any country reduces the prospects for all. Effects of these pandemic after-effects have affected Uganda's economic performance and the operations of Mildmay Uganda as an organization.

² World Bank Global Economic Prospects Report 2023

2.1.3 Conflict, War and Instability

The world is witnessing the highest level of state-based armed conflicts since 1945. By the end of 2020, around 2 billion people were living in conflict-affected countries. By 2030, about two thirds of the world's extreme poor could live in setting characterized by fragility, conflict and violence threatening efforts to end extreme poverty. Conflicts drive 80% of all humanitarian needs. Violent conflict not only disrupts human development and causes insecurity, but it also destroys man-made and natural capital and diverts private and public resources to spending on defense and rebuilding. In the SP 2018-2023 period, MUg was a frontline implementer among populations displaced due to armed conflict in the sub-Saharan Africa region on both HIV and COVID-19 platforms.

2.1.4 Inflation and Cost of Living Crisis

Globally, people face a severe cost-of-living crisis. The pandemic and subsequent recovery pushed up prices for food and energy, which rose further because of the war in Ukraine. Many countries are seeing domestic food inflation. In 2022, 89% of Least Developed Countries (LDCs), 93% of Landlocked Developing Countries (LLDCs) and 94% of Small Island Development States (SIDS) had food inflation >5%, with many experiencing double-digits inflation. Worst affected are the poor who spend much of their budget on food and fuel [they respond by skipping meals or buying cheaper and less nutritious food]. Central banks face the classic trade-off between controlling price and supporting growth. Policy makers keen to help the most vulnerable have limited options.

2.1.5 Overseas Development Assistance (ODA)

In 1970, the United Nations set a target for countries to contribute 0.7% of their Gross National Income (GNI) to international aid. However, the 0.7% target is just a target; it is not required by law. Britain was a leader in aid and development with its development sector being its major identity globally. However, the SP period 2017-2022 witnessed aid cuts and closure of the UK Department for International Development (DFID). The 2020 decision by the UK Conservative Government to reduce the aid budget from 0.7% to 0.5% of GNI left a funding gap of £4.5 billion (US\$ 6.2 billion) in the Official Development Assistance (ODA) budget. The decision was accompanied by several cuts to projects and humanitarian crises where UK was a key donor. DFID was merged with the Foreign and Commonwealth Office to form the Foreign, Commonwealth and Development Office. The move was interpreted as a downgrading of the UK position in the global development space and a decision that would harm those most in need and reduce UK's power overseas. It is worth noting that, in 1998, DFID was the arm through which the UK Government extended aid to Uganda for construction of the downhill portion of MUg Main Site at Lweza.

“It's a long-term strategic mistake, because DFID was established as a major arm of soft power for the U.K. [DFID] was regarded as the premier development agency in the world ... at least arguably.”

- Tony Blair, former U.K. Prime Minister

The development community got concerned by a disturbing trend of donor countries cutting their aid budgets. Norway, formerly a leader in international aid, announced plans to cut their aid budget from 1.15% to 0.75% translating into a cut from 47.4 billion kroner (US\$ 4.5 billion) to 43.8 billion kroner (US\$ 4.1 billion). Sweden signaled intention to cut its foreign aid by scrapping its former

target to spend 1% of GNI on aid. By 2021, Italy's ratio of ODA compared to gross national income was 0.28%, up from 0.22% in 2020, but still below the UN recommended 0.7%. Observers had little hope of increment under the new administration. Germany, Europe's biggest economy, was hit by the energy crisis and inflation and was hesitant to commit to international aid. Its Ministry of Economic Cooperation and Development (BMZ) got a 10% budget cut compared to 2022. Its contributions to multilateral organizations [UNAIDS, WFP, WHO] will dramatically reduce—undermining Germany's role as a champion of global cooperation. This gloomy picture of aid is against the backdrop of more need for ODA than ever, with millions of people around the world facing increased difficulties and unprecedented global crises. While China augments its global status and interest grows to engage it for development aid, *World Giving Index* ranks it top of least generous countries. Unlike other countries, China's unique aid approach enshrouds comprehensive data on its foreign assistance. That limits access to Chinese development assistance for causes like this MHUG Strategic Plan. This down-facing funding landscape will not deter the strategic thrust of MHUG. Instead, the situation reminds MHUG of another Good-to-Great concept—"*Confront the Brutal Facts, Yet Never Lose Faith*."³ Like the good-to-great companies in Jim Collins research, MHUG will face the times ahead "*confronting the most brutal facts of the 2023-2028 development aid landscape and its own funding reality whatever they might be*" AND at the same time "*retain faith that it will prevail in the end, regardless of the difficulties*." The Hospital will meet any funding shocks in the SP 2023-2028 period with stoic resolve to survive and thrive by contextualized responsiveness of its strategy execution to the volatile resourcing landscape.

2.2 Ending the HIV Epidemic by 2030

As the AIDS pandemic spread across the world, the global community set an ambitious target under Millennium Development Goal (MDG) 6 "*to have halted and begun to reverse the spread of HIV/AIDS by 2015 and to ensure access to treatment among all those in need by 2010*." When it was achieved, they set a new goal in 2016 to *End AIDS As a Public Health Threat by 2030*. In 2020, UNAIDS released the 95-95-95 targets calling for 95% of all people with diagnosed HIV infection to get sustained ART to have viral suppression by 2025. The targets were adopted by the 2021 new Political Declaration on HIV/AIDS by UN Member States with emphasis on (i) bridging inequalities in treatment coverage; and (ii) targeting sub-populations, age-groups and geographical settings. MHUG will contribute through its HIV/AIDS Centre of Excellence that provides services to over 14,000 people living with HIV and their households and communities.

2.2.1 The Global Fund 2023-2028 Strategy

The *2023-2028 Global Fund Strategy – Fighting Pandemics and Building a Healthier and More Equitable World* notes that the world stands at a crossroads after COVID-19 worsened inequities, diverted critical resources, slowed access to critical disease prevention and treatment and worsened risk to vulnerable people. The Strategy aims to recapture progress against HIV, TB and Malaria (HTM). The Strategy emphasizes catalytic, people-centered investments to lower HTM infections; address structural barriers; and leverage innovation in prevention. The MUg new Program Scope aligns with this Strategy. MHUG will engage in Uganda's Global Fund mechanism by pitching its

³ Jim Collins, *Good to Great: Why Some Companies Make the Leap ... and Others Don't*, p65

strengths in (i) disease prevention; (ii) people-centeredness; (iii) community systems; (iv) gender programming; (v) innovation; (vi) data-driven approaches; and (vii) pandemic preparedness.

2.2.2 Re-imagining PEPFAR's Strategic Direction

In his 2003 State of the Union Address, President Bush announced the President's Emergency Plan for AIDS Relief (PEPFAR) to combat global HIV/AIDS. Later that year, President Bush signed the initial 5-year \$15 billion authorizing legislation approved with strong bipartisan support. Since then, PEPFAR has invested over \$100 billion and supported 10 countries achieve 90-90-90 goals and 2 high-burden countries achieved 95-95-95 goals. It is the largest commitment by any nation to address a single disease in history. By September 2022, PEPFAR was supporting ART for 20.1 million people; 1.5 million people on pre-exposure prophylaxis; 30 million VMMC had been done; and 2.9 million girls and young women reached by DREAMS. In 2022 the US Government issued the "*Reimagining PEPFAR's Strategic Direction – Fulfilling America's Promise to End the HIV/AIDS Pandemic by 2030.*" It is aligned with the *UNAIDS Global AIDS Strategy 2021-2026* and *Global Fund 2023-2028 Strategy*. MHUG shares the Group legacy partnering with PEPFAR since its inception. In the period 2023-2030, MHUG will pitch its experience and maintain a key role in the new PEPFAR Strategy while preparing for transition to emerging global priorities.

2.3 National Vision 2040 and National Development Plan III

In 2010, Uganda started implementing its Vision 2040 toward "*A transformed Ugandan society from a peasant to a modern and prosperous country within 30 years.*" Uganda will reach half-way point of Vision 2040 in MHUG SP 2023-2028 period. In 2007, Uganda adopted the *Comprehensive National Planning Development Framework (CNPDF)* comprising (i) three 10-Year National Development Plans; (ii) six 5-Year National Development Plans; (iii) Sector Master Plans and Strategies; (iv) Local Government Development Plans; and (v) Annual Plans and Budgets. The *Third National Development Plan (NDPIII) 2020/21-2024/25* aims to increase household incomes and improve quality of life for Ugandans. NDPIII priorities that MHUG relates to are (i) increasing access to and utilization of health services; (ii) high disease burden; (iii) role of private healthcare sub-sector in national economy; and (iv) universal access to healthcare. Specifically, MHUG SP 2023-2028 is anchored on (i) MOH Strategic Plan 2020/21-2024/25; (ii) National HIV and AIDS Strategic Plan 2020/12-2024/25; and (iii) Private Sector Development Strategy.

2.4 PESTEL and SWOT Analysis

2.4.1 Analysis of External Opportunities and Threats

This is the analysis of external Opportunities and Threats that will influence MHUG success during SP 2023-2028 period. The analysis was limited to known significant factors at planning time.

OPPORTUNITIES	THREATS
<p><u>POLITICAL</u></p> <ul style="list-style-type: none"> ▪ Relative political stability in Uganda and East African region favors investment in health professionals education and training. ▪ Strategic focus guided by Vision 2040, NDPs and Sector Strategic Plans. ▪ Strong and vibrant national regulatory framework for health professionals education controls ease of entry. ▪ Political affirmative action and good will to promote science motivates investment in health professionals education and training. 	<ul style="list-style-type: none"> • Stagnation associated with Uganda’s political growth casts a shadow on investment and sustainable growth. • Business drawbacks arising from clash in socio-political values (e.g., the Anti-Homosexuality Act and associated political, business and donor backlash). • Business risks and higher cost of doing business associated with gaps in political oversight and governance (including bureaucracy, ambiguity, partiality, etc.).
<p><u>ECONOMIC</u></p> <ul style="list-style-type: none"> ▪ Uganda’s economic growth to accelerate to above 6% per annum in the medium term as inflationary pressure lessens plus benefits from investments and oil exports kick in. ▪ Improving economic prospects for Africa [average real GDP projected at 4.1% in 2023/24, up from 3.8% in 2022, above the 2.9% global average and Europe’s 1.1%]⁴ ▪ Momentum toward East African integration links MHUG to the 174 million people East African market (US\$ 163.4 billion GDP) and COMESA’s 560 million people market (US\$ 768 billion combined GDP). 	<ul style="list-style-type: none"> ▪ Slowdown of global growth, disruptions in global financial conditions and increasingly volatile weather remain major downward economic forces. ▪ Real GDP per capital grew by only 1.0% per annum between 2011 and 2022 in a context of rapid population growth, drought and other external shocks, a less supportive external environment and weakening policy and institutional framework. <u>All these raised household vulnerability and reduced disposable income to pay for healthcare.</u>
<p><u>SOCIAL</u></p> <ul style="list-style-type: none"> ▪ Uganda’s rapid population increase [to rise from current 46 million to 74 million in 20 years and to 104 million by 2060]⁵ is an opportunity for prosperity if it is coupled with human capital development. 	<ul style="list-style-type: none"> ▪ Inadequate investment toward ensuring that young Ugandans access education and health services will limit ability to attain their potential and to enhance and sustain short and long-term productivity.

⁴ African Economic Outlook 2023: African Development Bank Group

⁵ World Bank, Uganda Economic Update: Uganda Can Benefit from the Demographic Dividend by Investing More in Education, Health

OPPORTUNITIES	THREATS
<p><u>TECHNOLOGICAL</u></p> <ul style="list-style-type: none"> ▪ Maturity of technology platforms toward business viability in 2023 to 2030 including <ul style="list-style-type: none"> ○ Generative AI such as ChatGPT ○ Internet of Things – smart devices and objects connected to internet constantly gather and transmit data into Big Data. ○ Information Technology – turning to use of computer hardware and software. ○ Cloud – shift from traditional hosting to flexible, expandable storage on Internet. ○ Automation – automating structured and repetitive business processes. ○ Machine Learning – computers learn for themselves and do tasks autonomously. ○ Mobile Computing – Powerful features squeezed on a small device [e.g., Smart Phone] to run thousands of apps. 	<ul style="list-style-type: none"> ▪ Business risks and higher cost of doing business associated with resisting change and insisting on technology investment patterns of the pre-digital era. ▪ Sub-optimal investment in transition to digital technology [including structural changes to realign business leadership and management structures from IT management to Technology leadership and management].
<p><u>ENVIRONMENTAL</u></p> <ul style="list-style-type: none"> ▪ Robust national framework for environment protection and management [including laws, policies, guidelines and institutions]. ▪ High potential for generation of renewable clean energy resulting in lower energy cost. 	<ul style="list-style-type: none"> ▪ Business risks and higher cost of doing business arising from poor enforcement of the national framework for protection and management of the environment. ▪ Low investment in protecting / managing the environment increases business cost.
<p><u>LEGAL</u></p> <ul style="list-style-type: none"> ▪ Robust legal framework governing health professionals education and training [including statutes, policies, codes, standards, structures, etc.]. 	<ul style="list-style-type: none"> ▪ Business risks and higher business cost due to gaps in enforcing legal framework for health professionals education.

MHUG responded to the above analysis of Opportunities and Threats by formulating Strategic Goals and Strategic Objectives for 2023-2028 that are responsive to key observations emerging from the analysis.

2.4.2 Analysis of Internal Strengths and Weaknesses

Below is the analysis of key Strengths and Weaknesses that will influence MHUG success during SP 2023-2028 period. Analysis was limited to key known factors at the planning time.

STRENGTHS	WEAKNESSES
<p>LABORATORY SERVICES</p> <ul style="list-style-type: none"> ➤ ISO 15189 accreditation attained and maintained. ➤ Quality service delivery. ➤ Good partnership management resulting in repeat business. ➤ Good crisis management (COVID-19 example). ➤ Good Turn-Around-Time (TAT). ➤ State-of-art equipment installed plus POC platforms for key lab tests. ➤ Experienced in-charges. ➤ Constitutes a Cash Cow for MHUG. 	<ul style="list-style-type: none"> ➤ Reliance on external Group-level finance and operations support which tends to be slow. ➤ Group-level E-Systems not designed for external lab services; do not track lab leads; systems handlers do not under the business; systems do not adequately map business processes. ➤ Equipment under-utilized (runs at sub-optimal level of 30%). ➤ Frontline staff fresh from school. ➤ Costs take 60% of Revenue.
<p>BETHANY PRIVATE WING:</p> <ul style="list-style-type: none"> ➤ Affordable ambulatory care. ➤ Clean green natural environment. ➤ Quality diagnostics due to state-of-the-art diagnostics in place. ➤ Access to specialist care; doctors offer exceptional consultation; consistent consultation follow-up. ➤ CQI approach for patient flow. ➤ Point-of-care (POC) technologies in place for key diagnostics. ➤ Skilled MOs in place and growth in number of skilled nurses. ➤ Availability of daily data on financials (target, achievement, variance). 	<ul style="list-style-type: none"> ➤ Lack of exclusive, serene, hotel-like private IPD rooms that attract the affluent. ➤ Some facilities in the private IPD are dilapidated and out of use (e.g., kitchen) ➤ Some amenities (e.g., meals) below hotel-like standard that affluent clients demand. ➤ Operational difficulties associated with scattered private IPD spaces. ➤ Wards not differentiated into male, female, children, maternity wards. ➤ Sub-optimal specialist utilization due to low patient numbers. ➤ Lack of key diagnostics (CT-scan). ➤ Weakness in shift management. ➤ Inadequate system to manage the patient waiting process/experience. ➤ Delays in billing clients and slow discharge processes. ➤ NGO-like culture/systems affect business. ➤ Digitalization sub-optimally deployed e.g., contactless temp monitoring. ➤ Low clientele causing sub-optimally used IPD and high nurse-to-patient ratio. ➤ Service highly leveraging other revenue streams to sustain it.

STRENGTHS	WEAKNESSES
<p>HIV CLINIC</p> <ul style="list-style-type: none"> ➤ 100% donor-funded quality service with over 14,000 active clients. ➤ Availability of a corporate clinic for HIV management. ➤ Free diagnostics related to HIV management are available. ➤ Free medicines related to HIV management are available. ➤ Options available to patients to access medicines offsite. ➤ Using point-of-care (POCs) systems to lower diagnostics TAT. 	<ul style="list-style-type: none"> ➤ Some diagnostics are not provided freely. ➤ Non-HIV drugs not funded fully. ➤ Screening for other diseases e.g., NCDs inadequately done. ➤ Sub-optimal integration in available E-Systems causing inefficiency. ➤ Non-availability of key equipment (e.g., CT-scan, endoscopy, etc.).
<p>PHARMACY EXTERNAL</p> <ul style="list-style-type: none"> ➤ Competent pharmacy personnel. ➤ External services available, accounting for 10% of attendances. ➤ Good quality products given to clients. 	<ul style="list-style-type: none"> ➤ Low and unviable patient fees ➤ Low enrolment of 10% of all clinic attendance. ➤ Delay in real-time entry and analysis of transaction data. ➤ Some models are highly leveraged affecting viability and sustainability.

MHUG responded to the above analysis of Strengths and Weaknesses by formulating Strategic Goals and Strategic Objectives for 2023-2028 that are responsive to key observations emerging from the analysis.

3 MHUG 2023-2028 Strategy Framework

3.1 Vision, Mission and Values

3.1.1 Vision

A Leader in Quality Healthcare for All.

3.1.2 Mission

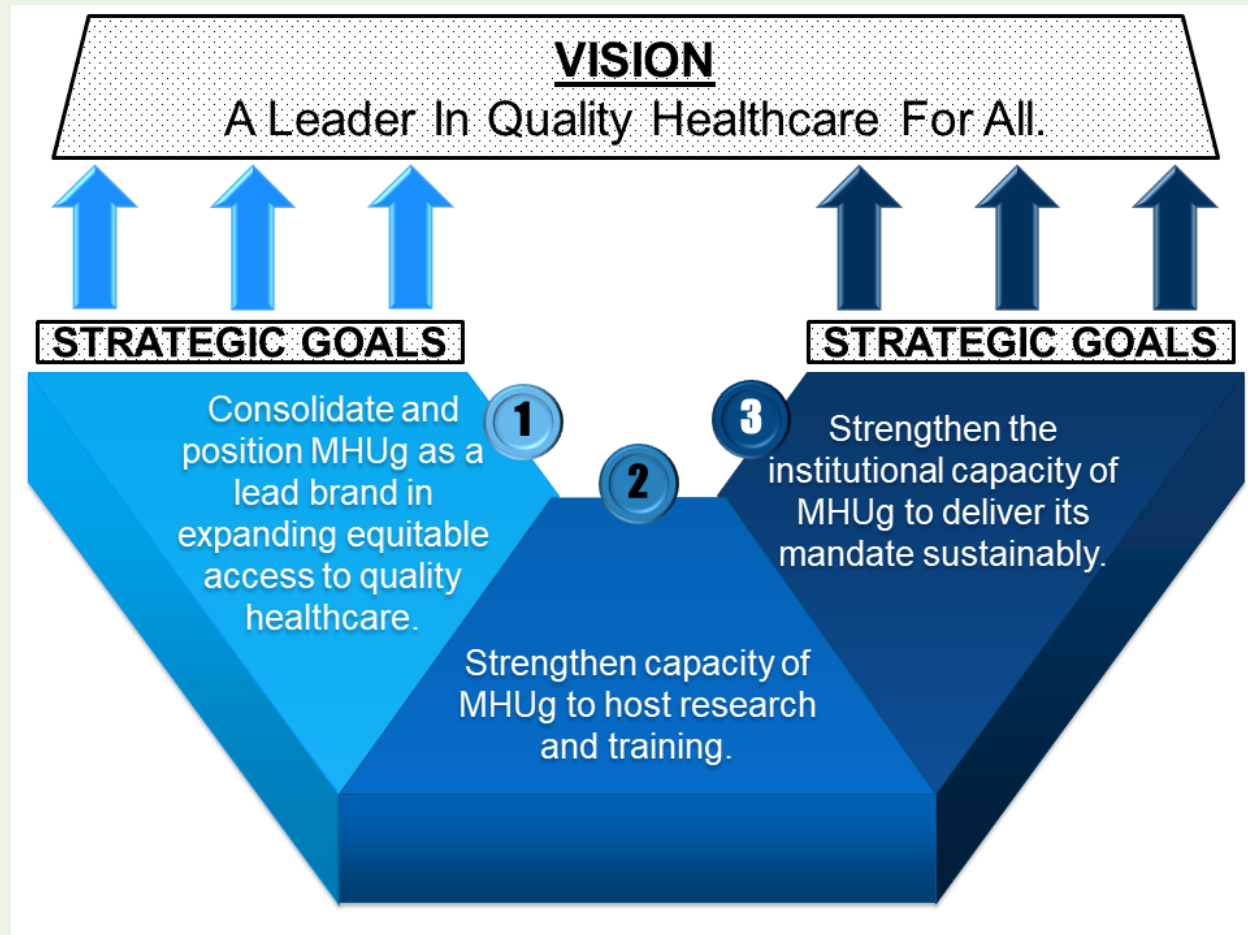
To provide patient-centered healthcare for all.

3.1.3 Values

We are a Christian healthcare organization that espouses these values: -

1. Customer centricity
2. Compassion
3. Professionalism (skill, integrity, ethics, quality, timeliness, people-development)
4. Self-sustainability

3.2 MHUG 2023-2028 Strategic Goals



3.3 Strategic Goal 1 Objectives and Initiatives

Goal Statement: Consolidate and position MHUG as a lead brand in expanding equitable access to quality healthcare.

MHUG will achieve Strategic Goal 1 by implementing the six Strategic Objectives below.

Strategic Objective 1.1: Standardize the business model underlying the MHUG portfolio.

Strategic Objective 1.2: Run the General Hospital Service as a viable healthcare brand that addresses patients' needs and responds to emerging healthcare needs.

Strategic Objective 1.3: Run Bethany Private Wing as a viable healthcare brand that satisfies patient expectations and responds to emerging healthcare needs.

Strategic Objective 1.4: Run MHUG auxiliary hospital services as viable and sustainable business ventures.

Strategic Objective 1.5: Develop and implement sustainable grants and community projects.

Strategic Objective 1.6: Institutionalize the MHUG quality philosophy across the Hospital.

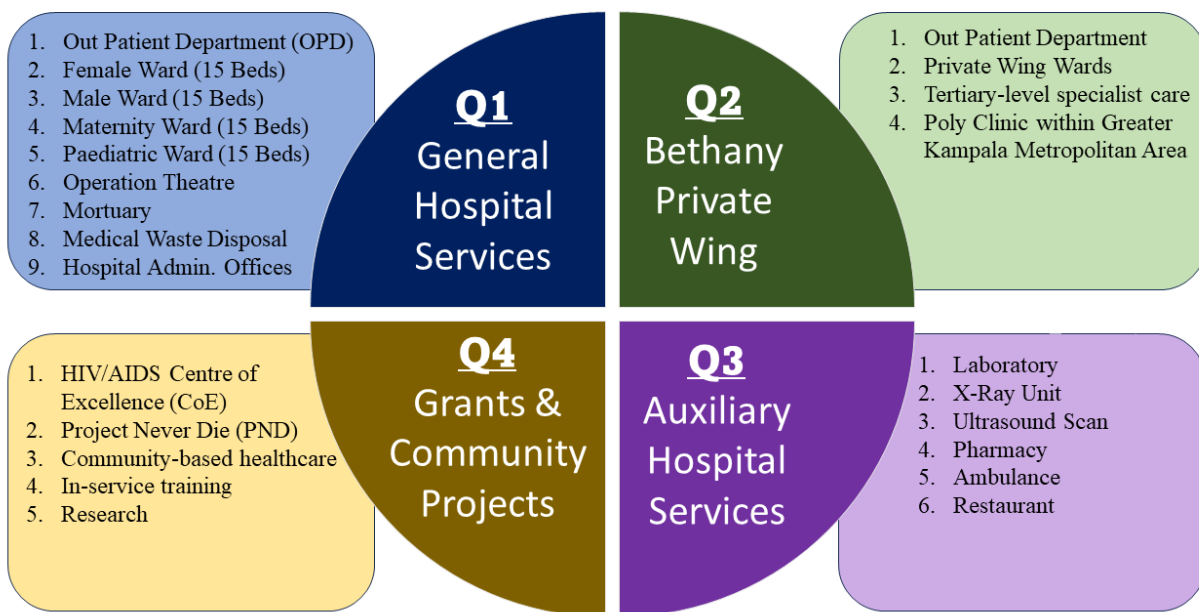
Overview

From the launch of The Mildmay Centre (TMC) in 1998 up to time of increased access to PEPFAR funded anti-retroviral therapy (ART) in 2004, the organization cared for very paediatric and adult clients who were very ill from AIDS-related conditions. Until then, most of the organization's facilities and infrastructure were designed to address the needs and challenges of AIDS patients. With the advent of ARVs and the championing role adopted by the organization to scale up the uptake of the life-saving ARV medicines, the organization experienced a dramatic improvement in the health status of its clientele including a drastic fall in newborn children contracting HIV from their mothers. From 2017 to date, the Mildmay Main Site has maintained the rate of mother-to-child HIV transmission at zero among sexually active HIV positive women in child-bearing age. To date, 99% of the 14,000 clients enrolled at MHUG are initiated on ART and 98% of them have attained viral suppression. Facilities designed to care for the very sick AIDS patients [e.g., Kwagala Day Care for the 0- to 5-year-olds; Mirembe Day Care for the 6- to 12-year-olds; Suubi House for the 13 and above age group; Kiddukiro In-patient Unit later named Ruth Ward; and the 33-bed Elizabeth Ward Children's In-patient Unit] became redundant. During the SP 2013-2018 period, the organization subjected itself to rigorous self-examination and projection into the future. The process culminated in the *Mildmay Uganda 30-Year Master Plan for 2018-2048* which was launched by the President of Uganda in June 2017. The 30-Year Master Plan guided MUG to grow into a *Modern Teaching Hospital* along its three pivots comprising (i) healthcare delivery and health systems strengthening; (ii) health education and training; and (iii) health research. MUG decided to implement the 30-year master plan in form of six 5-Year Strategic Plans.

The SP 2018-2023 period was the first batch of 5-years from the 30-year master plan. During the SP 2018-2023 period, Mildmay Uganda embarked on several developments to grow from an HIV Clinic toward a General Hospital. Milestones registered by the end of the SP period comprised (i) launch of MUG as a General Hospital providing general medical care besides HIV services; (ii) community mobilization to own the brand through the "Your Community Hospital" campaigns;

(iii) growth of the MUg Staff Clinic into Bethany Private Wing; (iv) partnership of Bethany Private Wing with 10 major medical insurance firms; (v) About 1,120 clients choose Bethany Private Wing as their choice healthcare provider every month; (vi) ISO 9001:2015 certification of the Hospital; (vii) ISO 15189:2012 certification of Hospital’s medical laboratory; (viii) development of Hospital policies, structures, processes and systems; (ix) assignment of Hospital Development Committee by the Board to oversee and guide hospital growth; and (x) resolution that the Hospital develops its strategic plan for the 2023-2028 period and gets incorporated in that period.

During Yr01 of SP 2023-2028 period, MHUG will formalize its legal status as a private-not-for-profit General Hospital by registering with Uganda Registration Services Bureau (URSB) as a company limited by shares that is owned 100% by Mildmay Uganda. It will embark on its growth journey modelled around a *Four-Quadrant Organization Design* illustrated below.



- **Quadrant 1 – General Hospital Service:** MHUG will develop its General Hospital Service to comprise (i) General Outpatient Department (OPD); (ii) female ward; (iii) male ward; (iv) maternity ward; (v) paediatric ward; (vi) operation theatre; (vii) mortuary; (viii) medical waste disposal; and (ix) hospital administration offices. Details are presented in **Objective 1.2**.
- **Quadrant 2 – Bethany Private Wing:** MHUG will consolidate the current Bethany Clinic into a section of the General Hospital to be known as Bethany Private Wing. This section shall comprise (i) Private Outpatient Department (OPD); (ii) private wing wards; (iii) tertiary specialist care units; and (iv) MHUG Poly Clinics to be established in viable locations within Greater Kampala Metropolitan Area (GKMA). Details are presented in **Objective 1.3**.
- **Quadrant 3 – Auxiliary Hospital Services:** MHUG will run assorted auxiliary hospital services comprising (i) the ISO 15189:2012 certified laboratory; (ii) X-Ray services; (iii) ultrasound scan; (iv) pharmacy; (v) ambulance; and (vi) restaurant. Details are presented in **Objective 1.4**.

- **Quadrant 4 – Grants and Community Projects:** The Hospital will run grants and community projects comprising (i) the HIV Prevention, Care and Treatment Centre of Excellence at MUg Main Site; (ii) the Project Never Die (PND) initiatives; (iii) community-based health care; (iv) in-service training; and (v) research. Details are presented in **Objective 1.5**.

Strategic Goal 1 aims to consolidate the positioning of Mildmay Hospital Uganda (MHUG) as a lead brand in expanding equitable access to quality healthcare by (i) standardizing its business model; (ii) ensuring viability of its units; (iii) running sustainable grants and community projects; and (iv) establishing a robust Quality Assurance system and mainstreaming it across the Hospital.

3.3.1 STRATEGIC OBJECTIVE 1.1: Standardize the business model underlying the healthcare services and products delivered under the MHUG.

While client feedback during SP 2018-2023 implementation appreciated the technical competence across different levels of MHUG personnel, it noted a gap in translating that ability into a consistent business model to elevate the Hospital’s brand image and assure its competitiveness, viability and sustainability. MHUG will build its internal capacity to run its healthcare units and facilities following standardized business models guided by the *Business Model Canvas*⁶ illustrated below.



⁶ Alexander Osterwalder and Yves Pigneur, Business Model Generation

Initiative 1.1.1: Standardize customer segmentation for MHUG healthcare services.

In packaging and offering healthcare services to patients, MHUG units and facilities will define the patient segments that they target. MHUG appreciates that without paying patients whom it regards as most important and for whom it creates value, it cannot survive. To satisfy its patients, MHUG will categorize them as (i) paediatric patients; (ii) adolescent patients; (iii) female patients; (iv) male patients; (v) older patients; (vi) general service patients; and (vii) private patients. During annual planning, MHUG units will identify patient segments to prioritize and those to scale down. They will align their business models with in-depth understanding of priority patient segments.

Initiative 1.1.2: Standardize value proposition design for MHUG healthcare services.

MHUG units will define bundles of services that create value for patient segments by defining (i) value they deliver to patients; (ii) patient problems they solve; (iii) patient needs they satisfy; and (iv) bundle of services offered to each segment. They will mix quantitative values [price, speed of service, turn-around-time] and qualitative values [design, patient experience]. MHUG units will create value that delivers (i) newness—satisfying new needs among patients; (ii) performance—helping create improvement; (iii) customization—tailoring service to patients; (iv) getting job done—helping patients get things done; (v) price—offering similar value to price-sensitive patients at lower price; (vi) cost-reduction—helping patients reduce cost; (vii) accessibility—easy access; and (viii) convenience—availing options that are more convenient or easier-to-use.

Initiative 1.1.3: Standardize channels design for MHUG healthcare services.

MHUG will define how to communicate with and reach current and prospective patient segments to deliver its value proposition. It will define the touchpoints for creating patient experience through (i) awareness creation among current and prospective patients; (ii) involving patients in evaluating its value proposition; (iii) letting patients purchase services; (iv) delivering value-for-money to patients and their caregivers and families; and (v) post-visit patient support.

Initiative 1.1.4: Standardize customer relationships framework for MHUG services.

MHUG will define the type of relationship to build with each of its patient segments in its effort to (i) attract patients; (ii) retain patients; and (iii) boost sales. Its customer relationships will range from personal to automated. Personal assistance will involve interaction between patients and MHUG staff. Dedicated personal assistance will involve interacting with dedicated MHUG staff. Self-service will involve using platforms where MHUG patients serve themselves. Co-creation will involve MHUG units and facilities engaging patients in creating healthcare services.

Initiative 1.1.5: Standardize revenue streams definition for MHUG healthcare services.

MHUG will project its expected earnings from each patient segment [Revenue - Cost = Earnings] and define the value for which each segment is truly willing to pay. That data will enable it to earn multiple revenue streams per patient segment. Units will explore how to earn multiple revenue streams such as (i) transaction revenue from one-time payments; (ii) recurring revenue from ongoing payments; and (iii) post-visit revenue such as through scheduled health checks, etc.

Initiative 1.1.6: Standardize key resources definition for MHUG healthcare services.

MHUG will define the most important assets required to (i) create and offer its value proposition; (ii) reach target markets; (iii) maintain relationships with customers; and (iv) earn revenues. Given the knowledge-intensive nature of MHUG business, personnel will be a key resource that it will

hire and access from its partners. Intellectual resources [e.g., brand, proprietary knowledge and copyright] will give MHUG competitive advantage given the difficulty in building them.

Initiative 1.1.7: Standardize key activities definition for MHUG healthcare services.

MHUG will define the most important things it must do to successfully execute its business model. It will identify key activities required to create and offer value in form of healthcare services for each patient segment and to earn revenue from offering that value. Because key activities of the Hospital units often involve finding solutions to existing and new health challenges, the Hospital key activities will include education, training, research and knowledge management.

Initiative 1.1.8: Standardize key partnerships definition for MHUG healthcare services.

MHUG units and facilities will define networks of partners that enable them to satisfactorily deliver healthcare to patient segment. For all partners, MHUG will identify key resources got from them and key activities they perform. MHUG will uphold the logic of never trying to own all resources or perform everything internally. It will form optimization and economy of scale partnerships to reduce costs and build strategic alliances to lower risks. It will consider partnering for strategic gains even when it competes with such partners elsewhere. It will form win-win partnerships with established specialists. All key partnerships that influence the survival, growth and sustainability of MHUG will be managed guided by robust partnership policy frameworks.

Initiative 1.1.9: Standardize the cost structure for MHUG healthcare services.

MHUG will profile key costs associated with each patient segment. Cost profiling will identify its high-cost key resources and key activities required to create and deliver healthcare services and generate revenue. In its cost profiling, MHUG will use a “no frills” model of stripping away fancy add-ons to offer quality healthcare at affordable prices. It will explore ways of running a lean cost structure through (i) automation; (ii) price reduction; and (iii) outsourcing.

Initiative 1.1.10: Increase the viability and sustainability of MHUG business and projects.

MHUG will increase the viability and sustainability of its business and projects including (i) early attainment and retention of break-even level of operation during Yr01; (ii) progression to generate surplus during subsequent years; and (iii) increasingly raise the volume of surplus realized from the operations of its business ventures.

- **Business Design:** MHUG will consciously design the business model of all its business ventures following the 9 Business Model Building Blocks outlined above. MHUG will adopt that Framework as the core motif underlying its business planning, budgeting, execution and evaluation. That will result in a common business language across the Hospital and between it and other MUg Entities. This will standardize perception around the 9 business model building blocks comprising (i) customer segmentation; (ii) value proposition; (iii) channels; (iv) customer relationships; (v) revenue streams; (vi) key resources; (vii) key activities; (viii) key partnerships; and (ix) cost structure. This will reduce loss due to mismatch in business models.
- **Business Acumen:** Experience from SP 2018-2023 shows need for Hospital leaders to harness their business acumen essential for raising the MHUG business viability and sustainability. To address this need, Hospital leaders will get exposure Group mechanisms for business support, monitoring, evaluation, coaching and mentorship. MHUG will cascade the Group Central Business Forum (GCBF) concept to all managerial levels across the Hospital.

3.3.2 STRATEGIC OBJECTIVE 1.2: Develop and run a viable and sustainable General Hospital Service (Quadrant 1 of MHUG Four-Quadrant Organization Design).

During SP 2023-2028 period, MHUG will develop a General Hospital Service as a key arm of its Four-Quadrant Model charged with healthcare delivery to the general population at the level of a General Hospital as stipulated by *MOH Guidelines for Designation, Establishment and Upgrading Health Units*. MHUG will position its General Hospital Service as the choice brand for patients and families desiring affordable quality healthcare who are left out by high-cost healthcare brands.

Initiative 1.2.1: Define the level of operation and coverage of MHUG General Hospital Service.

MHUG will provide its General Hospital Service at the level of a General Hospital following the principles of private-not-for-profit business model intended to scale up quality healthcare access and utilization for people left out by high healthcare cost. The primary target for MHUG General Hospital Service will be potential walk-in patients likely to adopt MHUG as their community hospital. These are resident within the 10-20 Km radius of the Hospital translating into over 500,000 people. MHUG will aim to attain a break-even level of clientele and volume of transactions by the end of Yr01 of the SP period and improve it in subsequent years to a level that goes beyond break-even to achieve the annual target for surplus of revenue over costs.

Initiative 1.2.2: Define the service scope for MHUG General Service.

The service package of the MHUG General Hospital Service will comprise (i) preventive, promotive and curative services; (ii) outpatient and inpatient services; (iii) maternity; (iv) emergency surgery and blood transfusion; and (v) other general services. The OPD in this General Service will be the primary point of entry for patients seeking routine check-ups, consultations and basic diagnostic tests. Ruth Ward and Elizabeth Ward will accommodate patients needing observation, non-specialized care, minor surgery and treatment. Surgery Department will conduct general surgical procedures and specialized surgeries. Obstetrics and Gynecology Department will offer outpatient care for antenatal and postnatal mothers, maternity services, general gynecological surgery and sexual and reproductive health. Pediatrics and Adolescent Department will provide PMTCT; neonatal care; early infant HIV diagnosis; and adolescent health. Medicine will cover emergency and ambulatory services; general medicine; outpatient and inpatient services. Nursing and Rehabilitation will cover nursing care, physiotherapy and nutrition. Psychosocial Care will provide counselling to address diverse needs. Community Section will offer satellite and courier services to deliver medicines, collect laboratory samples and provide home-based care.

MHUG will differentiate between the product offers under General Health Service and Bethany Private Wing along three lines namely (i) differentiation by range of services offered; (ii) differentiation by multiplicity of service access and availability; (iii) differentiation by level of specialization offered; and (iv) differentiation by service options and associated pricing.

Initiative 1.2.3: Define the flagship products of MHUG General Services.

MHUG will pitch Diagnostics and Maternal and Child Health (MCH) as its flagship products to provide exceptional care addressing healthcare needs of women and children as outlined below. Proposed interventions will also apply to Bethany Private Wing.

- **Diagnostics:** MHUG will leverage the benefits associated with emerging innovations in point-of-care services (POCs) such as (i) faster turn-around-time (TAT); (ii) user-friendly diagnostic

procedures; and (iii) equipment portability that enables efficient and accessible diagnosis. MHUG will introduce hysterosalpingography and CT-Scan services.

- **MCH Services:** MHUG will provide a comprehensive range of specialized care including (i) neonatal care; (ii) obstetrics and gynecology; and (iii) addressing unique needs of expectant and non-expectant mothers and their children. MHUG will establish a Neonatal Intensive Care Unit (NICU) and an Endoscopy Unit; and consolidate emergency care by establishing a High Dependency Unit (HDU) and an Intensive Care Unit (ICU). The Hospital will expand MCH infrastructure by constructing the MCH Block and refurbishing wards and the OPD.

Initiative 1.2.4: Institutionalize the MHUG philosophy and character.

The MUg 2018-2023 Strategic Plan defined the MHUG philosophy and character as documented in the *Whitepaper on the Mildmay Hospital Philosophy and Character*. By the end of the SP 2018-2023 period, the Hospital had consensus that the concept had not been optimally institutionalized to generate business advantage for the Hospital. During SP 2023-2028 period, MHUG will focus on optimal institutionalization of the seven elements of MHUG Philosophy and Character outlined in the *Whitepaper* namely: (i) putting the patient first; (ii) practicing team medicine; (iii) growing toward destination medicine; (iv) partnering for leadership; (v) hiring for values—not just talent; (vi) managing clues of quality; and (vii) creating, extending and protecting its brand legacy. By Yr05, these concepts will be fully integrated in MHUG policies, standards, processes and practice. This will also apply to Bethany Private Wing.

Initiative 1.2.5: Adjust and develop MHUG infrastructure.

MHUG will make the following infrastructure adjustments and developments outlined below to accommodate the Hospital operations.

- **Infrastructure Modification:** MHUG will reorganize and modify its infrastructure to enhance its service delivery capacity. Current administration offices, laboratory, pharmacy, radiology, operating theater and wards will be maintained. MHUG will develop the General Outpatient Department (OPD) from repurposing space utilization. The Hospital will construct new spaces to accommodate Emergency Unit, Intensive Care Unit (ICU), Mortuary and Healthcare Waste Management. It will renovate and expand existing units and construct an operation theatre and walkways. Current wards will be reorganized into male, female, pediatric and maternity wards. Medical equipment and electronic systems will be gradually upgraded to better technology.
- **Construction of MCH Block:** During Yr02, MHUG will start the phased construction of the MCH Block. The building will house Obstetrics and Gynecology, Pediatrics, Neonatal Care and Family Planning services. It will have a modern Labor Suite; Maternity HDU and ICU; NICU and Maternity Ward; Pediatric Ward; and M&E Unit. It will be a valuable addition to General Hospital Service and Bethany Private Wing and enhance capacity to offer specialized comprehensive care to women and children.

Initiative 1.2.6: Equip nursing for effectively play its leadership role in the Hospital.

In the SP 2018-2023 period, MHUG embarked on empowering nursing to play a leadership role in the Hospital as detailed in the *Whitepaper on Equipping Nursing to Lead Improvements in MHUG Healthcare Delivery*. Riding on 2018-2023 milestones in implementing the *Whitepaper*, MHUG will empower nurses to leverage their clinical expertise, nursing ethos and advocacy skills to uplift the quality of healthcare delivery. MHUG will prioritize the areas outlined below.

- **Nurse Leadership:** MHUG will equip nurse leadership to effectively manage their teams and uphold quality and safety standards in General Service and Bethany Private Wing. MHUG will aim to have nurse leaders with (i) extensive training; (ii) experience as nursing technicians; and (iii) broad understanding of healthcare industry dynamics. Nurse leaders will be charged to foster progress and innovation among nurses.
- **Nurse Retention:** Recognizing the high attrition of experienced nurses, MHUG will lower the turnover rates by (i) creating a Nurse Engagement Forum; (ii) equipping the Forum to improve nurse onboarding and retention; (iii) promoting cross-unit nurse exposure; (iv) innovating nurse specialty training and professional development; (v) coaching and mentoring patient care technicians and unit clerks; and (vi) hiring experienced locum nurses to fill staffing gaps.
- **Professionalism:** MHUG will hire nurses with strong values-driven character and support them through (i) Continuing Nursing Education; (ii) e-Medicine nursing skills; and (iii) managing healthcare units operations. This will keep them abreast with change in the healthcare industry.
- **Quality and Safety:** MHUG will protect nurses against workplace injury and ensure patient safety through (i) continuous reviews; (ii) nurse involvement in quality and safety initiatives; (iii) coaching and mentorship during staff huddles; (iv) awareness about national standards; (v) installing bed alarms; (vi) hourly rounding for patient support; (vii) sharps safety and safe patient handling; and (viii) installing ceiling lifts in the planned ICU facilitate patient mobility.
- **Patient Satisfaction:** MHUG will train and equip nurses as nurse navigators and empower them to coordinate care and serve as patients' personal points of contact. MHUG nurses will (i) guide patients in their medical journey; (ii) address barriers to care; (iii) make referrals to appropriate services; (iv) advocate for patients; and (v) communicate with patients using a nurse/patient call system. Nurse leaders will increase their rounding using a high-tech approach to improve communication, manage issues and recognize good performance. MHUG will prioritize post-discharge care via discharge calls and follow-up.

Initiative 1.2.7: Implement a robust transition management mechanism.

MHUG will develop and implement a robust transition management mechanism to change its systems, structures and practices effectively and seamlessly with minimal disruption. The Hospital will adopt the ADKAR Change Management Model and adapt it to the MHUG context to ensure that the change process is effective, efficient and sustainable. MHUG will manage the change process along the qualities of the ADKAR Model outlined below.

- **Clear Communication:** MHUG management will practice transparent effective communication about anticipated change through regular updates, scheduled meetings and feedback channels. Staff will have open channels where to express their concerns and receive prompt feedback.
- **Supportive Leadership:** Managers will guide staff on seamless adaptation to the changes. Management will support, guide and motivate staff members, recognizing how they influence change adoption and transition.
- **Staff Engagement:** MHUG management will encourage staff to share ideas, suggestions and concerns as a means of fostering ownership and active engagement. Management will involve staff in Working Groups or Task Forces to solicit their perspectives and expertise.
- **Gradual Implementation:** MHUG will implement change gradually in form of simulations followed by pilot testing. Since staff have to maintain service delivery amidst the changes, this approach will enable them to gradually adapt to change.

- **Monitoring and Evaluation:** MHUG will continually monitor and evaluate the transition using regular surveys and stakeholder fora and taking prompt action to address adverse issues and make essential adjustments.
- **Documentation:** MHUG will document the transition through (i) analyses of the Hospital's current state; (ii) identifying areas needing modification; (iii) developing and implementing change plans; (iv) assessing change outcomes and impact; and (v) documenting change steps and challenges. This knowledge will inform transition management in subsequent years.

3.3.3 STRATEGIC OBJECTIVE 1.3: Run Bethany Private Wing as a viable and sustainable enterprise (*Quadrant 2 of MHUG Four-Quadrant Organization Design*).

During SP 2023-2028 period, MHUG will develop a section of the Hospital to be branded and presented as *Bethany Private Wing*. This section will be the arm of Hospital's Four-Quadrant design that is charged with healthcare delivery to patients and families that demand more affluent design, packaging and delivery of their healthcare with high-level specialization for which they are willing to pay higher charges. Through its 25-year experience with healthcare in Uganda, MUg has learnt that, while this part of the population appreciates the organization's services, they will not sign up until the services are redesigned, repackaged and presented in a more affluent form with high-level specialization and personalization. By end of the SP 2018-2023 period, MHUG had over 5,000 clients in this category accessing healthcare from Bethany Clinic.

The initiatives and interventions proposed under *General Health Service* under **Strategic Objective 1.2** will apply to *Bethany Private Wing*. MHUG will modify them to suit the affluent, personalized, highly-specialized and exclusive preferences of clients targeted by Private Wing. Key actions to realize a viable and sustainable Bethany Private Wing are presented under **Strategic Objective 1.2**.

Below are additional interventions to realize a viable and sustainable Bethany Private Wing.

Initiative 1.3.1: Enhance the services of Bethany Private Wing.

During SP 2023-2028 period, MHUG will improve the services of Bethany Private Wing to attract and retain affluent clientele as a key step toward viability. This will be done through (i) optimizing operational efficiencies; (ii) improving patient experience; and (iii) elevating the quality of care.

- **Operational Efficiency:** During SP2023-2028, MHUG will enhance operational efficiencies in Bethany Private Wing ensure smooth and seamless patient experience through streamlined administrative processes and improved appointment scheduling, registration and billing. Further, MHUG will reduce Turnaround Time (TAT) for medical tests and treatments; ensure quick delivery of results, efficient patient care and fewer stock outs. E-Systems will improve data systems while efficient processes improve resource allocation and service delivery.
- **Improved Private OPD:** MHUG will improve health worker-patient interaction and the quality of consultation at the private OPD through trainings to improve staff skills. Regular pre-and post-service feedback will be solicited. MHUG will redesign existing digital access systems to align them the hospital's requirements and workflows and for user-friendliness. A patient waiting management system will be installed to enhance the waiting experience prior to being served. Shift management will be enhanced. Due to the importance of staff competences to the private OPD client experience, MHUG will hire high-caliber specialists and medical officers who meet clients' expectations. Performance-based incentives will be used to motivate staff

toward exceptional patient care. MHUG will deploy mobile point-of-care (POC) equipment and ensure user-friendly supportive healthcare environment with assorted amenities.

- **Customer Experience:** MHUG will enhance the experience of patients seeking private medical services as a key driver of Hospital growth. The Hospital will create a *hotel-like feel* on the recipients of Bethany Private Wing services. It will make access to its environs exclusive to reduce noise pollution and create a serene environment cherished by affluent clientele. Private rooms will be transformed with varying levels of luxury and comfort. Facilities accessed by clients will be repaired and the standard of amenities elevated. Private Wing wards will be differentiated to cater for diverse classes of clientele. All IPD facilities will be refurbished and upgraded, and a mortuary developed. These initiatives will enhance service quality in a luxurious client-centric environment that meets the expectations of affluent clientele.

Initiative 1.3.2: Enhance patient personal experience.

MHUG will enhance patient personal experience by implementing the actions outlined below.

- **Entrance Enhancements:** The Hospital gate is the patient's first encounter with the hospital and forms the patient's first impression. MHUG will train gate personnel to carry a welcoming outlook that gives patients, visitors and staff a welcoming first impression. They will maintain a positive outlook and friendly professional demeanor in their roles that include directing patients and visitors and providing information. Other enhancements will include (i) clear and visible welcome signage; (ii) user-friendly security protocols; (iii) creating a waiting area; (iv) aesthetic lighting and signage; (v) informative signage; (vi) enhancing the drop-off/pick-up area; (vii) ensuring wheelchair accessibility, ramps, handrails and clear pathways; (viii) enabling ease of movement for patients, visitors and staff with mobility limitations; and (ix) exploring drastic redesigning of the gate or even running an "open-gate" policy.
- **Outdoor Enhancements:** MHUG will enhance the visual appeal of the Hospital compound and other external environment to promote calm and tranquility enabling relaxation, socialization and respite for patients, visitors and staff and encouraging recovery and well-being. External ambiance will be enhanced through designating parking spaces, installing energy-efficient lighting solutions and installing sustainable and recyclable outdoor sitting and waiting spaces. The Hospital will create sheltered areas and shade and improve patient walkways with clear signage and adequate lighting. Outdoor sitting spaces will be equipped with comfortable and durable furniture and free Wi-Fi connectivity. People with disability will be able to access places through wheelchair ramps, accessible pathways and to get seating options that cater to their needs. MHUG will explore generation of cleaner, sustainable and renewable energy from waste generated by the increased traffic on the MHUG site. The children play areas will be revamped for a more fulfilling child-client experience. Outdoor recreational spaces will be improved including designating areas for physical activity, to encourage exercise, relaxation, and promote overall well-being for patients, visitors, and staff.
- **Indoor Enhancements:** Ambience of reception areas across MHUG will be upgraded paying attention to environmental sustainability and energy-efficiency. Layout of services in Bethany Private Wing will be redesigned incorporating appropriate eco-friendly furniture and décor. This will create a comfortable and welcoming atmosphere for patients and visitors to enhance their impression while minimizing the hospital's environmental footprint. Triage rooms, clinic rooms, diagnostic spaces, and other internal spaces will be improved in layout for optimal

functionality, considering eco-friendly practices, such as using natural light; incorporating energy-saving equipment; incorporating soothing colors; installing comfortable seating; and ensuring a clean and organized environment that promotes a good patient experience. Other considerations will include (i) improved indoor air quality through proper ventilation; (ii) exclusivity of private rooms; (iii) privacy and confidentiality of certain patient spaces such as certain waiting areas, triage rooms, clinician rooms; (iv) privacy screens and sound proofing; (v) infection control; and (vi) internal renovations to enhance patient rooms, wards and ward rooms, kitchens, toilets and bathrooms. These actions will optimize comfort, functionality, cleanliness and enhanced experience.

- **Patient-Centeredness:** To enhance patient personal experience during patient management, MHUG will employ patient-centeredness by incorporating the patients' values, preferences and needs into their healthcare experience recognizing that they should be active participants in their care, promoting shared decision-making and collaboration with their providers.

Initiative 1.3.3: Enhance the hospital's reach through novel healthcare delivery models.

MHUG will increase the Hospital's reach through novel interventions outlined below.

- **Referral Network:** MHUG will consolidate and expand its referral network by collaborating with facilities and healthcare providers in its catchment area and beyond. This will foster strong links for communicating the MHUG brand; providing diagnostics; and delivering specialist care and other services that are lacking in respective localities. Referral networks will enable provision of laboratory and radiology diagnostics leveraging the Hospital's state-of-the-art diagnostic facilities and testing expertise; and scale up the laboratory sample transportation system. Client benefits will comprise accurate diagnoses and improved patient outcomes. MHUG benefits will include brand visibility and loyalty in clients needing specialized services.
- **Tele-Health:** MHUG will develop and implement a telehealth healthcare delivery comprising (i) virtual visits; (ii) remote consultations; and (iii) tele-monitoring. MHUG will start with using low-cost models riding on video conferencing and other widely accessible platforms. MHUG will repurpose available digital devices for telehealth and leverage low-cost platforms like telephone, short message service (SMS), email and social media to engage patients. In Yr02, MHUG will invest to enhance technology infrastructure to scale up. Investment will include procuring video conference platforms and enabling interoperability with health information management systems. Tele-health clientele will include chronic care patients, walk-in clients, immobile patients and those needing remote interpretation of diagnostic results.
- **Courier Services:** MHUG validated the efficacy of courier healthcare delivery during COVID lockdown when it enabled the Hospital to deliver ARV medicines to thousands of people on lifelong life-saving HIV treatment. During SP 2023-2028 period, MHUG will enhance courier health delivery to cover a wider geographical scope and serve diverse clientele beyond persons living with HIV. The model will include (i) patients on other chronic care; (ii) collection of laboratory samples; and (iii) delivery of test results. The Hospital will develop a robust plan for optimizing courier model in healthcare delivery. The plan will guide key implementation issues including (i) partnering and collaborating with courier firms; (ii) monitoring service excellence; (iii) safety of medicines, samples and results; and (iv) buy-in by target clientele.

Initiative 1.3.4: Establish a Mildmay Hospital Uganda (MHUG) poly clinic.

During SP 2023-2028, MHUG will set up a Poly Clinic Outlet to provide specialized out-patient services targeting urban corporate clientele. In-patient cases and complex medical conditions will be referred to either the General Hospital Service or Bethany Private Wing at MHUG. The Poly Clinic will enhance MHUG visibility and access to the Hospital's brand by potential clientele who live far from the MHUG Main Site. Below are key steps to establishing the MHUG poly clinic.

- **Business Design:** MHUG will follow the general guidance in the nine building blocks of the Business Model Canvas presented in *Strategic Objective 1.1*. This approach will standardize the Poly Clinic's business thinking, planning and execution and ensure that it pitches above numerous micro clinics and strongly elevates itself among private sector healthcare brands.
- **Location:** MHUG will undertake a feasibility analysis to identify a viable location for the Poly Clinic within Greater Kampala Metropolitan Area (GKMA). Key factors to consider within the framework of a standard feasibility analysis will include (i) demographics; (ii) population density; (iii) accessibility and proximity to major transport systems; (iv) ample parking space; (v) existing private healthcare services; (vi) healthcare gaps; (vii) other viability indicators; and (viii) benchmarking with location practices of leading healthcare brands.
- **Roll Out:** To set up the Poly Clinic and prepare for its roll out, MHUG will procure support services to (i) design the facility layout; (ii) procure medical equipment and supplies; (iii) recruit and orient healthcare professionals and auxiliary workers; (iv) comply with regulatory and legal requirements for set up; (v) procure technology infrastructure; (vi) conduct brand promotion; (vii) develop policy and standard procedures; and (viii) set up business processes and systems to viably run the Poly Clinic.
- **Staffing Model:** MHUG Poly Clinic will use a lean staffing model that ensures efficiency and effectiveness while minimizing cost and redundancy; streamlining operations; and maximizing productivity. MHUG will hire Poly Clinic staff capable of meeting tight targets in the private sector context. MHUG will systematically develop a private sector oriented *Human Resource Policy and Procedures Manual* contextualized to the Poly Clinic needs to attract, hire, deploy, develop and retain competent doctors, nurses, specialists, technicians and administrative staff.

Initiative 1.3.5: Develop a healthcare pre-payment scheme.

Given the lack of a national health insurance scheme, MHUG will pilot a pre-payment scheme into which clients will deposit funds for healthcare bills upfront and insure mitigate the financial burden of paying out-of-pocket. MHUG will (i) conduct a standard feasibility analysis for the concept; (ii) develop a standard business model and plan; (iii) benchmark against similar initiatives; (iv) design a policy framework for its implementation. In line with *Good-to-Great* approaches, MHUG will start by piloting at a small scale with less cost and low risks and only scale up after proving and calibrating the viability and sustainability of the concept. MHUG will pilot this concept in Yr01 with an aim to generate adequate learning to inform the way forward of the idea.

3.3.4 STRATEGIC OBJECTIVE 1.4: Design and operate viable and self-sustaining auxiliary hospital services and patient experience amenities (*Quadrant 3 of MHUG Four-Quadrant Organization Design*).

MHUG will establish and maintain viable and self-sustaining auxiliary hospital services including (i) laboratory, (ii) radiology, (iii) pharmacy, and (iv) patient-centric amenities. Below are the key interventions to enhance auxiliary hospital services.

Initiative 1.4.1: Optimize MHUG radiology and medical imaging services.

Utilization of MHUG radiology facilities was sub-optimal by the end of SP 2018-2023. The X-ray Unit operated at 10% of its capacity. The Ultrasound Unit operated at 30% of its capacity. This sub-optimal level hindered viability and sustainability of the radiology service. During SP 2023-2028 period, MHUG will optimize the radiology service through the interventions outlined below.

- **Service Scope:** To enhance the quality of services, MHUG will increase its scope of radiology and medical imaging to include (i) hysterosalpingography; (ii) intravenous pyelography; and (iii) computer tomography. It will expand Ultrasound services to include (i) 3D/4D scanning; (ii) vascular scanning; (iii) echocardiography; and (iv) doppler scanning.
- **Equipment and Technology:** In the 2018-2023 period, MHUG procured modern digital X-ray and Ultrasound machines to keep its service up-to-date. Guided by its 2022 Equipment Needs Evaluation, MHUG will procure a CT-scan as additional modality to increase its service scope to include (i) coronary CT angiography (CTA); (ii) virtual colonoscopy (CT Colonography); (iii) pulmonary CT angiography (CTPA); (iv) dual-energy CT; and (v) perfusion CT.
- **Mobile Imaging Unit:** MHUG will invest in a mobile imaging unit to provide radiology and imaging services to patients who are immobile in the Hospital, or offsite, or in remote areas. The Unit will have a portable X-ray machine; a mobile point-of-care ultrasound (POCUS); and a mobile mammography unit fitted with digital mammography equipment. MHUG will adhere to national standards pertaining to licensing and safe operation. In addition, MHUG will ensure that its services effectively address the needs of target populations.
- **Tele-Radiology:** MHUG will strengthen internal referral systems to increase cross-selling and set up external referral systems between the Hospital and other health facilities in the MHUG catchment area. Implementing tele-radiography will enable healthcare workers to seek expert input, facilitate consultations and avail to patients timely expert assistance.
- **Business Design:** MHUG will base the planned initiatives on a comprehensive business plan backed by robust feasibility analyses. To ensure viability and sustainability the Hospital will monitor financial performance by analyzing key financial performance indicators. Evidence from performance monitoring will guide decisions on the scale and continuity of operation.
- **Training:** MHUG will continually invest in staff training to keep radiology and medical imaging staff abreast with advances in the field and to equip them to provide quality services.

Initiative 1.4.2: Optimize MHUG laboratory.

During SP 2023-2028, the MHUG laboratory will maintain its ISO 15189:2012 accreditation; expand its test menus; scale up disease surveillance; broaden the accreditation scope for the tests offered; adopt innovative methodologies; and empower staff to address current and emerging healthcare needs effectively and efficiently. These interventions are elaborated below.

- **Service Scope:** The Laboratory anticipates sustained rapid innovation resulting in increased range and scope of tests and services. To stay up-to-date and responsive to evolving needs, the laboratory will increase the continuum of tests and services offered, enabling provision of a more comprehensive and holistic approach to patient care, research and public health services.
- **Disease Surveillance:** The Laboratory will scale up support for disease surveillance focusing on (i) antimicrobial resistance; and (ii) routine testing for sickle cell disease and hepatitis B. To combat the threat of antimicrobial resistance, the laboratory will (i) strengthen its capacity

to identify and monitor resistant pathogens; (ii) deploy advanced testing methodologies; (iii) collaborate with stakeholders to track resistance patterns; and (iv) support interventions, outbreak management and preventive measures. Another priority area will be (i) routine testing for sickle cell disease and hepatitis B; and (ii) enabling early detection, improved management and better health outcomes. These initiatives will enhance disease surveillance, improve public health interventions and promote well-being in communities served by MHUG.

- **Accreditation Scope:** The laboratory maintained its ISO 15189:2012 accreditation in the 2018-2023 period. In the new period, it will widen its accreditation scope for comprehensive and diverse test menu covering more diagnostic needs. Additional accreditations and certifications in specialized areas will result in new competency domains including Division of AIDS (DAIDS) Good Clinical Laboratory Practice (GCLP) certification.
- **Innovation:** Using the placement approach to procurement, the laboratory will adopt advanced technologies to improve access to services and reduce turn-around-time for tests and results. It will procure and place point-of-care (POC) equipment at various points in the Hospital. POC modalities will enable quick access to tests at low cost thus availing the service to more clients.
- **Laboratory Controls:** The laboratory will produce and distribute commercial laboratory control materials to enable accurate and reliable laboratory testing and provide to healthcare facilities standardized and quality-controlled substances for calibration and verification purposes. This will result in overall improvement of laboratory testing quality, enable laboratories to meet regulatory requirements, and enhance patient care by ensuring accurate and precise test results.
- **Staff Competency:** The Laboratory will hire and retain skilled and experienced staff to run its work and support them to acquire key competencies essential for professional growth and advancing the laboratory's goals. Following recruitment, staff will undertake minimum training prior to starting work; and continual training programs. Trainees will gain credit units that will add to competence assessment and periodic appraisal. Other key training areas will be technical skills enhancement and fostering competent character-based laboratory leadership.

Initiative 1.4.3: Enhance external laboratory services and collaborations.

MHUG external laboratory services encompass collaborating with (i) Central Public Health Laboratory (CPHL); (ii) private sector players in medical laboratory sub-sector; (iii) development partners, international agencies and the UN Family; (iv) peer organizations in medical laboratory business; and (v) organizations that collaborate with MHUG for mutual benefit in form of capacity building, quality management, accreditation, referrals, research, equipment placement and equipment maintenance among others. During the SP 2023-2028 period, MHUG will strengthen its external laboratory collaborations through the means outlined below.

- **Customer Care:** MHUG will enhance client care for patients seeking external laboratory services giving them a memorable customer experience that surpasses their expectations. Staff will be trained to serve laboratory clientele guided by a standard customer care code aimed at ensuring clients (i) sign up for services; (ii) speak well of the services; (iii) make repeat visits; and (iv) refer new clients in their circles.
- **Operational Efficiency:** During SP 2023-2028, MHUG will increase efficiencies in external laboratory services through (i) quality improvement to ensure accurate and reliable results; (ii) improved turn-around-time for external laboratory tests; (iii) improved data management; (iv) reduced processing times for test results through integrating state-of-the-art POCs; and (v)

faster and more accurate diagnosis. These benefits will (i) increase efficiency and accuracy; (ii) improve patient outcomes; and (iii) improve overall healthcare service delivery.

- **Innovation:** MHUG will develop innovative products in its external laboratory service that cater for diverse needs of patients and stakeholders. The laboratory will introduce advanced diagnostic tests that (i) offer rapid and accurate results; (ii) enable clinical decision-making; and (iii) improve patient outcomes. The offer will include an integrated telemedicine element to enable seamless remote access to diagnostics and consultation.
- **Viability:** MHUG will improve laboratory viability by (i) optimizing equipment and resource utilization to lower cost and offer competitive pricing; (ii) offering tailored packages and subscription-based services for long-term partnership and improved revenue streams; (iii) partnering with research entities resulting in collaborative research projects and funding from research grants; and (iv) balancing innovation with sustainability to ensure financial viability.
- **National Backup:** In 2018-2023, the laboratory was a national backup laboratory for Viral Load (VL) testing and testing for Early Infant Diagnosis (EID) of HIV. It supported scale up of SARS-Cov-2 testing during the COVID-19 pandemic. During SP 2023-2028, it will expand this role and linkage its information systems to those of the national reference laboratory.
- **Accreditation:** In the 2018-2023 period, MHUG supported public health facilities in quality assurance, quality control and accreditation resulting in ISO15189 accreditation of 5 public laboratories. In SP 2023-2028 period, the laboratory will leverage its accredited status and capacity to offer to private laboratories affordable consultation services toward accreditation.
- **Training and Mentorship:** During SP 2023-2028, the laboratory will offer to other laboratories comprehensive training and mentorship programs in quality assurance and quality control to ensure accurate and reliable laboratory results. It will scale up inter-laboratory comparison to include private laboratories and ensure traceability to international proficiency testing. This will enable the laboratory to share expertise and best practices while gaining valuable insights into quality management, quality control protocols and adherence to regulatory requirements. It will partner with MIHS to train and mentor in ISO 15189 accreditation, Laboratory Quality Management Systems (LQMS) and biosafety and biosecurity. This will enhance quality of laboratory services, promote standardization and improve accuracy of diagnostic results.

Initiative 1.4.4: Optimize MHUG pharmacy services.

MHUG has well established pharmaceutical services with a twenty-year unbroken track record in supply chain and patient management. Logistics management, pharmacovigilance, therapeutics and poison management operate at sub-optimal level with under-utilized capabilities. MHUG will enhance these units during 2023-2028 to make Pharmacy more responsive to patient needs.

- **Supply Chain and Store:** MHUG will establish a Stores and Supply Chain Unit complete with strong systems, structure and processes. The Hospital will allocate resources to the Unit such as personnel, technology and infrastructure for managing hospital inventory. This intervention will improve MHUG supply chain and procurement and distribution of commodities.
- **Pharmacy Workforce:** The Hospital will hire skilled and experienced pharmacy staff and build their competencies to foster professional growth and advance pharmacy objectives. It will arrange rigorous training programs aligned with pharmacy standard and industry trends and dynamics. Staff will earn credit units from training that will count in competence assessments

and performance appraisals. The Hospital will arrange special programs to enhance technical skills and leadership development in a pharmacy service context.

- **Technology:** MHUG will adopt advanced technologies for enhanced inventory management. It will advance to systems that enable real-time inventory tracking and monitoring for accurate and up-to-date information. It will integrate Barcoding, Radio Frequency Identification (RFID) and other identification technologies to simplify inventory tracking and minimize error. The unit will leverage data analytics and predictive algorithms to optimize inventory management, enable proactive decision-making using demand forecasting. These actions will transform MHUG inventory control and ensure efficient and effective supply chain management.
- **Stock Audits:** Priority will be given to regular stock audits to maintain accurate inventory data. Audits will verify physical stock and compare it with the recorded levels. Cycle counting and periodic physical inventory checks will identify and address discrepancies and trigger audits when deemed essential. These measures will result in efficient inventory management and ensure optimal resources utilization and uninterrupted supply of essential commodities.
- **Procurement:** MHUG will streamline procurement policies and procedures tailoring them to its needs for efficient commodities acquisition. It will review current policies and procedures and align them with procurement needs and design efficient processes and systems.
- **Coordination:** MHUG will enhance supply chain coordination and communication with health workers, suppliers and distributors culminating in streamline communication channels and accurate information sharing on inventory, demand forecasts and delivery schedules.
- **Critical Supplies:** To ensure the timely availability of critical supplies, MHUG will implement vendor-managed inventory (VMI), or consignment stock agreements where deemed, allowing suppliers to manage and replenish inventory using real-time demand data. Collaboration with suppliers will enable negotiation of favorable terms and conditions and ensure smooth and reliable procurement. MHUG will reap higher operational efficiency, less delays, resource optimization, timely access to essential supplies and less stockouts.
- **Therapeutics and Pharmacovigilance:** MHUG will establish an interdisciplinary collaborative unit in clinical pharmacy to optimize therapeutic outcomes. The unit will facilitate sharing of knowledge and expertise among healthcare professionals and aid decision-making related to patient care. Its key roles will be (i) therapeutic drug monitoring; (ii) ensuring safe and effective medicine use by monitoring drug levels; (iii) assessing patient response; (iv) make adjustments to optimize therapeutic outcomes; (v) oversee pharmacovigilance and poison management; (vi) monitor adverse drug reactions to safeguard patient well-being; (vii) conduct clinical drug audits; (viii) assess medication practices to enhance safety and outcomes; and (ix) implement effective protocols to enhance medication safety and minimize risks.
- **Continuum of Products:** During 2023-2028, MHUG will increase the continuum of products it avails to its clientele by piloting low-scale preparation of basic devices and topical creams, ointments and lotions to treat common ailments and conditions. It will also procure and provide nutraceuticals and natural products to support wellness through natural holistic approaches.
- **Importation:** During 2023-2028, MHUG will seek approval for importation and dealership in medical devices and products. This will involve obtaining permits, adhering to regulatory requirements and complying with importation guidelines on quality, safety and effectiveness.

Initiative 1.4.5: Design and provide amenities that patients and other people in the Hospital enjoy using.

Through patient amenities MHUG will significantly contribute to making the Hospital comfortable for patients and their caregivers, family members and visitors, as well as for staff and students. In SP 2023-2028, MHUG will design and provide amenities that patients and other people visiting the Hospital enjoy using as outlined below.

- **Food Service:** During Yr01, MHUG will improve the current eatery at the MHUG site with aim to (i) uphold food handling standards; (ii) codify operation processes; (iii) review management and staffing; (iv) align the outfit with new MHUG thinking; (v) improve the dining experience; (vi) enhance the menus; (vii) improve the layout and décor; (viii) revamp the kitchen to meet institutional catering standards; and (ix) introduce a mixed restaurant-cafeteria-canteen service model to increase options. In Yr03, MHUG will upgrade the eatery into restaurant-and-cafeteria arrangement and relocating it to the Uphill Section of MHUG site. The service will generate revenue from selling meals and beverages. It will have a Nutritional Hub providing nutritional education and counseling; community nutrition awareness; and nutrition skills training.
- **Retail Service:** MHUG will establish a shop to serve as a convenient on-site facility providing essential items to patients, visitors and staff. It will stock personal care items, toiletries, over-the-counter personal care products, newspapers, magazines, snacks and drinks. Its location will ensure convenience and easy access for patients, visitors and staff. It will be a one-stop-source of items that are essential to patients, visitors and staff. Additional shops will be established based needs assessment findings and increased demand for the service.
- **Laundry Service:** MHUG will expand the current laundry and relocate to a site where it is more conveniently placed to cater for the needs of patients. The laundry will have washing machines, dryers and ironing stations that patients will access at a fee that will constitute MHUG revenue.
- **Kitchen Facilities:** The Hospital will revamp kitchen facilities to enable inpatients prepare light meals. The kitchen will avail assorted resources including microwave oven, refrigerator, blender, cooker and utensils that inpatients will access by paying a convenience fee.
- **Business Centre:** The hospital will set up a business center offering workspace amenities for patients, visitors and staff needing a place where they can work from. It will have workstations with computers, printers, scanners, high-speed internet access and mobile money outlets. It will generate revenue by charging a nominal user fee majorly for its maintenance.
- **Wellness Program:** MHUG will establish a wellness program in the Hospital to avail to patients assorted fitness, relaxation and recreational activities that promote their physical and mental well-being. The program will be linked to elderly clinic, NCD clinics, orthopedic clinic, mental health clinic, chest clinic and physiotherapy.

3.3.5 STRATEGIC OBJECTIVE 1.5: Run viable and sustainable grants and community projects (Quadrant 4 of MHUG Four-Quadrant Organization Design).

Grants and community projects will comprise (i) running HIV Prevention and Treatment Centre of Excellence at MHUG; (ii) modelling sustainable transformational community programming through the Project Never Die (PND) initiative; (iii) community health camps and outreaches; (iv) corporate social responsibility (CSR) initiatives; and (v) collaborating with local and international organizations. These initiatives are outlined below.

Initiative 1.5.1: Attain and sustain HIV epidemic control through evidence-based service delivery by the HIV Prevention and Treatment Centre of Excellence at MHUG.

MHUG will continue to play a key role in Uganda's national effort to attain and sustain HIV epidemic control and the global goal to end HIV as a public health threat by 2030. During the 2023-2028 period, MHUG will run one of Uganda's strategic HIV prevention and treatment sites with over 14,000 PLHIV enrolled in HIV care and treatment services.

- **Community Service Models:** MHUG will scale up Differentiated Service Delivery (DSD) for HIV care, an alternative delivery options which recognizes unique needs of PLHIV by availing personalized services. MHUG will use DSD models to scale up community ART refills, community-based care, and community-based peer-led support will be scaled up. With these approaches, ART refills for stable patients will be provided through community-based pick-up points where individuals will collect their medications without the need for regular hospital visits. The pick-up points will be organized into community drug distribution points (CDDPs) and client-led ART Distribution groups (CLADs). CDDPs will be out-of-facility models bringing HIV care services closer to the community by offering care in non-traditional settings such as pharmacies, community centers, or mobile clinics thereby reducing the burden of traveling to the hospital which may be far. CLADs will be peer-led models involving trained peers providing some aspects of HIV care, such as counseling, adherence support, and health education. Through CDDPs and CLADs, peers will offer support out of their own experiences, fostering a sense of trust and understanding. The hospital will aim to transition 50% of its current clinic attendance to differentiated ART refill model.
- **Integrated Service Delivery:** Following rollout of the general clinic, the HIV clinic will be integrated into the general section for patients opting out of community service models and choosing to get services at the hospital. The Corporate HIV Clinic in Bethany Private Wing will be modified to suit general clientele. This facility-based model will combine HIV care with general Hospital service. Integration will reduce current clinic fragmentation and ensure holistic care. It will also free up space to create a General Hospital Service. MHUG aims to transition 30% of its current clinic attendance to benefit from integrated service delivery. This approach will include a peer-led support mechanism where peers will offer support using their own experiences, fostering greater trust and confidence.
- **Telehealth:** Using this approach, MHUG will leverage technology to deliver remote HIV care. Telehealth will comprise telemedicine consultations; mobile health applications; messaging platforms enabling virtual interactions between patients and care providers; virtual monitoring; and medication management. Courier service will enable laboratory sample collection; relaying of results; and delivery of medicines. Hospital will transition 20% of its current clinic attendance to telehealth and digital health. HIV care models such as Multi-Month Drug Refills will be made more efficient with telehealth interventions.
- **Patient Experience:** The hospital will emphasize client care and engagement, ensuring that every patient experiences memorable customer experience. The patient waiting experience will be enhanced to include patient handling before, during and after they see a health worker. Enhancements will include pre-calls, Wi-Fi and post-visit handling. MHUG will improve health worker-patient engagement by promoting effective interactions, clear communication and professionalism. These efforts will significantly elevate satisfaction levels of HIV patients.

- **Client Mobilization:** MHUG will create patient awareness of the changes in the HIV clinic by optimizing communication channels to effectively inform all patients about (i) the changes; (ii) the new clinic hours; and (iii) the appointment procedures. Patient education programs will be strengthened to provide accurate information about HIV management services. MHUG will hold personalized counseling sessions to address individual concerns about the changes and emphasize the significance of treatment adherence and regular check-ups albeit the changes.

Initiative 1.5.2: Hold community health camps and outreaches.

The hospital will conduct community outreaches to interact directly with community members and avail a platform for reaching out to serve the community on various health issues. MHUG will use the camps and outreaches to showcase its services and contribute to health and well-being. Below are the three outreach types that will be organized.

- **Health and Wellness Camps:** MHUG will organize general health and wellness camps to give access to comprehensive healthcare services. Services will comprise general health check-ups; immunization; dental and oral health screening; eye care services; nutrition education; and general wellness. The camps will aim to promote overall well-being, early detection of health conditions, and preventive care with special focus on underserved communities.
- **Disease-Specific Camps:** MHUG will organize disease-specific and specialized camps to offer targeted healthcare. Camps will provide specialized consultations, screening, treatment or referral. They will be multi-dimensional designed to support diverse community health needs including women's health, NCD, chronic disease, mental health, metabolic diseases and disorders and other medical specialties. By addressing specific healthcare needs, camps will (i) enhance disease management; (ii) raise awareness; (iii) provide tailored care to individuals in underserved communities; and (iv) improve health outcomes and quality of life.
- **Health Education:** MHUG will organize community health education and awareness camps to promote health literacy and equip people with essential health knowledge. The interventions will comprise (i) community health education; (ii) awareness camps covering assorted health issues; and (iii) community advocacy and policy influence addressing cross-cutting community issues. Camps will deliver interactive education sessions, workshops and campaigns about preventive measures, hygiene practices, disease prevention, family planning and overall health promotion. Awareness creation and practical health information will empower people to make informed decisions, adopt healthy behaviors and engage in managing their own health. These efforts will improve community health outcomes and foster proactive engagement in health.

Initiative 1.5.3: Engage in corporate social responsibility (CSR) initiatives.

During SP 2023-2028, MHUG will engage in Corporate Social Responsibility (CSR) initiatives in collaboration with local leaders and partner organizations. This initiative will support community events and local projects by leveraging partner expertise and resources as outlined below.

- **CSR Service Delivery:** MHUG corporate social responsibility (CSR) will prioritize direct health care, education and outreach programs that directly benefit individuals, households and communities. CSR interventions will comprise health screening and medical camps; health education and awareness; community outreach and support; capacity building and training; collaboration with the private sector and civil society; disaster relief; and emergency response. These initiatives will focus on improving healthcare access; promoting health education;

providing medical services; and mitigating effects of emergencies or disasters. Emphasis will be to (i) meet immediate healthcare needs; (ii) build capacity; and (iii) enhance resilience.

- **Sustainable Development:** MHUG will work with MUG NGO on Project Never Die (PND) and other community projects to improve community wellbeing in a way that is impactful, transformational and can be sustained by the targeted communities. The partnership will support development initiatives in education, environment conservation and social welfare.

Initiative 1.5.4: Collaborate with local and international organizations.

MHUG will build partnerships and collaborations with local and international organizations such as schools, religious institutions, charities, foundations and community organizations to promote community health. Partnership selection will be guided by the MUG Partnership Development and Management Policy and Procedures Manual. Through these partnerships, the hospital will arrange tailored health education campaigns and address specific health concerns prevalent in target communities. MHUG will organize joint community health initiatives with its partners. Joint initiatives will include mass immunization; workshops to address specific community needs; and providing valuable information and resources. MHUG will ensure that it organizes health initiatives that effectively address the unique healthcare needs of the communities served and leave impact that is transformational and sustainable.

3.3.6 STRATEGIC OBJECTIVE 1.6: Institutionalize the MHUG comprehensive customer care plan across the Hospital.

During the SP 2023-2028 period, MHUG will institutionalize its comprehensive customer care plan (CCCP) across the Hospital. Below are the key CCCP initiatives.

Initiative 1.6.1: Develop a Comprehensive Customer Care Plan

During SP 2023-2028, MHUG will develop and institutionalize a Comprehensive Customer Care Plan (CCCP) based on the hospital's customer care philosophy as well as on the hospital's quality philosophy and Quality Management Systems (QMS). The plan will outline the hospital's approach to delivering exceptional customer care across all touchpoints of the patient journey. It will include defining clear customer care standards, protocols, and procedures to ensure consistency and quality in interactions with patients. The plan will also address proactive measures to anticipate patient needs, such as personalized welcome and assistance services, efficient appointment scheduling, and streamlined admission and discharge processes. Additionally, the plan will incorporate strategies for effective handling of patient inquiries, complaints, and feedback, including a dedicated feedback management system. It will also spell out standards for phone handling and related etiquettes. Regular monitoring and analysis of patient satisfaction metrics will be done to identify areas for improvement and measure the success of customer care initiatives. The CCCP will guide customer care in the hospital and so by developing it, the hospital will provide a positive and patient-centered experience, enhancing patient satisfaction, and fostering long-term relationships with patients and their families.

Initiative 1.6.2: Enhance staff training and skills development.

Based on the CCCP, MHUG will develop a comprehensive customer care training program to equip hospital staff with the necessary skills and knowledge. The program will include training on effective communication, empathy, and active listening skills, as well as handling patient inquiries,

complaints, and feedback. Cultural sensitivity and diversity awareness training will also be provided to ensure respectful and inclusive interactions with patients from diverse backgrounds. Additionally, performance evaluations will intentionally be aligned with customer care competencies and patient satisfaction metrics, fostering a culture of continuous improvement. Investing in staff customer care training and skills development will enable the hospital to empower its employees to deliver exceptional services, building trust and loyalty among patients while ensuring their needs and expectations are met with compassion and professionalism.

Initiative 1.6.3: Strengthen existing communication modalities for enhanced customer care.

The hospital's the existing communication channels and modalities will be enhanced and optimized during SP 2023-2028 and, in so doing, improve accessibility and responsiveness of communication channels to meet the evolving needs of patients. Key activities under this initiative will include enhancing the hospital's telephone helpline services to provide timely and accurate information to patients, rebranding the hospital's website and online portals for easy navigation and quick access to relevant information based on the new MHUG brand, and efficiently use email communication with patients who might benefit from that modality. Additionally, the hospital will expand the use of digital communication tools such as mobile applications and chatbots to provide real-time assistance and support. As alluded to earlier, this initiative will also involve training staff on effective communication techniques, active listening, and empathy to ensure that interactions with patients are professional, courteous, and empathetic. Through these approaches, MHUG will enhance customer care experience, facilitate seamless communication between patients and health workers, and build trust and satisfaction among patients.

Initiative 1.6.4: Institutionalize a culture of patient-centricity.

Fostering a culture of patient-centricity is a key strategy for enhancing the quality of healthcare services at MHUG. Based on the theory of Patient-Centered Care referred to earlier, MHUG will create an organizational mindset and values that prioritize the needs, preferences, and well-being of patients. The hospital will then intentionally put in place mechanisms to indoctrinate that mindset into the minds of its staff. Staff will be assisted to inculcate empathetic relationships with patients, actively listening to their concerns, and involving them in the decision-making process. Training programs and workshops will be conducted to enhance staff's communication and interpersonal skills. Additionally, feedback mechanisms will be implemented to capture patient experiences and suggestions for improvement. Through these actions, a patient-centered culture will be institutionalized thereby improving patient satisfaction and achieving better health outcomes for its patients.

Initiative 1.6.5: Implement a Customer Loyalty Program

As part of its Comprehensive Customer Care Plan (CCCP), MHUG will implement a Customer Loyalty Program (CLP) as a strategic initiative to enhance customer retention and satisfaction. The program will recognize and reward loyal patients who will consistently choose MHUG for their healthcare needs. The program will include various incentives such as exclusive discounts on services, priority access to appointments, personalized communications, and special privileges. MHUG will develop a Comprehensive Loyalty Program Framework, including clear guidelines, enrollment processes, and communication channels. The program will be promoted through multiple channels, including the hospital's website, social media platforms, and in-person

interactions. Regular monitoring and analysis of customer loyalty metrics will provide insights into the program's effectiveness and allow for necessary adjustments. In so doing, MHUG will strengthen its relationship with patients, foster a sense of value and appreciation, and ultimately build long-term loyalty and advocacy among its customer bases.

Initiative 1.6.6: Roll out a Customer Relationship Management (CRM) System

MHUG will rolling out a Customer Relationship Management (CRM) system as a strategic pivot to enhance customer care and improve overall patient satisfaction. The CRM system will enable the hospital to effectively manage and track interactions with patients throughout their healthcare journey. It will serve as a centralized platform for storing and accessing patient information, appointment records, communication history, as well as feedback. The CRM system will facilitate efficient communication and coordination among different departments, ensuring seamless and personalized care delivery. It will also enable MHUG to proactively address patient needs, follow up on inquiries, and provide timely responses. The implementation of the CRM system will involve either of two actions; developing an in-house organic software solution or selecting an appropriate software solution and configuring it to meet the hospital's specific requirements. Either way the software solution will be deployed, and staff provided with comprehensive training on how to use it. Through this initiative, MHUG will enhance its ability to understand and anticipate patient needs, build stronger patient relationships, and deliver a higher level of personalized care.

3.3.7 STRATEGIC OBJECTIVE 1.7: Institutionalize the MHUG quality philosophy across the Hospital.

MHUG has a hybrid quality philosophy derived from multiple schools of thought and its own experience to contextualize the quality agenda to the reality of its business. During the 2023-2028 period, MHUG will institutionalize its quality philosophy across the Hospital.

Initiative 1.7.1: Integrate the MHUG quality philosophy in the Hospital operational framework.

Below are the core elements of the MHUG quality philosophy that will be integrated into the Hospital's annual operational planning, budgeting, implementation and reporting frameworks.

- **Aims for Improvement:** In line with the Six Aims for Improvement (SAI) of the Institute of Medicine (IOM), the Hospital's quality philosophy aims at effectiveness, safety, patient-centeredness, timeliness, equity, integration, and efficiency.
- **Patient-Centeredness:** In accordance with this concept, MHUG integrates patients' values, desires and needs into their healthcare journey, acknowledging their role as key contributors to their own care and fostering a climate that engages them in shared decision-making and partnership with their healthcare providers.
- **Evidence, Engagement and Coordination:** This element comes from the triple aim framework of the Institute for Healthcare Improvement (IHI). In accordance with this element, MHUG prioritizes evidence-based practice when designing and implementing its programmes. Secondly, the Hospital engages patients in planning, developing, implementing and evaluating its work. Lastly, MHUG work involves coordination of care to improve patient outcomes and experiences and transforms healthcare systems to be patient-centered, population-focused, and financially sustainable.

- **Lean Design:** The Hospital incorporates principles of Lean Six Sigma that combines Lean principles and Six Sigma techniques to improve efficiency, reduce defects and enhance quality through waste elimination and data-driven process improvement.
- **TQM:** The Hospital incorporates the principles of Total Quality Management (TQM) in designing and executing its work by emphasizing a holistic approach to quality that involves all members of the organization and promoting a culture of continuous improvement.

Initiative 1.7.2: Conduct regular quality assessment of MHUG operations.

MHUG recognizes the importance of continually assessing healthcare quality to ensure the delivery of high-quality services. As part of its commitment to quality improvement, the hospital will routinely evaluate the quality of its services. The Donabedian model which is a framework for evaluating healthcare quality will be utilized. The model's three components of structure, process, and outcomes will be systematically assessed to identify areas of strength and areas for improvement. The hospital will regularly review its organizational structure to ensure that it has the necessary resources, facilities, and organizational characteristics to support effective healthcare delivery. The processes involved in providing care, including the actions of healthcare professionals and patient-provider interactions, will be monitored and evaluated to promote efficiency and effectiveness. Additionally, an assessment of patient outcomes, such as health status, satisfaction, and the impact of interventions, will be done to gauge the effectiveness of the healthcare services at the hospital. By consistently applying the model, MHUG will identify opportunities for enhancing healthcare quality and continuously improving its services to provide the best possible care to patients.

3.4 Strategic Goal 2 Objectives and Initiatives

Goal Statement: Strengthen the capacity of Mildmay Hospital Uganda (MHUG) to host research and training.

Strategic Goal 2 will be implemented through the following Strategic Objectives: -

Strategic Objective 2.1: Enhance the capacity of MHUG pharmacy and diagnostic services to support research and training.

Strategic Objective 2.2: Develop and manage effective training and research partnerships and collaborations.

Strategic Objective 2.3: Building the human resource capacity of MHUG to support experiential learning and research.

Overview

MHUG will strengthen its capacity to host research and training by (i) enhancing its pharmacy and diagnostic services to support research and training; (ii) developing and managing effective training and research partnerships and collaborations; and (iii) building its human resource capacity to support experiential learning and research. These interventions are outlined below.

3.4.1 STRATEGIC OBJECTIVE 2.1: Enhance the capacity of MHUG pharmacy and diagnostic services to support research and training.

MHUG is both a student learning site and a study site which routinely hosts studies, including clinical trials. As such, it will enhance its capacity to support research and education and to foster innovation. It will ensure its pharmacy, laboratory and radiology departments adhere to standards and continually compliant with regulatory regimes. It will collaborate with MRCU and MIHS to invest in developing a conducive research and training environment.

Initiative 2.1.1: Enhance capacity of MHUG radiology and medical imaging unit.

MHUG will enhance capacity of its Radiology and Medical Imaging Unit through investing in state-of-the-art equipment; specialized staff training; and process optimization. These will enable access to advanced diagnostic services with higher accuracy and efficiency; elevate patient care; support early diagnosis; and result into better health outcomes. Interventions are detailed below.

- **Infrastructure and Equipment:** MHUG will take a comprehensive approach to enhancing the infrastructure and equipment of its Radiology and Medical Imaging units. It will assess the current setup to identify areas to improve to optimize physical space for accommodating additional staff and imaging equipment. MHUG will invest in advanced technology to enable faster and accurate diagnosis. These investments will attract to the Unit cutting-edge research, advanced training programs, innovation and staff growth in radiology and medical imaging.
- **Optimize Radiology Workforce:** A staffing requirements assessment will be done for MHUG Radiology Unit to improve its workload management. MHUG will base on identified needs to recruit radiologists, technicians and support staff. It will continually conduct training to build staff competency and proficiency. MHUG will hire locums or temporary staff to plug capacity

gaps due to peak periods or temporary staffing gaps. This staffing approach will equip the Unit with a dedicated competent team that also participates actively in research, contribute to advancing science and supports the MHUG research objectives.

- **Optimized Workflow:** To maximize efficiency and lower turnaround time, MHUG will improve the workflow of its Radiology Unit. It will develop protocols and guidelines for various processes including scheduling, patient registration, image acquisition and reports. Picture Archiving and Communication Systems (PACS) and Radiology Information Systems (RIS) will be used to improve communication and data management. These actions in the Radiology Unit will improve operational efficiency and make workflows faster and seamless. Patients will benefit from reduced waiting time and better coordination resulting in better customer experience. The actions will also make Radiology Unit more conducive for research and training by improving productivity, data management and health worker collaboration.
- **Outsourcing Options:** Radiology and Medical Imaging units will explore outsourcing options for efficiency and capacity optimization. They will explore partnering with external imaging centers to handle (i) overflow cases; (ii) highly specialized diagnostics; and (iii) interpretation of results. Tele-radiology will expand the unit's capacity; enable remote consultations and image interpretation; and reduce patient waiting time. This will foster knowledge exchange, skills building, research collaboration, innovation and advance radiology and medical imaging.

Initiative 2.1.2: Enhance capacity of MHUG laboratory to support research and training.

During SP 2018-2023 period, MHUG focused on improving research coordination and efficiency. In the next SP period, the laboratory will build staff capacity to conduct operational research. Two major investments will comprise (i) a histopathology laboratory in response to growing cancer diagnostic needs and learning demands; and (ii) a biorepository to avail samples to researchers.

- **Staff Capacity for Research:** During SP 2018-2023, the MHUG laboratory's research role was largely to support research collaborations. During the SP 2023-2028 period, the laboratory will build capacity of its staff to conduct operational research and integrate research in its services. MHUG will collaborate with MRCU to design and run a training program on research skills building through workshops, seminars, hands-on sessions and online learning. Laboratory staff will get support to conduct research and publish and disseminate findings. MHUG will allocate resources for research aligned with the laboratory's priorities, innovation and advancement.
- **Lab Equipment and Infrastructure:** During SP 2023-2028, MHUG laboratory will address gaps in its infrastructure and equipment by allocating resources for crucial upgrades and adoption of new technologies. A histopathology unit will be established to address growing demand for cancer diagnostics and to avail a dedicated learning space for histopathology students. This will eliminate the cost of outsourcing this service. MHUG will also establish a biorepository to secure samples and avail them to researchers. Basic open system equipment will be acquired to enhance learning and diversity in basic testing, encouraging research, lowering costs and enabling better learning among students. These will be collaborative investments involving MIHS and MRCU due to their mutually beneficial nature.

Initiative 2.1.3: Enhance capacity of MHUG pharmacy to support research and training.

During SP 2023-2028, MHUG will strengthen capacity of its pharmacy to support research and training by staff and partners. This will foster a culture of continuous learning and innovation and improve patient care outcomes. The following initiatives will be implemented.

- **Study Site Pharmacy Standards:** As a student learning site and a study site that even hosts clinical trials, MHUG pharmacy will continue upholding safety and safe use of investigational medicinal products. During SP 2023-2028, MHUG will define standards for the pharmacy as a research site including safety, handling investigational medicinal products and reporting. It will review and operationalize criteria for the pharmacy as a learning site to ensure integrity of products; safeguard staff, students and human subjects; generate quality research outcomes.
- **Research Regulatory Framework:** During SP 2023-2028, the MHUG pharmacy will adhere to stringent regulatory compliance for patient safety by regularly obtaining licenses, certifications and accreditations essential for its operation and supporting research. It will maintain relevant approvals by National Drug Authority (NDA) and Uganda National Council for Science and Technology (UNCST) in addition to routine approvals for operating a hospital retail pharmacy.
- **Equipment and Infrastructure:** MHUG will redesign its pharmacy to match its role of hosting research and training. Initially, the pharmacy will enhance its storage capacity; temperature monitoring capabilities; and other storage controls. It will streamline its information systems to aid data management and documentation of research protocols. Inventory management will be improved to foster accountability. Subsequently, it will set up a dedicated compounding area equipped with specialized equipment. Other enhancements will include (i) refrigerators and freezers for proper medical storage; (ii) analytical balances; (iii) medication safety tools to reduce errors; (iv) barcode scanners for accurate tracking; and (v) medication stability testing chambers. Training and education will be provided to build skills of pharmacy staff.

3.4.2 STRATEGIC OBJECTIVE 2.2: Develop and manage effective training and research partnerships and collaborations.

During SP 2023-2028 period, MHUG will collaborate with MIHS and MRCU and partner with other research and training institutions to raise resources and promote innovation. This Objective will be achieved through (i) optimizing MHUG research collaboration with MRCU; (ii) resource mobilization and management collaboration; (iii) collaborative experiential learning and training; (iv) external collaborations on research and training; and (v) Centre for Ideation and Innovation.

Initiative 2.2.1: Optimize MHUG research collaboration with MRCU.

MHUG will review its research collaboration with MRCU to clarify (i) roles and responsibilities of the parties; (ii) resource mobilization and allocation; (iii) communication and collaboration; (iv) monitoring and ethical and regulatory compliance; and (v) intellectual property and publication. The following initiatives will be implemented.

- **Collaborative Research and Training:** To foster collaboration and partnership with MRCU and MIHS, MHUG will undertake two interventions. First, it will develop clear responsibilities and roles; and clarify contributions and obligations of each party in the collaborative research and training efforts. This will improve coordination and cooperation. Secondly, MHUG will improve communication channels with focus on regular updates, information sharing and seamless coordination. The two interventions will the quality of improve research partnership and promote collaboration for impactful research and training outcomes.

- **Compliance and Integrity:** To maintain ethical standards and uphold research integrity, MHUG will partner with MRCU to consolidate and institutionalize ethical compliance. It will enforce strict adherence to ethical and regulatory guidelines to uphold research integrity and human subject protection. Secondly, MHUG will consolidate and institutionalize intellectual property rights and publication guidelines and establish clear agreements to govern ownership, use and sharing of intellectual property. This will ensure transparency and fairness in ownership and dissemination of research findings. MHUG will develop publication policies, and outline processes and criteria for authorship, acknowledgment and data sharing. These measures will demonstrate commitment of MHUG and MRCU to ethical research, protection of the rights of participants and upholding research integrity.

Initiative 2.2.2: Collaboration on resource mobilization and management

MHUG will work with MIHS and MRCU to mobilize resources through joint fundraising and collaborative grant applications, sharing funding data and exploring corporate sponsorships and philanthropic partnerships. Below are key resource mobilization and management interventions.

- **Resource Mobilization Collaboration:** MHUG, MIHS and MRCU will collaborate to mobilize resources for research and healthcare initiatives. MUg NGO will support exploration of joint exploration of funding sources through joint fundraising and pooling resources. Collaboration will extend to collaborative writing of quality competitive grant applications. MUg entities will get support to leverage their networks and connections and share contacts and opportunities to expand their reach and increase their win-rate. Finally, MUg entities will get support to explore sponsorship and philanthropic opportunities to augment their resource base. MUg entities will collaboratively capitalize on their collective strengths to optimize the resource base to advance their research, training and healthcare objectives.
- **Resource Management:** MUg NGO will equip its three entities [MHUG, MIHS and MRCU] to ensure efficient resource management and utilization. MHUG, MIHS and MRCU will get support to build protocols and guidelines to ensure fair and transparent resource allocation. Secondly, MUg entities will get support to allocate resources based on project needs and ensure their effective utilization for research, training and healthcare. MUg will further support its entities to (i) efficiently allocate and utilize shared resources; (ii) minimize redundancy; and (iii) maximize cost-effectiveness. The NGO will support development of budget frameworks to guide financial planning and resource allocation. Regular monitoring and evaluation will be done to assess resource utilization, identify areas to improve and make informed decisions to improve subsequent allocations. These initiatives will optimize resource utilization; enhance operational efficiency; and maximize the impact of its research and healthcare.

Initiative 2.2.3: Collaboration on experiential learning and training.

MHUG will work with MRCU and MIHS to provide specialized staff training to enhance capacity for research and healthcare provision. Collaboration will enhance staff capacity by equipping them with essential knowledge and skills. Capacity building collaboration will involve tailor-made short courses and workshops as well as longer study courses.

- **Experiential Learning Collaboration:** MHUG will collaborate with MIHS to host experiential learning through internships, studentships, apprenticeships, and other trainings. This will allow

individuals to gain skills and practical experience in a healthcare setting. In so doing, MHUG will leverage its position as a healthcare provider to build human resources for health.

- **Training Collaboration:** MHUG will collaborate with MRCU and MIHS to enhance its staff capacity through tailored training programs to improve clinical skills, research methodology, and evidence-based practice. Staff will attend longer study courses to deepen their knowledge. This capacity building investment will equip health workers to provide quality healthcare; advance research; and foster continuous learning, professional development, and innovation.

Initiative 2.2.4: Establishing external collaborations on research and training.

MHUG will build external research and training collaborations to improve healthcare outcomes; improve MHUG knowledge base; foster professional development; share best practices; and drive innovation in patient care. MHUG will pursue the interventions outlined below.

- **Research Collaboration:** In addition to the inter-entity collaborations with MRCU, MHUG will collaborate with external research organizations to advance research and enhance scientific knowledge. These collaborations will (i) enable ideas exchange; (ii) build expertise; (iii) open access to resources; (iv) drive innovation; and (v) enhance research outcomes.
- **Training Collaboration:** In addition to the inter-entity collaborations with MIHS, MHUG will collaborate with other training institutions and healthcare organizations to advance experiential learning and enhance staff development. Collaborations will facilitate knowledge exchange; sharing best practices; access to specialized training; and build skills and expertise in MHUG.
- **Healthcare Collaboration:** MHUG will collaborate with healthcare organizations to enhance patient care and improve healthcare outcomes. It will establish partnerships with hospitals, clinics and healthcare networks locally and globally. Collaborative practices will range from simple networking to staff exchange and patient referrals. Collaboration zones will include (i) Greater Kampala Metropolitan Area; (ii) other cities across Uganda; (iii) sub-Saharan Africa; and (iv) globally. MHUG will pay special attention to facilities in India with which it has collaborated on paediatric health. Collaborations will be multi-faceted and multi-dimensional to facilitate (i) exchange of knowledge, expertise and best practices; (ii) sharing protocols; (iii) quality improvement; and (iv) enhancing care coordination and continuity across the healthcare continuum. Collaboration will involve joint research; multidisciplinary case conferences; and joint training to foster collaborative learning among health workers. Through closer working with healthcare organizations, MHUG will improve delivery of quality healthcare services; improve patient experiences; and drive innovation in healthcare delivery.

Initiative 2.2.5: Establishing an inter-entity Centre for Ideation and Innovation

During SP 2023-2028, MHUG will promote innovation by building ideation and idea development mechanisms. MHUG will promote creativity for problem-solving by encouraging idea sharing and supporting experimentation. This will be done through cross-functional collaboration to (i) enable diverse perspectives and expertise; (ii) nurture creativity; and (iii) drive continuous improvement. MHUG will liaise with MRCU to jointly develop and run a Centre for Ideation and Innovation.

- **Innovation Leadership:** MHUG will step forward to lead in innovation in its area of mandate. It will collaborate with MRCU and MIHS to enhance its value-addition to that leadership role. During Yr01, it will develop an Inter-Company Innovation Working Group to advance the Innovation Agenda across MUg Group. In Yr03, the Working Group will metamorphose into

an Innovation Committee to consolidate the Innovation Agenda. These structures will promote buy-in of the Innovation Agenda and champion its consolidation and mainstreaming. Feedback mechanisms will be built to motivate, recognize, reward and celebrate innovation. MHUG will identify and allocate resources to support the Agenda and build collaboration and partnership with external players to advance innovation.

- **Capacity Building:** MHUG will collaborate with MRCU and MIHS to develop and implement a *Comprehensive Innovation Capacity Building Plan*. The plan will entail targeted training sessions, workshops and other educational opportunities at all levels. These will be tailored to the work staff do and their work environment. Interventions will aim to enhance staff skills in creative thinking, problem-solving, design thinking and emerging technologies.
- **Mainstream Innovation:** MHUG will work with MIHS and MRCU to mainstream innovation. This will be realized through recruitments where innovation will be considered as one of the merits, and through performance management to recognize outstanding innovation. These initiatives will mainstream the culture of innovation in MHUG and across MUG Group.
- **Mildmay iLab:** MHUG will develop the Mildmay iLab—an ideation and innovation center to serve as an ‘innovation hub’ or ‘innovation lab.’ Mildmay iLab will avail a dedicated space for nurturing and fostering innovation to address current and emerging needs in healthcare. It will be a physical and virtual space where individual staff or teams brainstorm and experiment concepts; collaborate on projects; and innovate solutions to problems or needs. MHUG will avail to iLab a basic resource package and support to access tools, technologies, advanced software, hardware, prototyping equipment and expertise. The iLab will be the nucleus to catalyze and institutionalize innovation in MHUG and across MUG Group.
- **Innovation Fund:** MHUG will work with MRCU and MIHS to pool resources for an Innovation Fund. The Fund will support innovative projects and ideas with potential to improve efficiency and effectiveness in healthcare delivery. This collaborative effort will cultivate a dynamic and progressive environment where innovation thrives to benefit MHUG, MUG and the community.

3.4.3 STRATEGIC OBJECTIVE 2.3: Building the human resource capacity of MHUG to support experiential learning and research.

MHUG staff skilled in research regulation, ethics, processes and protocols will enable successful execution of research and training. As a research and training site, MHUG will collaborate with MRCU and MIHS to build capacity of its staff to support research and training.

Initiative 2.3.1 Research skills development for hospital staff.

MHUG will use three skills development approaches focused on (i) minimum skills packages for staff to conduct or support research; (ii) short courses on research methodology; and (iii) holding Continuing Medical Education (CME). The approaches will be implemented as outlined below.

- **Research Skilling:** MHUG will collaborate with MRCU to identify minimum skills essential for staff involvement in conducting or supporting research within the Hospital. Staff will get training to become well-versed with (i) regulatory requirements and ethical considerations; (ii) Human Subjects Research (HSR); and (iii) Good Clinical Practice (GCP). Further, MHUG will conduct protocol-specific training to staff participating in specific research studies. This will equip them to effectively carry out their roles and responsibilities on research projects.

- **Research Courses:** MHUG will collaborate with MRCU and MIHS to deliver short courses on research methodology targeting the Hospital staff. The courses will enhance research skills of staff with focus on (i) research design; (ii) data collection and analysis; and (iii) interpretation of research findings. These courses will increase staff proficiency in research methodology; position them to effectively conduct research; and improve the quality of their work. Course will be tailored to specific needs and interests of MHUG staff and ensure relevance of their research effort. Through structured and targeted research training, MHUG will equip staff with the tools and techniques essential for robust and impactful research and support their growth and development into research careers.
- **Continuing Medical Education:** MHUG will implement Continuing Medical Education (CME) to keep staff up-to-date with advancements in medical knowledge. CME will avail regular educational activities [in form of workshops, seminars, conferences, online courses]. Its design will aim to (i) enhance clinical skills; (ii) deepen healthcare knowledge; and (iii) promote evidence-based practice. Staff participation in CME will (i) expand their expertise; (ii) improve patient care outcomes; and (iii) maintain professional competency. MHUG will liaise with MIHS and other organizations and experts to deliver high-quality CME programs. This will promote lifelong learning among staff, support professional growth and improve patient care.

Initiative 2.3.2: Institutionalize framework for supporting experiential learning.

MHUG will collaborate with MIHS and MRCU to standardize and rollout SOPs for experiential learning including placement, industrial training, internship, studentship and other apprenticeship forms. MHUG will identify staff and train them on that those criteria. It will also develop essential infrastructure supportive of learning. The major interventions are outlined below.

- **Experiential Learning:** MHUG will work with MIHS to standardize criteria for experiential learning by defining (i) eligibility and engagement requirements; (ii) learning objectives; (iii) evaluation methods; (iv) program duration; and (v) guidelines for participants and facilitators. Together with MIHS, the Hospital will develop comprehensive resources for participants to use in their experiential learning journey. Staff coordinating and supervising these programs will get training on ensuring effective experiential learning. Regular evaluation and feedback will be done to (i) refine criteria and procedures; (ii) ensure continuous improvement; and (iii) optimize impact of experiential learning on participants' professional growth. In addition to learning, this approach will advance healthcare education and practice.
- **Research and Innovation:** Building on the notion that a hospital is inherently a research entity, MHUG will engage MRCU, MIHS and other research entities to build a culture of research and innovation among its staff. This will create an environment that encourages and supports staff to conduct research and innovate. Through MRCU support, MHUG will identify and allocate staff to support research. This will entail (i) assessing staff capabilities; (ii) matching skills to research needs; and (iii) availing resources and support to conduct research in MHUG settings. MHUG will partner with MRCU to hold research fora, seminars and conferences for knowledge sharing, collaboration and showcasing research findings. The Hospital Research Committee will (i) oversee research work; (ii) provide guidance; and (iii) champion collaboration with MRCU, MIHS and other partners. Further, MHUG will mobilize grants for research projects by staff. The Hospital will enhance staff research skills by organizing research training. These

interventions will foster a culture of research and innovation in MHUG and position it to take part in advancing medical knowledge and improving healthcare outcomes.

- **CPD:** MHUG will collaborate with MIHS and other organizations to implement Continuous Professional Development (CPD) targeting healthcare workers. The CPD program will hold regular training workshops, seminars and conferences to enhance knowledge and skills. MHUG will encourage staff to attend external training programs to expand their professional networks and stay informed on new trends. MHUG will build mentorship programs where experienced healthcare professionals guide and support junior staff. Performance appraisals will identify individual training needs that will inform the design of tailored learning opportunities.

3.5 Strategic Goal 3 Objectives and Initiatives

Goal Statement: Strengthen the institutional capacity of MHUG to sustainably deliver its mandate.

Goal 3 will be realized through implementing six Strategic Objectives outlined below.

Strategic Objective 3.1: Build MHUG corporate governance for effective oversight.

Strategic Objective 3.2: Ensure sustainable MHUG resourcing through a dual-track mechanism built on 70% healthcare revenue and 30% grants and other non-healthcare revenue.

Strategic Objective 3.3: Attract productive inspired human resources with the right skills, attitude and commitment, place them in a progressive MHUG culture and support them excel.

Strategic Objective 3.4: Provide effective and efficient finance, administration and support.

Strategic Objective 3.5: Leverage shared Group services and resources.

Strategic Objective 3.6: Undertake joint Group-level strategic investments.

Overview

Strategic Goal 3 articulates how Mildmay Hospital Uganda (MHUG) will build its institutional capacity to achieve its priorities for the 2023-2028 period. To achieve this Goal, MHUG will carry out seven Strategic Objectives comprising (i) corporate governance; (ii) sustainable resourcing; (iii) human resource productivity; (iv) stewardship of resources; (v) leveraging shared Group services and resources; (vi) joint strategic investments; and (vii) strategy execution monitoring.

3.5.1 STRATEGIC OBJECTIVE 3.1: Build MHUG corporate governance for effective oversight.

To achieve this Objective, MHUG will implement three initiatives comprising (i) establishing the Board of Directors; (ii) strengthening the MHUG policy framework; and (iii) strengthening MHUG internal audit and risk management framework.

Initiative 3.1.1: Establish the MHUG corporate governance structures.

During the SP 2018-2023 period, Mildmay Hospital Uganda (MHUG) embarked on the journey to redefine itself from a Directorate toward incorporation as a legal entity in the SP 2023-2028 period. The MUg Board of Directors designated a Hospital Development Committee (HDC) to oversee the process. As part of the process leading to incorporation of Mildmay Hospital Uganda (MHUG) during the SP 2023-2028 period, the MUg Board will lead the process of appointing and orienting the MHUG Board of Directors. The MUg Board will develop the MHUG Board Charter comprising (i) Board composition; (ii) Board nomination and formation; (iii) roles of the Hospital Board; (iv) Board sub-committees; (v) proceedings of Board meetings; (vi) tenure of office; (vii) emoluments for Board members; (viii) powers and limitations; (ix) review of Hospital Board guidelines; (x) dissolution of Hospital Board; and (xi) monitoring and evaluating Board activities.

MHUG will strengthen its internal governance by leveraging the internal governance structures at MUg HQ to support the Hospital's growth. Key HQ structures and platforms that will support MHUG growth include (i) Group Leadership Team (GLT); (ii) Senior Administration Team (SAT); (iii) Group Leadership Dialogue; (iv) Management Reflection; and (v) Group Central Business Forum (GCBF). MHUG will liaise with HQ for inclusion on the HQ corporate calendar.

Initiative 3.1.2: Develop the MHUG policy framework aligned with the MUG Group context.

MHUG will develop its policy framework in alignment with the MUG Group context.

- **Group Inter-Company Policy:** MUG HQ will implement this policy to ensure that MHUG and other MUG Entities preserve their corporate unity in perpetuity regardless of changes caused by their (i) growth or (ii) change of focus or (iii) change of location. As per this policy, MHUG will remain aligned with the essence for creating the MUG Entities as means of sustaining the MUG NGO. Secondly, the policy requires MHUG to uphold the MUG ethos and values when making its strategic choices and decisions. The Policy will form part of the MHUG orientation pack at governance level, executive leadership level and senior managerial level.
- **Transfer Pricing Policy:** MUG HQ will implement the Transfer Pricing Policy (TPP) to regulate related party transactions among MUG Entities including MHUG and ensure such transactions comply with legal and tax provisions. MHUG will ensure its transactions with other Entities in the MUG Group comply with the TPP. MHUG will participate in regular TPP reviews.
- **Policy Development:** MHUG will review existing policies to align them with its evolving status as a separate legal entity and to ensure they facilitate realization of its 2023-2028 strategy goals. The Hospital will develop new policies essential to achieve its goals for the new period. Management will support the Board to harmonize all MHUG policies. To institutionalize the Hospital's policies, MUG HQ will include it in the Group-level audit frameworks.

Initiative 3.1.3: Establish MHUG audit and risk management frameworks.

During the SP 2023-2028 period, the Hospital will establish an Internal Audit Unit that reports to the Hospital Board and is located in the office of the Hospital Director. The Hospital Internal Audit Unit will be independent of the MHUG management influence and will be overseen by the MUG HQ Internal Audit Manager. The Scope of the MHUG Audit Unit will extend to all levels of the key branches of the Hospital's business comprising (i) General Hospital Services; (ii) Bethany Private Wing; (iii) Auxiliary Hospital Services; (iv) Grants and Community Projects; and (v) Fundraising, Gifts and Donations. Secondly, MHUG will develop a Risk Management Framework and institutionalize it through staff training and roll out to all levels of its business. MUG HQ will support the Hospital Internal Audit to grow along five Focal Areas comprising (i) independent objective assurance; (ii) capacity building; (iii) fraud prevention; (iv) integrated assurance and collaboration; and (v) alignment with MUG Group context.

3.5.2 STRATEGIC OBJECTIVE 3.2: Ensure adequate MHUG resourcing through a dual-track mechanism built on 70% patient-care revenue and 30% non-patient-care revenue.

To achieve Objective 3.2, MHUG will (i) run the five branches of its business viably to generate 70% of its resourcing; (ii) generate 30% of MHUG resourcing from non-patient-care sources.

Initiative 3.2.1: Run the five branches of MHUG business viably to generate 70% of resources required to achieve the Hospital's 2023-2028 goals.

MHUG will undertake the actions outlined below to ensure that the five branches of its business run viably and generate 70% of the resources needed to achieve its SP 2023-2028 goals.

- **Group Central Business Forum:** During SP 2023-2028, MUG will continue to participate in the monthly Group Central Business Forum (GCBF) held to review business performance. GCBF will discuss bottlenecks hindering achievement of revenue targets. MHUG attendees of GCBF

will comprise the executive and business leadership of the Hospital. A key outcome of GCBF will be to ensure viability of the five branches of MHUG business comprising (i) General Hospital Services; (ii) Bethany Private Wing; (iii) Auxiliary Hospital Services; (iv) Grants and Community Projects; and (v) Fundraising, Gifts and Donations.

- **Business Model:** To ensure a holistic approach to MHUG business design, GCBF will monitor adherence by the Hospital to the nine Business Model Building Blocks presented in **Goal 1 Objective 1.1**. This will minimize business complexity and inefficiency caused by mismatch in business models and their interpretation across the Hospital. The Business Model Building Blocks will form part of the core curriculum for the Management Development Program run by Mildmay Uganda Leadership School under MIHS. Business managers at all levels of MHUG will be enrolled in MUg Leadership School during Yr01 of the 2023-2028 SP period.
- **Customer-First Culture:** MHUG will develop and implement a plan to integrate customer-first culture tailored to its context and the unique needs of its clients. To standardize the Hospital's approach to customer care, it will develop tailored customer-first-culture plans aligned with the eleven elements of the MUG Whitepaper On Institutionalizing Customer-First Culture.
- **Marketing:** MHUG will liaise with Business Development Department at MUg HQ to realize the MHUG Seven-Prong Marketing Model. Under Prong 1, MHUG will create and maintain demand, relevance, reputation and competition for its brand. Prong 2 will (i) define the target audiences and marketing objectives; (ii) determine key messages and branding; and (iii) staff the marketing unit. Prong 3 will integrate multiple resources including traditional channels, digital channels, stories, events, promotions, exhibitions, testimonials and word-of-mouth. Prong 4 will build backward and forward linkages that promote the MHUG brand. Prong 5 will engage clients in ways that lead to (i) buy-in; (ii) positive word-of-mouth; (iii) repeat business; and (iv) client-generated referrals. Prong 6 will reward people who become MHUG business generating ambassadors. Prong 7 will allocate budget for marketing initiatives. The principal marketing reference point will be the MHUG Comprehensive Marketing Strategic Direction developed during the 2018-2023 SP period and its subsequent revised versions. Key initiatives will comprise (i) brand development and positioning; (ii) digital marketing and online presence; (iii) community engagement; (iv) strong partnerships and collaborations; (v) targeted marketing campaigns; and (vi) patient engagement and loyalty programs.

Initiative 3.2.2: Generate 25% of the resourcing required to achieve the Hospital's 2023-2028 goals through running an effective and efficient Programme Acquisition and Management Steering Committee (PAMSCO) mechanism.

During the SP 2018-2023 period, the Central PAMSCO at MUg HQ cascaded the concept to the Hospital level by developing the MHUG PAMSCO. By the end of that SP period, the Hospital PAMSCO still presented with major capacity gaps that hindered achievement of MHUG grants mobilization targets. During the SP 2023-2028 period, the MHUG PAMSCO will aim to generate 25% of the Hospital's non-patient care revenue. This target will comprise grants and will exclude PEPFAR sub-grants allocated to MHUG in respect of ongoing HIV treatment and prevention for the 14,000 PLHIV in care at the MUg HIV/AIDS Centre of Excellence. There is a high likelihood that PEPFAR sub-grants to attain and sustain HIV epidemic control in Kampala-Wakiso Region will remain accessible to the MHUG HIV/AIDS Centre of Excellence as long as the 14,000 PLHIV

continue to trust the Hospital as their choice healthcare provider. MHUG PAMSCO will raise 25% of the resources required to achieve the Hospital's goals through the process outlined below.

- **MHUG PAMSCO:** During Yr01 of the SP 2023-2028 period, MHUG will invite a cross-section of its staff to constitute its PAMSCO. In liaison with MUG HQ PAMSCO, MHUG will equip its PAMSCO through (i) capacity building; (ii) technical assistance; and (iii) developing policy, SOPs, guidelines and tools. In exercising its mandate, the MHUG PAMSCO will (i) mobilize grants for the Hospital; (ii) coordinate with HQ PAMSCO; (iii) oversee projects built out of its grants mobilization; and (iv) monitor and evaluate MHUG grant projects.
- **Grant Writing and Management:** Through its PAMSCO, MHUG will deepen and scale-up its grants acquisition and implementation and prioritize grants that (i) give staff opportunity to learn, teach and innovate; (ii) grow MHUG toward a teaching hospital as guided by the 30-year Master Plan; (iii) develop Hospital infrastructure; and (iv) promote community transformation for sustainable health. To strengthen grant acquisition, MHUG PAMSCO will participate in HQ mechanisms including (i) Main PAMSCO; (ii) Programme Oversight Mechanism (POM); and (iii) Programme Oversight Senior Team (POST).

Initiative 3.2.3: Develop and grow other forms of resource mobilization generating 5% of the resources required to achieve the MHUG 2023-2028 goals

MHUG will raise 5% of the resources needed to achieve its 2023-2028 goals as outlined below.

- **Fundraising:** During the SP 2023-2028 period, all MUG Entities will have interest to mobilize resources through Fundraising. Lack of coordination of the Entities risks sending mixed signals to the public. The Fundraising Unit at MUG HQ will coordinate all fundraising efforts across the Group. MHUG, alongside other MUG Entities, will partner in Fundraising coordinated by MUG HQ. This will minimize the *“fatigue from feeling bombarded by Mildmay people on all sides”* that may arise when the community encounters multiple MUG groups seeking support. Even in cases where assistance is sought for MHUG, it will be centrally coordinated at HQ.
- **Consultancy:** MHUG will equip itself to win and execute local and international consultancies in partnership with other MUG Entities, established consultants and consulting organizations. It will review the Consultancy Incentives Policy to make it fair to all parties. Adaptations will include allocating to staff time to engage in consultancy that ensures win-win for all parties.
- **Financial Markets:** MHUG embarked on financial investments in money markets in 2018-2023 period and will continue investing during the SP 2023-2028 period.
- **Pharmaceutical Products:** MHUG will partner with other internal and external stakeholders to produce medical products to subsidize its operations while meeting community health needs.
- **Laboratory Courses:** MHUG will partner with MIHS and MRCU to develop and run initiatives that generate resources in health education and training and health research.

3.5.3 STRATEGIC OBJECTIVE 3.3: Attract productive inspired human resources with the right skills, attitude and commitment, place them in a progressive MHUG organizational culture and support them excel.

MHUG staff will be its prime input for the 2023-2028 period. To achieve its 2023-2028 goals, MHUG will (i) cultivate a progressive organizational culture that helps people thrive; (ii) attract the right people and place them in the right positions; (iii) build the leadership spirit in all MHUG

employees; and (iv) run a bold and candid performance management system. This approach will be MHUG's way of developing and celebrating its staff—the crown of all its resources.

“Many people think the power of Coca-Cola is the strength of the brand. Yet it's the route salesman who is the unsung hero, the one who does the real heavy lifting, literally and figuratively. Those were the people we tried to motivate. And quickly, we saw the difference in the marketplace.”⁷

Neville Isdell and David Beasley
Co-Authors of “*Inside Coca-Cola*”.

Initiative 3.3.1: Cultivate a progressive MHUG culture that helps people thrive.

MHUG will consciously design and cultivate an environment that excites staff as the place where they work with the very best and become part of an elite class.

- **Inspirational Culture:** MHUG will cultivate and propagate a culture that inspires enthusiasm in its staff giving them a sense of pride from associating with something special. It will set itself apart by defining, codifying and inculcating a culture to distinguish it as a haven of opportunity to those who satisfy the stringent selection process and want to prove themselves through elite performance. This cultural revolution will be a key process in MHUG because it concerns the prime resource available to the Hospital—PEOPLE. Over the next years up to 2030 and beyond, MHUG will work in a faster, more complex and more disrupted environment and risks getting irrelevant or extinct unless it revolutionizes itself by rising beyond a short-term outlook and growing its staff as a strategic resource that yields competitive advantage. This thinking will be translated into staff training, coaching and mentorship programmes.
- **Challenge and Reward:** The sectors and markets where MHUG operates continually become more challenging and complex. The Hospital will cultivate an environment that rewards people who work hard and deliver quality results despite the pressure. It will guarantee success for whoever has the drive, initiative and the ability to produce value by serving patients. On the contrary, it will eject those who lack the drive to thrive amidst challenge and complexity.
- **Culture Doctrine:** MHUG will consciously design and comprehensively codify its culture. Staff will be immersed in the culture code through (i) onboarding; (ii) orientation; (iii) counselling; (iv) heroic stories of MHUG values; and (v) coaching and mentorship on succeeding in MHUG. According to James C. Collins and Jerry I. Porras, “... you don't need to create a “soft” or “comfortable” environment to build a visionary company. We found that the visionary companies tend to be more demanding of their people than other companies, both in terms of performance and congruence with the ideology ... “Visionary,” we learned, does not mean soft and undisciplined. Quite the contrary. Because the visionary companies have such clarity about who they are, what they're all about, and what they're trying to achieve, they tend to not have much room for people unwilling or unsuited to their demanding standards.”⁸ MHUG will build in its culture the common traits of visionary companies namely (i) fervent performance

⁷ Neville Isdell and David Beasley, *Inside Coca-Cola: A CEO's Life Story of Building the World's Most Popular Brand*

⁸ James C. Collins and Jerry I. Porras, *Built to Last: Successful Habits of Visionary Companies*

- ideology; (ii) strong indoctrination into core success ideology; (iii) tightness of fit—you either fit in the culture or it ejects you; and (iv) elitism—a sense of belonging to something superior.
- **Follow-Through:** MHUG will focus its culture on follow-through of essential actions. It will standardize timeframes for follow-through of agreed actions at all decision-making levels. Monitoring timely and conclusive follow-through will form part of staff performance rating. MHUG will interpret lack of follow-through, indecision and procrastination as career-limiting knowing that every indecision and procrastination costs the Hospital money.
 - **Completed Staff Work:** MHUG will recognize and reward ability to deliver completed work by (i) investing time and effort in in-depth background work; (ii) cultivating personal ability for deep concentration on essential tasks; (iii) ability to subject oneself to growth and progress by delivering results; and (iv) upholding trust and winning trust with colleagues and clients.
 - **Christian Example:** MHUG is a Christian environment that employs, serves and transacts with people regardless of their religious or other social orientation. It defines “*Christian*” as a choice to benchmark the example of Jesus Christ in performing its work. Christ’s example is the guiding star of the *MHUG Way of Life and Business*. That’s why its response to challenge and difficulty includes Christ’s examples of prayer, inquiry, listening, reflection and gratitude. During the SP 2023-2028 period, MHUG will enhance its Christian ethos by (i) revitalizing the Chaplaincy Unit; (ii) designating volunteer Assistant Chaplains at all its locations; (iii) running a devotional calendar and prayer diary; (iv) attending to staff spiritual wellbeing; (v) conducting regular worship at all sites; (vi) confidential counseling services; (vii) building its reputation as the reliable healthcare partner; and (viii) monitoring growth in its Christian ethos.

Initiative 3.3.2: Attract the right staff to MHUG and place them in the right positions to optimize benefit for the Hospital.

In accordance with Good-to-Great philosophy, MHUG HR management will aim to (i) attract the right people with the right character, talent and attitudes; (ii) place them in the right positions; and (iii) release people who lack the requisite competence to thrive elsewhere. To achieve its talent aspirations, MHUG will undertake the mechanisms outlined below.

- **Digitalization:** MHUG will adapt and leverage digital tools and platforms for talent acquisition including AI-powered recruitment, Analytics and automation of its onboarding processes.
- **Partnerships:** MHUG will proactively source for talent including partnering with professional bodies and academic institutions to access great talent.
- **Succession Planning:** MHUG will build a strong talent pipeline for continuity and sustainability of its work. This will be attained by building strong bench strength for all key positions that influence the Hospital’s effectiveness, competitiveness and sustainability.
- **Competitive Remuneration:** MHUG will implement a remuneration and rewards system that is benchmarked against its competitors in the healthcare industry.
- **People-Centricity:** MHUG will place concern for people at the center of realizing its vision and execution of its mission. This will be achieved by setting people up for success with the tools they need and a favorable work environment. MHUG will document people strategies as a way of codifying the Hospital’s pledge to its employees and demonstrating how they benefit.

Initiative 3.3.3: Build the leadership spirit in every MHUG employee in line with the MUg Group leadership philosophy.

MHUG will enroll 100% of its staff for Online Management Development Programme courses run by MIHS. Staff will be enrolled for the courses outlined below that suit their level of assignment.

- **Frontline Leadership:** While frontline health workers comprise 60-70% of the total workforce, they are least served by quality leadership development programmes addressing challenges at their level. Despite this gap, these health workers live and work under increasing complexity. The MUg Leadership School run by MIHS will conduct the *Online Certificate in Personal and Frontline Leadership* targeting the frontline health workers in the Hospital.
- **Team Leadership:** The quality of team leadership influences effectiveness and efficiency of healthcare delivery. Although team leaders comprise less than 20% of the workforce, they influence the effectiveness of the frontline workforce comprising 60-70% of health workers. They are also least prioritized for quality leadership programmes tailored to their context. The Leadership School will run the *Online Certificate in Team Leadership* targeting all categories of frontline team leaders in MHUG.
- **SBU Leadership:** Managers of MHUG Strategic Business Units (SBUs) constitute a crucial 10% of the Hospital team in charge of (i) planning; (ii) organizing; (iii) controlling; (iv) motivating; and (v) coordinating. MUg has learnt that many people managing healthcare delivery at this level have never experienced quality leadership training tailored to their unique needs. The Leadership School will run the *Online Certificate in SBU Management and Leadership* for the SBU Managers across the five branches of MHUG business.
- **Executive Leadership:** MHUG executive level leaders play key overarching roles comprising (i) setting vision; (ii) defining strategy; (iii) mobilizing resources; (iv) implementing strategy; (v) identifying and growing talent; (vi) building culture; and (vii) setting policies, standards, procedures and systems. Unlike in More-Developed-Economies (MDEs), executive leaders in the African healthcare context rarely access quality leadership training tailored to their context. The Leadership School will run the *Online Executive Certificate in Health and Social Service Leadership* targeting executive level leaders in the Hospital.
- **Governance Oversight:** Board members will play a key role to (i) set strategic direction; (ii) guide top leadership; (iii) monitor internal controls; (iv) uphold compliance, accountability and transparency; and (v) guard stakeholder interests. The Leadership School will run the *Online Certificate in Governance of Health and Social Services* targeting the MHUG Board.

Initiative 3.3.4: Run a bold and candid performance management system.

The performance management system inherited from the NGO appraises performance (i) post-probation; (ii) semi-annually; and (iii) annually. It cannot flexibly assess performance weekly, monthly and quarterly which is essential in the increasingly complex workplace. The system does not address problems of performance problems with consistent boldness and candor.

- **SMART Targets:** MHUG will equip managers to set specific, measurable, attainable, realistic and time-bound targets that are digitalized to minimize bias in performance appraisal.
- **Performance Portal:** MHUG will develop a digital Performance Reporting Portal that staff will use to report against SMART targets weekly. The Portal will close off weekly reporting screens upon expiry of weekly report deadlines. The Portal will generate cumulative performance data and ride on digitalization to enable rapid performance analysis. Quantitative data on the Portal

will validate with qualitative data from other sources to inform staff about their performance stand and equip managers to take evidence-based action on performance issues.

- **Candid Feedback:** The Leadership School will equip supervisors to give performance feedback in a frank and straightforward manner to stimulate real debate of performance issues. MHUG will consider it career-limiting for supervisors to (i) withhold constructive criticism; (ii) pass performance issues up the chain of command instead of addressing them; (iii) keep quiet over performance issues just to buy peace or avoid conflict; (iv) sugarcoat performance feedback; (v) keep performance issues to self never letting supervisors know; and (vi) behaves in ways that suffocate candor. MHUG will celebrate candid approach to under-performance that (i) gets more people involved; (ii) surfaces, discusses and improves ideas; (iii) generates speed by rapid discussion, enhancement and execution of ideas; (iv) cuts costs by avoiding needless processes or hesitation; and (v) addresses performance problems frankly and boldly. These will be KPIs for MHUG supervisors since its growth trajectory demands courageous leadership.

3.5.4 STRATEGIC OBJECTIVE 3.4: Provide effective and efficient finance, administration and support services to MHUG.

During SP 2023-2028 period, MHUG will ensure stewardship of MHUG resources through efficient and effective finance, administration and support services using the initiatives outlined below.

Initiative 3.4.1: Provide financial management mechanism.

While MHUG leveraged the MUG HQ financial management mechanism for a larger part of the SP 2018-2023 period, it later embarked on building its own financial management framework. By the end of the period, MHUG financial management had a Head of Finance and several staff managing accounts and handling payables and receivables. During SP 2023-2028 period, MHUG will develop, implement and monitor its own policies, SOPs and controls and only depend on MUG HQ for technical support. It will have its financial management framework and prepare its own management and audited accounts to be consolidated at Group level. MHUG will leverage on HQ system enhancements comprising (i) cloud-based ERP; (ii) finance analytics; (iii) tax integration; (iv) digitalization; (v) cyber security; and (vi) fraud prevention.

Initiative 3.4.2: Run effective and efficient supply chain management.

By end of SP 2018-2023 period, MHUG had begun to build a supply chain mechanism while still leveraging MUG HQ. Since HQ plans to decentralize supply chain during 2023-2028, MHUG will consolidate its supply chain to suit its needs and access support from MUG HQ supply chain team. It will develop its Supply Chain Policy and Procedures Manual.

Initiative 3.4.3: Effective and efficient support services to MHUG.

In SP 2023-2028 period, MHUG will partner with MUG HQ to effectively manage its properties, infrastructure, utilities and facilities and maintain their registry and records.

- **Estate Management:** MHUG will liaise with HQ to manage its properties and keep them viable legally, economically, socially and technologically [*by establishing real-time asset reporting systems*]. These will cover (i) land; (ii) buildings; (iii) physical and digital security and safety systems; (iv) accessibility; and (v) surface water drainage systems.
- **Fleet Management:** By close of SP 2018-2023 period, MHUG had 1 vehicle – an ambulance still in a good state. MHUG will procure 1 new vehicle during the 2023-2028 period.

- **Domestic Services:** MHUG will partner with HQ to jointly outsource services for cleaning offices, compound and linen. MHUG will also partner with HQ and other Entities to (i) procure robust heavy duty laundry equipment; and (ii) install a new incinerator [the old incinerator reached decommissioning during the SP 2018-2023 period].

3.5.5 STRATEGIC OBJECTIVE 3.5: Leverage centrally shared services and resources.

During SP 2023-2028 period, MHUG will leverage the centrally shared services and resources outlined below to run its activities effectively and efficiently.

Initiative 3.5.1: Enhance MHUG projects and business operations through ICT optimization.

HQ ICT Department will lead the process of ICT Optimization to accelerate MHUG business using a tailored approach woven out of the concepts outlined below.

- **Cloud First:** In the 2018-2023 period, MUg started using cloud to service MHUG. However, like most enterprises that use cloud, HQ did not move all the functions MHUG needs to the cloud. Through a Cloud-First Strategy, ICT Department will consider moving all or most of resources MHUG needs to the cloud. This will aim to reap cloud-first benefits such as (i) access to powerful computing resources on demand; (ii) quick access to servers, databases and other services by leveraging cloud; (iii) eliminating the capital cost of setting up physical MHUG data centers and servers; (iv) efficiency by paying only for used resources; (v) avoiding cost of obsolescence; and (vi) ICT sustainability for MHUG.
- **Digital by Design:** MHUG appreciates that rapid digital transformation will continue to change its business landscape. During SP 2023-2028, MHUG will avail to its stakeholders services that deliver on the promises of the digital age. It will take a strategic approach to using digital tools and data to become digitally competent in an increasingly digital era. Using digital-by-design, HQ will exploit full potential of digital technologies in designing MHUG services.
- **Data-driven Culture:** Massive data collection by MHUG demands a strategic approach to data and technology to enhance business intelligence. To elevate data into a strategic asset, MHUG will liaise with HQ ICT Department to elevate its capacity to produce, store, process and share data and use it to enhance business intelligence and institutionalize a data-driven culture.
- **Regulatory Framework:** Given that ICT will remain a centrally shared service across the MUg Group, regulation will be crucial to its success. The ICT Steering Committee will be the MUg ICT Regulatory Framework. The Committee will (i) monitor and review ICT roles; (ii) align ICT execution with Group context; (iii) support ICT project execution; (iv) adapt ICT to shifts in business; (v) streamline procedures; and (vi) facilitate sharing data and resources.
- **Caution About Technology:** Jim Collins' Good to Great research showed that great companies avoid technology bandwagons, yet they pioneer in carefully selected technologies.⁹ The key question for MHUG technology adoption will be whether the technology fits directly with the Hedgehog Concept of the Hospital. If yes, MHUG will deploy that technology. If no, it will delay or ignore it. In line with good-to-great thinking, MHUG will use technology to accelerate business momentum, not to create it. Great companies do not trigger their transformation using technology but apply technology that fits with their business to accelerate momentum. MHUG will adopt technology thoughtfully and creatively, driven by compulsion to turn unrealized

⁹ Jim Collins, *Good to Great: Why Some Companies Make the Leap ... and Others Don't*

potential into results [a sign of inner drive for greatness]. It will avoid the tendency of mediocre companies to react and lurch about, driven by fear of being left behind. It will appreciate that, in a technology era, it cannot be a laggard and be great. However, it will note that technology by itself is never a primary cause of greatness. In Jim Collins' research, technology never surfaced among top five drivers of greatness even in companies famous for technology use.

Initiative 3.5.2: Impact Monitoring support to MHUG [as a shared service].

HQ Impact Monitoring Unit will support MHUG to institutionalize rigorous questioning in design and execution of its work. It will equip MHUG planners to integrate Outcome and Impact measures in project and business designs. HQ will support MHUG to evaluate impact generated by projects and businesses guided by MUg *Impact Evaluation Policy and Standard Operating Procedures*. Impact Monitoring Unit will also (i) disseminate MHUG strategic plan; (ii) assess implementation of strategy; (iii) assess alignment of staff onboarding and orientation with the SP; and (iv) integrate the aligned staff onboarding and orientation in the MHUG and Group M&E framework.

Initiative 3.5.3: Communications and branding support to MHUG [as a shared service].

In SP 2023-2028 period, HQ Communications Department will support MHUG to inspire priority publics to own, build, promote and defend its brand. MHUG will build its Communication Office by setting up a Communication Desk to serve as its Communications Focal Point. HQ will support MHUG with (i) capacity building; (ii) quality control; (iii) audit; (iv) coordination; and (v) channel building. To shed off the legacy of "HIV-associated stigma" that characterized MUg, MHUG will take a bold branding stand guided by the *Whitepaper on Standardizing Corporate Communication, Branding and Marking Across MUg*. The Whitepaper will guide target setting for communication, marketing, branding and marking. HQ will support MHUG to manage its corporate partnerships as guided by the *Guidelines on Corporate Partnerships, Alliance and Networking*.

- **Internal Communication:** Internal communication exists in MHUG. The hospital will work the Communications and Partnerships Department to enhance internal communication. Several initiatives will be implemented. First, current communication channels and platforms will be evaluated for effectiveness and thereafter enhanced. Utilization of social media platforms, the email portal, and the staff meetings will be enhanced to facilitate information sharing and collaboration among team members. Email marketing campaigns will be used to engage with the hospital's target audience. Second, regular communication updates from the hospital leadership will continue to be provided to keep staff informed about important organizational news, changes, and updates. The updates will foster transparency and ensure that all staff are well-informed. Lastly, a culture of open communication will continue to be encouraged, creating an environment where staff feel comfortable sharing ideas, feedback, and suggestions. This will promote a sense of ownership and engagement among the workforce, leading to improved teamwork and organizational effectiveness. These approaches will enable MHUG to strengthen collaboration, improve staff morale, and provide better patient care.
- **External Communication:** To create a robust mechanism for hospital communications, it is crucial to develop a comprehensive external communication strategy. MHUG's external communications will be streamlined in line with the hospital's new brand identity. This this will be done by utilizing various communication channels, such as social media platforms, the hospital's website, and media relations, to effectively reach the target audience. Compelling

and informative content showcasing the hospital's expertise, services, and community impact will be shared. Through these initiatives, MHUG will deliver engaging content, disseminate information to the intended audience, engage with the public, and establish a strong presence in the community. This will enhance the hospital's visibility, build trust, and foster positive relationships with patients, community members, and other stakeholders.

- **Patient Education:** Alluded to earlier, patient engagement and education will play a vital role in empowering patients and other individuals to take control of their health. The hospital will create educational materials and resources providing patients with relevant health information that will enable them to make informed decisions and actively participate in their healthcare journey. Patient engagement initiatives will include interactive workshops, webinars, and support groups which will be implemented to facilitate meaningful patient involvement. These initiatives will foster collaboration between patients and healthcare providers, promoting proactive healthcare behaviors leading to improved health outcomes and patient satisfaction.
- **Crisis Communication:** As MHUG rebrands itself, crisis communication preparedness will be crucial, as such, the hospital will develop a comprehensive crisis communication plan outlining strategies and protocols for handling and communicating during crises. This will be crucial for effectively navigating emergencies and critical situations. The plan will ensure dissemination of timely and accurate information to address crises and guide patients, staff, and stakeholders. Regular training and drills will be conducted to ensure staff readiness and familiarization with crisis management, enabling them to respond swiftly and effectively in high-pressure situations. This initiative will enable MHUG to mitigate potential risks, maintain public trust, and minimize the impact of crises on patient care and organizational reputation.
- **Stakeholder Engagement:** As MHUG rebrands, it will build strong stakeholder relationships with patients, employees, community members, and healthcare partners. Effective stakeholder engagement will be a crucial aspect of the hospital's communication strategy. In order to facilitate meaningful engagement, various communication channels and platforms will be streamlined and consolidated to encourage objective dialogue and collaboration. Regular stakeholder meetings, surveys, and focus groups will be conducted to gather feedback, address concerns, and incorporate stakeholder perspectives into decision-making processes. The hospital will also actively involve stakeholders in the development and implementation of the new initiatives spelt out in this plan. Openness and accountability will be maintained by sharing relevant information and progress updates with stakeholders. These considerations will enable MHUG earn trust, build partnerships, and align its goals with the needs and expectations of stakeholders, ultimately improving healthcare outcomes and enhancing patient satisfaction.

3.5.6 STRATEGIC OBJECTIVE 3.6: Undertake joint Group-level strategic investments.

MHUG will partner in undertaking the Group-wide joint strategic investments outlined below.

Initiative 3.6.1: Partnering in building the MUG Estate Maintenance Fund.

During the SP 2013-2018 and 2018-2023 periods, MUG HQ experienced continual reduction in the funds it accesses for maintaining its estate. During SP 2023-2028, HQ will rally its Entities to build the MUG Estate Maintenance Fund to sustainably address urgent needs such as (i) security wall; (ii) buildings repair; (iii) CCTV coverage; (iv) fire safety; and (v) pavement repair. The Fund will be a joint strategic investment by MUG Entities that will initially require US\$ 440,000.

Initiative 3.6.2: Jointly invest in the solar energy generation project.

During SP 2018-2023 period, hydro power accounted for 94% of MUg electricity consumption with stand-by generator accounting for 6%. Given a monthly power bill of UGX 20 million, MUg spends UGX 1.2 billion on power every 5 years. MUg observed steady rise in its electricity cost besides rising electricity tariff. Given anticipated increase in operations across the Group, cost of electricity will become unsustainable. During SP 2023-2028, MUg will generate solar energy and make it the dominant source of electricity. MUg will upgrade its existing solar system to generate 1.664 MWh daily [607.5 MWh annually]. The upgrade will cost US\$ 328,540 [equivalent of a 5-year power bill at current consumption and tariff] and will generate enough power to run MUg Main Site throughout the SP 2023-2028 period with a lifespan of 25 years and payback period of 4-5 years. Project benefits are (i) access to power at zero cost from Yr6 onward; (ii) low cost of operation after payback; (iii) energy independence; and (iv) contribution to a green world. To reap these benefits, MUg Entities will jointly invest upfront the equivalent of their 5-year power bill.

Initiative 3.6.3: Jointly invest in the water harvesting project.

During the SP 2018-2023 period, MUg bought 90% of its water from National Water and Sewerage Corporation and 10% from private sector dealers. Given a monthly water bill of UGX 22 million, MUg spent UGX 1.32 billion on water in the 5-year period. MUg observed steady rise in its water bill and rising water tariff. With anticipated increase in operations across the Group, the water cost will rise to unsustainable levels. During 2023-2028, MUg will diversify water supply by installing a rainwater harvesting system and motorized boreholes. It will procure 2 motorized boreholes and water harvesting storage capacity of 100M³. That capacity will meet current MUg consumption of 100,000 liters per day and cater for the rising water demand as traffic at Main Site rises from 1,600 to 4,000 people. The system will cost US\$ 119,465 with a payback period of 2-3 years. Project benefits will include (i) year-round availability of water with minimal disruption; (ii) sustainable operation across MUg; (iii) increased water independence; (iv) cost saving; and (v) operational efficiency. To gain these benefits, MUg will invest 40% of its 5-year water bill.

Initiative 3.6.4: Jointly invest in the biogas production project.

During the SP 2018-2023 period, MHUG [alongside other MUg Entities and HQ] relied on wood fuel and charcoal to prepare meals accessed by their staff, volunteers, patients, students, research participants and other categories of clientele and visitors. The monthly expenditure on charcoal and wood fuel was UGX 21 million, besides the cost of environment degradation and pollution. The cost in 5 years at the same consumption level translates to UGX 1.26 billion. Projected growth over the next 5-10 years makes wood fuel and charcoal unsustainable energy sources. Besides, the next SP period comes on the backdrop of a presidential ban on charcoal burning and a paradigm shift toward cleaner and sustainable energy options. During 2023-2028, MUg will produce biogas as a shift to cleaner, sustainable and environmentally-friendly energy. MUg Main Site raises 400 Kg of waste daily with potential to generate 35m³ of gas per day. Current Main Site population uses 20-25m³ energy equivalent of gas daily. The projected population of up to 5,000 people can generate 60m³ in the long run. Given the expected gas of 35,000 liters, production will be sufficient for the energy requirements of the Main Site. The biogas system with capacity to generate 35m³ of gas will cost US\$ 59,000 with a payback period of 1-2 years. Since the current drainage system combines wastewater, MUg will redesign it to isolate solid waste for biogas production. The outlay

will cost 17% of the 5-year cost on charcoal and wood fuel. Project benefits will be (i) cleaner energy; (ii) migration from wood fuel; (iii) bio-effluent organic fertilizer for farming systems; (iv) probable income from sales of bio-slurry; (v) energy independence; (vi) environment protection; and (vii) cost savings and operational efficiency for MUG.

Initiative 3.6.5: Make MHUG programmes and businesses responsive to Climate Change.

MHUG relies on using traditional fuels like petrol and diesel to run its automobiles and wood and charcoal for cooking. Emissions from these fuels harm the environment and human health. Global energy demand is projected to grow by over 50% by 2035 hence the need to invest in renewable energy. MHUG will contribute to reducing carbon emissions by (i) partnering in joint projects for solar energy and biogas; (ii) retrofitting buildings with LED appliances; (iii) adopting designs that are environmentally-friendly for its new buildings; and (v) using its land efficiently.

4 Budget Projections for 2023-2028

This section presents the budget projections for the MHUG 2023-2028 Strategic Plan.

4.1 Budgeting Assumptions for 2023-2028

Below are the key assumptions underlying the SP 2023-2028 budget projections for MHUG.

4.1.1 General Group 2023-2028 Budget Assumptions

1	SP 2023-2028 projections was based on Incremental Budgeting and Zero-Based Budgeting to cater for the lack of core PEPFAR funding in the next 5 years.
2	Baseline Year FY 2022/2023 shows actual performance.
3	Projection considered Board feedback to revise targets given lack of core CDC funding.
4	Projected increments take into consideration movements in inflation.
5	SP 2023-2028 financial targets reduced by over 200% compared to SP 2018-2023 five-year targets because of transition of Mubende Region CDC Project to Baylor and end of the Wakiso CDC Project under which MUG received sub-grants from IDI.
6	All MUG Entities will operate as Going Concerns in line with the MUG transitional principles of (i) Portfolio Stabilization; (ii) Business Continuity; and (iii) Bounce Forward.
7	Group Core Reserve to grow to a net balance of US\$ 500,000 by Yr05.

4.1.2 Mildmay Hospital Uganda (MHUG) 2023-2028 Budget Assumptions

1	MHUG will increase its unrestricted revenues by 10% per annum.
2	MHUG will raise on average UGX 650 Million per annum in new grant revenue.
3	Due to limited resources, capital investments will be limited to enable MHUG attain operational self-sufficiency. The MHUG PAMSCO will undertake special initiatives to raise resources [cash and in-kind] for Capital Investments.
4	MHUG unrestricted income contribution to overall Group Revenues will be 10% per annum.
5	PEPFAR funding for the HIV Care & Treatment Centre of Excellence under MHUG will reduce by average of 30% per annum in the subsequent period.
6	PEPFAR will support ARV medicines for over 14,000 patients registered in care under the HIV Care and Treatment Centre of Excellence under MHUG for the next 5 years.
7	50% of the projected Net Profit will be transferred to the Group Core Reserve.

4.2 MHUG Income Projections for 2023-2028

REVENUE PROJECTIONS		2023/2024	2024/2025	2025/2026	2026/2027	2027/2028
GENERAL HOSPITAL REVENUES	%age					
General Out-Patient Department Revenue	77%	246,927,426	271,620,169	298,782,186	313,721,295	345,093,425
General In-Patient Service Revenue		-	-	-	-	-
Other General Hospital Revenues	23%	73,757,543	81,133,297	89,246,627	93,708,958	103,079,854
Sub-Total for General Hospital Services	9%	320,684,969.40	352,753,466	388,028,813	407,430,254	448,173,279
BETHANY PRIVATE WING REVENUES						
Private Wing Out-Patient Revenue Projections	47%	602,887,742	663,176,517	729,494,168	765,968,877	804,267,321
Private Wing In-Patient Revenue Projections	44%	564,405,546	620,846,101	682,930,711	717,077,246	752,931,109
Other Private Wing Revenue Projections	9%	115,446,589	126,991,248	139,690,373	146,674,891	154,008,636
Sub-Total for General Hospital Services	36%	1,282,739,877.61	1,411,013,865	1,552,115,252	1,629,721,015	1,711,207,065
ANCILLARY SERVICES REVENUES						
ISO 2012:15189 Certified Laboratory	43%	842,688,836	926,957,720	1,019,653,492	1,121,618,841	1,233,780,725
Imaging: X-Ray and Ultrasound	10%	186,175,441	204,792,985	225,272,283	247,799,511	272,579,463
Pharmacy	40%	783,896,592	862,286,251	948,514,876	1,043,366,364	1,147,703,000
Ambulance	1%	9,798,707	10,778,578	11,856,436	13,042,080	14,346,288
Restaurant		-	-	-	-	-
Others	7%	137,181,904	150,900,094	165,990,103	182,589,114	200,848,025
Sub-Total for Ancillary Hospital Services	55%	1,959,741,480	2,155,715,628	2,371,287,190	2,608,415,909	2,869,257,500
GRANTS & COMMUNITY PROJECTS REVENUES						
Grants in kinds HIV/AIDS Centre of Excellence		2,200,000,000	2,200,000,000	2,200,000,000	2,200,000,000	2,200,000,000
Grants in Cash		1,750,000,000	1,400,000,000	1,050,000,000	700,000,000	350,000,000
Grants for PND & Other Community Initiatives		500,000,000	500,000,000	500,000,000	750,000,000	1,000,000,000
Sub-Total for Grants & Community Projects		4,450,000,000	4,100,000,000	3,750,000,000	3,650,000,000	3,550,000,000
FUNDRAISING, GIFT, DONATION REVENUES						
Fundraising -(Including MCH Building)						
Gifts		15,000,000	16,500,000	18,150,000	19,057,500	20,010,375
Cash and In-Kind Donations		35,000,000	38,500,000	42,350,000	44,467,500	46,690,875
Total Fundraising, Gifts, Donations		50,000,000	55,000,000	60,500,000	63,525,000	66,701,250
TOTAL HOSPITAL REVENUE PROJECTED		8,063,166,327	8,074,482,959	8,121,931,255	8,359,092,178	8,645,339,095

4.3 MHUG Expenditure Projections for 2023-2028

EXPENDITURE PROJECTIONS		2023/2024	2024/2025	2025/2026	2026/2027	2027/2028
GENERAL HOSPITAL EXPENDITURE						
Salaries and Wages	10%	94,050,000	98,752,500	103,690,125	105,763,928	107,879,206
Fringe Benefits	10%	10,450,000	10,972,500	11,521,125	11,751,548	11,986,578
Consultancy Costs	10%	8,000,000	8,400,000	8,820,000	8,996,400	9,176,328
Equipment Cost	10%					
Travel Cost	10%	6,152,400	6,460,020	6,783,021	6,918,681	7,057,055
Supplies	10%	90,250,000	94,762,500	99,500,625	101,490,638	103,520,450
Other Direct Costs	10%	-	-	-	-	-
Contractual Cost	10%	-	-	-	-	-
Indirect Cost	10%	108,606,577	114,036,906	119,738,751	122,133,526	124,576,197
Sub-Total General Hospital Expenditure	10%	317,508,977	333,384,426	350,053,647	357,054,720	364,195,815
BETHANY PRIVATE WING EXPENDITURE						
Salaries and Wages	26%	252,450,000	265,072,500	278,326,125	283,892,648	289,570,500
Fringe Benefits	26%	28,050,000	29,452,500	30,925,125	31,543,628	32,174,500
Consultancy Costs	26%	392,000,000	411,600,000	432,180,000	440,823,600	449,640,072
Equipment Cost	26%	-	-	-	-	-
Travel Cost	26%	58,789,600	61,729,080	64,815,534	66,111,845	67,434,082
Supplies	26%	242,250,000	254,362,500	267,080,625	272,422,238	277,870,682
Other Direct Costs	26%	-	-	-	-	-
Contractual Cost	26%	-	-	-	-	-
Indirect Cost	26%	300,668,735	315,702,172	331,487,280	338,117,026	344,879,366
Sub-Total Bethany Private Wing Expenditure	26%	1,274,208,335	1,337,918,752	1,404,814,689	1,432,910,983	1,461,569,203
ANCILLARY SERVICES EXPENDITURE						
Salaries and Wages	61%	603,900,000	634,095,000	678,481,650	725,975,366	776,793,641
Fringe Benefits	61%	67,100,000	70,455,000	75,386,850	80,663,930	86,310,405
Consultancy Costs	61%	-	-	-	-	-
Equipment Cost	61%	-	-	-	-	-
Travel Cost	61%	3,418,000	3,588,900	3,840,123	4,108,932	4,396,557
Supplies	62%	584,250,000	613,462,500	656,404,875	702,353,216	751,517,941
Other Direct Costs	61%	-	-	-	-	-
Contractual Cost	61%	-	-	-	-	-
Indirect Cost	61%	697,368,549	732,236,976	783,493,565	838,338,114	897,021,782
Sub-Total Ancillary Services Expenditure	62%	1,956,036,549	2,053,838,376	2,197,607,063	2,351,439,557	2,516,040,326

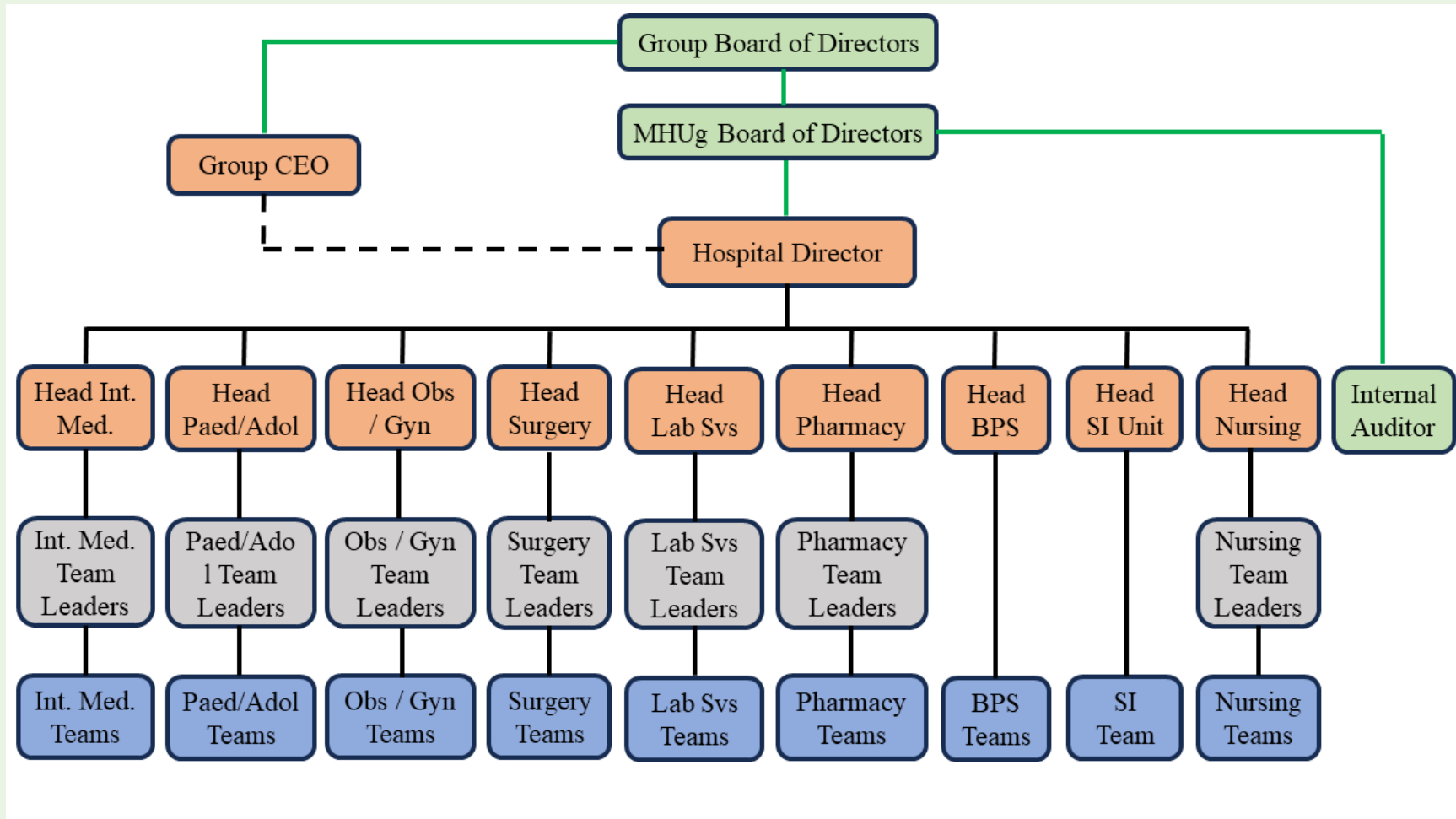
GRANTS & COMMUNITY PROJECTS EXPENDITURE						
Salaries and Wages		122,286,455		-	61,143,228	61,143,228
Fringe Benefits		-	-	-	-	-
Consultancy Costs		-	-	-	-	-
Equipment Cost		-	-	-	-	-
Travel Cost		-	-	-	-	-
Supplies		2,200,000,000	2,200,000,000	2,200,000,000	2,200,000,000	2,200,000,000
Other Direct Costs		1,750,000,000	1,400,000,000	1,050,000,000	700,000,000	350,000,000
Contractual Cost		368,762,949	500,000,000	450,000,000	675,000,000	900,000,000
Indirect Cost		-	-	-	-	-
Sub-Total Grants & Community Expenditure		4,441,049,404	4,100,000,000	3,700,000,000	3,636,143,228	3,511,143,228
FUNDRAISING, GIFTS & DONATIONS EXPENDITURE						
Salaries and Wages		-	-	-	-	-
Fringe Benefits		-	-	-	-	-
Consultancy Costs		-	-	-	-	-
Equipment Cost		23,000,000	24,150,000	25,357,500	26,625,375	27,956,644
Travel Cost		-	-	-	-	-
Supplies		-	-	-	-	-
Other Direct Costs		24,783,865	26,023,058	27,324,211	28,690,421	30,124,942
Contractual Cost (MCH Building cost)		-	-	-	-	-
Indirect Cost		-	-	-	-	-
Sub-Total Fundraising, Gifts & Donations		47,783,865	50,173,058	52,681,711	55,315,796	58,081,586
TOTAL HOSPITAL EXPENDITURE		8,036,587,129	7,875,314,612	7,705,157,110	7,832,864,284	7,911,030,157

4.4 MHUG Net Income Projections for 2023-2028

NET PROJECTIONS (REVENUE-EXPENDITURE)						
General Hospital Services		3,175,992	19,369,040	37,975,166	50,375,533	83,977,464
Bethany Private Wing		8,531,543	73,095,114	147,300,563	196,810,031	249,637,863
Ancillary Hospital Services		3,704,931	101,877,251	173,680,128	256,976,353	353,217,175
Grants & Community Projects		8,950,597	-	50,000,000	13,856,773	38,856,773
Fundraising, Gifts & Donations		2,216,136	4,826,942	7,818,289	8,209,204	8,619,664
OVERALL NET PROJECTION		26,579,198	199,168,348	416,774,145	526,227,894	734,308,938

5 Organization Structure

MHUG will adopt the organizational structure shown below.



6 M&E Framework

6.1 Log frame

Strategic Initiatives	Objectively Verifiable Indicators (OVIs)	Means of Verification (MOV)	Key Assumptions and Risks
Strategic Goal 1: Consolidate and position MHUG as a lead brand in expanding equitable access to quality healthcare.			
STRATEGIC OBJECTIVE 1.1: Standardize the business model underlying the healthcare services and products delivered under the MHUG.			
Initiative 1.1.1: Standardize <u>customer segmentation</u> for MHUG healthcare services.	Percentage of Units Aligning Business Models with Priority Patient Segments	Annual planning reports	MHUG units have a clear understanding of how to align their business models with priority patient segments.
	Patient Satisfaction Scores for Priority Segments	Survey reports, interview	MHUG has the ability to effectively meet the needs and expectations of its most important patient segments
Initiative 1.1.2: Standardize <u>value proposition</u> design for MHUG healthcare services.	Percentage of Units with defined service bundles for each patient segment	Documentation of service bundles	MHUG units will successfully of services tailored to patient needs.
	Percentage of Units introducing new service bundles annually	Documentation of service bundles	MHUG will positively respond to patient feedback
Initiative 1.1.3: Standardize <u>channels</u> design for MHUG healthcare services.	Patient engagement score	Surveys and feedback	Patients find value in interacting with MHUG at defined touchpoints and to engage in the various stages defined.
	Percentage of repeat patient visits	Clinic Master	All visits are accurately captured in the system
Initiative 1.1.4: Standardize <u>customer relationships</u> framework for MHUG services.	Customer relationship mix distribution	Customer records	Clear strategy for segmenting patients and selecting the appropriate type of relationship for each segment
Initiative 1.1.5: Standardize <u>revenue streams</u> definition for MHUG healthcare services.	Number of revenue streams per patient segment	Clinic Master	MHUG pricing strategy reflects the perceived value of services and the willingness of patients to pay.
	Revenue Stream Composition	Clinic Master	MHUG pricing strategy reflects the perceived value of services and the

Strategic Initiatives	Objectively Verifiable Indicators (OVIs)	Means of Verification (MOV)	Key Assumptions and Risks
			willingness of patients to pay
Initiative 1.1.6: Standardize <u>key resources</u> definition for MHUG healthcare services.	Personnel Competency Index	Performance appraisal form	The performance appraisal score accurately reflects staff competence.
	Number of patients served.	Clinic master, LIMS	All patients served are captured in the electronic systems.
	Partner Collaboration Effectiveness	MOUs	Partnerships will provide access to specialized expertise, resources and personnel, enhancing MHUG ability to deliver its value proposition
Initiative 1.1.7: Standardize <u>key activities</u> definition for MHUG healthcare services.	Key Activity Execution Efficiency	Performance Reports Work plans	The availability of resources
	Number of training courses conducted.	Attendance lists	Training and education programs are aligned with healthcare needs and professional growth.
	Research Output and Utilization	Research Reports and publications	MHUG commitment to research as a key activity that produces valuable insights to address health challenges
Initiative 1.1.8: Standardize <u>key partnerships</u> definition for MHUG healthcare services.	Number of Strategic Alliances Formed	Partnership agreements and contracts	Partnerships are based on mutual understanding, and both parties fulfill their commitments.
Initiative 1.1.9: Standardize the <u>cost structure</u> for MHUG healthcare services.	Cost reduction by Automation	Financial reports	Reduced cost and improved quality.
	Price Reduction Impact	Financial reports	Lowering prices while upholding quality will attract more patients
Initiative 1.1.10: Increase the viability and sustainability of MHUG business and projects.	Early Attainment and Retention of Break-Even (Year 01)	Financial reports	Accurate cost projections, pricing and strategies.
	Progression to Generate Surplus (Subsequent Years)	Financial reports	Managing cost will optimize revenue and increase customer demand
STRATEGIC OBJECTIVE 1.2: Develop and run a viable and sustainable General Hospital Service (Quadrant 1 of MHUG Four-Quadrant Organization Design).			
Initiative 1.2.1: Define the level of operation and coverage of MHUG General Hospital Service.	Clientele and Transaction Volume	Clinic master	There will be a growing demand for quality health care services in the target area and MHUG services will be adopted by the local population.

Strategic Initiatives	Objectively Verifiable Indicators (OVIs)	Means of Verification (MOV)	Key Assumptions and Risks
	Patient within 10-20 Km Radius	Clinic master	Unmet need in the community
<i>Initiative 1.2.2: Define the service scope for MHUG General Service.</i>	Number of services offered at MHUG	Clinic master	Accurate data is entered in the system
<i>Initiative 1.2.3: Define the flagship products of MHUG General Services.</i>	Maternal and Child Health (MCH) Infrastructure Expansion Progress	Progress reports	A clear project plan and timeline have been established for the MCH infrastructure expansion.
	Bed Occupancy Rate	HMIS 108 report	Patient expectations met / exceeded leading to positive word-of-mouth, repeat visits and increased patients.
<i>Initiative 1.2.4: Institutionalize the MHUG philosophy and character (as per 7 Elements in the Whitepaper).</i>	Philosophy and Character Integration Progress	Progress report and compliance audits	Whitepaper mainstreamed in the Hospital routine operations.
	Brand Legacy Protection	Surveys	Availability of resources
<i>Initiative 1.2.5: Adjust and develop MHUG infrastructure.</i>	Infrastructure development and Enhancement Completion Rate	Progress reports	Clear Infrastructure Expansion Plan and Timeline established.
	Service Delivery Efficiency Improvement	Waiting time reports	Improved efficiency improves patient satisfaction and health outcomes.
<i>Initiative 1.2.6: Equip nursing for effectively play its leadership role in the Hospital.</i>	Training Completion Rate	Attendance lists	It assumes that Nurses will actively participate in the trainings
<i>Initiative 1.2.7: Implement a robust transition management mechanism.</i>	Communication Effectiveness	Survey	Transparent communication reduces confusion and resistance among staff.
STRATEGIC OBJECTIVE 1.3: Run Bethany Private Wing as a viable and sustainable enterprise (Quadrant 2 of MHUG Four-Quadrant Organization Design).			
<i>Initiative 1.3.1: Enhance the services of Bethany Private Wing.</i>	Patient Feedback Scores	Surveys	Transparency of clients in surveys
	Patients' Waiting time	Clinic Master	Real time data entry
<i>Initiative 1.3.2: Enhance patient personal experience.</i>	Patient Satisfaction with Entrance Experience	Questionnaires	Availability of resources Clients' honesty in giving feedback
<i>Initiative 1.3.3: Enhance the hospital's reach through novel healthcare delivery models.</i>	Number of Referral Ins	Clinic Master	The nearby health facilities will accept to refer patients to MHUG.
	Number of Tele-Health Consultations	Clinic Master	Assumes that patients will adopt and engage in telehealth services.
	Number of clients utilizing courier services	Clinic master	Assumes that patients will adopt and engage in courier services

Strategic Initiatives	Objectively Verifiable Indicators (OVIs)	Means of Verification (MOV)	Key Assumptions and Risks
Initiative 1.3.4: Establish a Mildmay Hospital Uganda (MHUG) poly clinic.	Number of patients visiting a polyclinic	HMIS tools	Availability of resources
Initiative 1.3.5: Develop a healthcare pre-payment scheme.	Enrollment rate	Enrollment records	Clients value pre-payment scheme and are willing to participate.
	Participation Rate	Enrollment records	Enrolled clients find the scheme beneficial and affordable.
STRATEGIC OBJECTIVE 1.4: Design and operate viable and self-sustaining auxiliary hospital services and patient experience amenities (Quadrant 3 of MHUG Four-Quadrant Organization Design).			
Initiative 1.4.1: Optimize MHUG radiology and medical imaging services.	Capacity utilization of radiology unit i.e., X-ray and ultrasound	Clinic Master	Existing demand for X-ray and ultrasound services from patients.
	Mobile Imaging Unit Reach and Usage	Clinic Master	The unit will reach diverse patient segments with radiology services.
	Tele-Radiology usage	Service Records	Demand for tele-radiology services
Initiative 1.4.2: Optimize MHUG laboratory.	Number of tests offered.	LIMS	Increase in continuum of tests aligns with needs of patient and other users
	Research and public health collaboration	Agreements, contracts	Partners are mutually understanding and fulfill their commitments.
	Disease surveillance coverage	LIMS	The laboratory's holistic approach aligns with comprehensive healthcare services and supports public health.
	Accreditation Scope Expansion	Expanded accreditation scope documentation, including additional tests.	The accreditation bodies are supportive and responsive during the process of widening the scope.
	Continued ISO 15189:2012 Compliance	Internal audits, external assessments and reports.	The laboratory maintains all the processes as required.
	Improved service accessibility	TAT reports	Adopted technologies are efficient.
	Staff retention rate	Human resources records	Conducive environment to growth, advancement and job satisfaction.
	Training completion rate	Attendance lists	Staff members are motivated and able to complete required training.
Initiative 1.4.3: Enhance external laboratory services and collaborations.	Customer Satisfaction Index	Customer feedback surveys, ratings and patient comments	Laboratory's customer experience efforts have met or exceeded patient expectations.

Strategic Initiatives	Objectively Verifiable Indicators (OVIs)	Means of Verification (MOV)	Key Assumptions and Risks
	Service uptake	Clinic master, LIMS	Customer experience contributes to loyalty and positive word-of-mouth.
	Improved Turn-Around-Time	LIMS	Real time data entry into the system
	New test offerings	LIMS	Introducing new and diverse tests will cater to a wider range of patient needs and lead to service innovation.
	Revenue from tailored packages and subscriptions	Financial reports.	Subscription-based services and customized packages will attract more clients and increase revenue.
	Research Collaboration and Funding	Research project records, grant applications and awarded research grants.	Partnerships are based on mutual understanding, and both parties fulfill their commitments.
	Competitive pricing	Benchmarking reporting	Competitors' pricing strategies are consistent and can be benchmarked.
	Expansion of role in national testing	Agreements	The Lab has the ability to support the required percentage of tests without compromising its own operations.
	Number of private laboratories assisted	Record of private laboratories assisted	Private laboratories recognize the value of affordable consultation
Initiative 1.4.4: Optimize MHUG pharmacy services.	Lead Time for procurement	Procurement records and order tracking.	Personnel and technology resources support timely procurement.
	Competency development	Training records	Pharmacy staff actively participate.
	Inventory Optimization Efficiency	Clinic Master reports	Data analytics and predictive algorithms optimize inventory, lower waste and ensure supply availability.
	Compliance with Aligned Policies	Audits, procurement records, and compliance reports.	Alignment and communication of policies improves compliance among staff involved in procurement.
	Procurement Process Efficiency	Procurement records, time logs and reports from requisition to delivery.	Streamlined policies and procedures lower procurement cycle times and lead to efficient acquisitions.
	Communication channel effectiveness	Communication logs, records of information sharing, feedback surveys.	Enhanced communication channels result in quicker and more accurate information sharing.

Strategic Initiatives	Objectively Verifiable Indicators (OVIs)	Means of Verification (MOV)	Key Assumptions and Risks
	Percentage of orders meeting delivery time	Delivery notes	Adherence to terms in agreements.
	Adverse Drug Reaction Monitoring	ADR reports, incident logs, patient records.	Staff are trained in identifying and reporting adverse reactions.
	Regulatory Approval Attainment	Regulatory approval, permits and licenses.	Quality, safety and effectiveness standards leading to approval.
<i>Initiative 1.4.5: Design and provide amenities that patients and other people in the Hospital enjoy using.</i>	Customer satisfaction and dining experience	Customer satisfaction surveys reports	Honesty and transparency of MHUG's clients in giving feedback
STRATEGIC OBJECTIVE 1.5: Run viable and sustainable grants and community projects (Quadrant 4 of MHUG Four-Quadrant Organization Design).			
<i>Initiative 1.5.1: Attain and sustain HIV epidemic control through evidence-based service delivery by the HIV Prevention and Treatment Centre of Excellence at MHUG.</i>	Reduction in Clinic Visits	Clinic Master	Differentiated ART refill model will reduce frequency of clinic visits and improve patient convenience.
	Percentage transitioned to Differentiated ART Refill Model	Clinic Master	Community-based models for providing personalized services will be appealing to the patients.
	Percentage of Clinic Attendance Transitioned to Telehealth and Digital Health	Clinic Master	Patients are adequately informed and technologically capable of engaging in telehealth services.
	Number of education programs conducted.	Attendance lists, health talk timetable	Health facilities value continuous education for professional growth.
<i>Initiative 1.5.2: Hold community health camps and outreaches.</i>	Outreach attendance	Attendance records and activity reports.	Comprehensive tracking of registration
	Services utilized	Service utilization data collected during events.	The services provided are relevant and effective to the community
<i>Initiative 1.5.3: Engage in corporate social responsibility (CSR) initiatives.</i>	Number of CSR initiatives done.	Records and reports.	Availability of resources.
	Number of beneficiaries	PND Report	MHUG and MUG NGO collaborate on initiatives that address community needs.
<i>Initiative 1.5.4: Collaborate with local and international organizations.</i>	Number of Partnerships Established	Partnership agreements and MOUs	Local and global partners that share MHUG vision for community health.
	Community Engagement and	Conducting surveys,	Initiatives organized will be relevant

Strategic Initiatives	Objectively Verifiable Indicators (OVIs)	Means of Verification (MOV)	Key Assumptions and Risks
	Participation	attendance records	and attractive to the communities.
STRATEGIC OBJECTIVE 1.6: Institutionalize the MHUG comprehensive customer care plan across the Hospital.			
<i>Initiative 1.6.1: Develop a Comprehensive Customer Care Plan.</i>	Average Response Time to Patient Inquiries / Complaints	Maintain records of communication logs	Hospital staff diligently address patient inquiries and complaints.
	Staff trained and adhering to Customer Care Protocols.	Attendance list	Employees are receptive to training and apply customer care protocols.
<i>Initiative 1.6.2: Enhance staff training and skills development.</i>	Percentage of staff who complete a customer care course	Training attendance log	Trained sessions are accessible and mandatory to all staff
<i>Initiative 1.6.3: Strengthen existing communication modalities for enhanced customer care.</i>	Response time to patient inquiries	Communication tracking system	Staff will adhere to response time targets and communication tracking systems record response times.
<i>Initiative 1.6.4: Institutionalize a culture of patient-centricity.</i>	Staff training and workshop participation	Attendance list	Staff will actively engage in the training programs and workshops
<i>Initiative 1.6.5: Implement a Customer Loyalty Program.</i>	Net promoter score	Survey	Customers will be transparent in giving feedback
<i>Initiative 1.6.6: Roll out a Customer Relationship Management (CRM) System.</i>	CRM adoption rate	Monitor user logins, data input, and usage statistics within the CRM system.	Staff members will use CRM to enhance patient interactions with the MHUG brand.
STRATEGIC OBJECTIVE 1.7: Institutionalize the MHUG quality philosophy across the Hospital.			
<i>Initiative 1.7.1: Integrate the MHUG quality philosophy in the Hospital operational framework.</i>	Timeliness of care	Clinic Master	Time variations per client analyzed.
	Continuous Improvement Impact	CQI file	Continuous improvement projects are filled and documented
<i>Initiative 1.7.2: Conduct regular quality assessment of MHUG operations.</i>	Number of QAs conducted.	DQA file	Regular DQAs done using the Donadedian model.
	Number of areas identified for improvement based on QAs	DQA file	Assessment of organizational structure reveals areas to improve.
Strategic Goal 2: Strengthen the capacity of Mildmay Hospital Uganda (MHUG) to host research and training.			
STRATEGIC OBJECTIVE 2.1: Enhance the capacity of MHUG pharmacy and diagnostic services to support research and training.			
<i>Initiative 2.1.1: Enhance capacity of MHUG radiology and medical imaging unit.</i>	Staff Growth and Development Rate	Human resource record	Research, advanced training and innovation attracts professionals.
	Number of research collaborations initiated.	Research collaborations records.	Enhanced capacity attracts research partnerships and collaborations.

Strategic Initiatives	Objectively Verifiable Indicators (OVIs)	Means of Verification (MOV)	Key Assumptions and Risks
	Turnaround Time Reduction	Clinic master	Protocols and guidelines effectively implemented for various processes.
	Tele-Radiology Utilization	Records of tele radiology utilization	The tele radiology channels are reliable and accessible
Initiative 2.1.2: Enhance capacity of MHUG laboratory to support research and training.	Number of staff trained in operational research skills.	Training records or attendances	Training programs will enhance staff capabilities and skills.
	Number of research initiatives conducted	Collaboration agreements.	Partnerships are based on mutual understanding, and both parties fulfill their commitments.
Initiative 2.1.3: Enhance capacity of MHUG pharmacy to support research and training.	Development of research pharmacy standards	Documented research pharmacy standards and protocols	Resources are allocated for the development of comprehensive research pharmacy standards.
	Pharmacy Research Site Compliance	Audit reports	Pharmacy research sites know the research requirements and guidelines.
	Regulatory Compliance	Current and valid licenses, certifications	Staff are trained and educated about relevant education, their implications and adherence.
	Staff training and skill building	Training records	Staff engage in the training programs and content enhances their skills.
STRATEGIC OBJECTIVE 2.2: Develop and manage effective training and research partnerships and collaborations.			
Initiative 2.2.1: Optimize MHUG research collaboration with MRCU.	Defined Roles and Responsibilities	Documented agreements, MOUs, or partnership agreements	Parties are willing to collaborate and contribute to partnerships.
	Enhanced Collaboration and Partnership	Collaborative initiatives, joint publications, shared resources	Transparent communication between Partners
	Ethical and Regulatory Adherence	Regulatory compliance records, audit reports	MHUG and MRCU have the necessary resources to establish and enforce ethical compliance
Initiative 2.2.2: Collaboration on resource mobilization and management.	Resource Mobilization Collaboration	Fundraising and joint grant mobilization records	Collaborating entities share a mutual interest.
	Number of successful grant applications	Grant writing records.	Collaboration enhances the quality and competitiveness of applications.

Strategic Initiatives	Objectively Verifiable Indicators (OVIs)	Means of Verification (MOV)	Key Assumptions and Risks
<i>Initiative 2.2.3: Collaboration on experiential learning and training.</i>	Number of experiential learning opportunities provided	Records of participants enrolled in experiential.	Qualified and knowledgeable instructors available to guide the participants in learning activities
<i>Initiative 2.2.4: Establishing external collaborations on research and training.</i>	Number of External Collaborations Established	Collaboration agreements	MHUG establishes collaboration with external research organizations.
	Knowledge exchange and expertise building	Workshops, seminar and conference records	Collaborations involve activities that promote active knowledge exchange
<i>Initiative 2.2.5: Establishing an inter-entirety Centre for Ideation and Innovation.</i>	Formation and Evolution of Innovation Committee	Meeting minutes	MHUG collaborates with MRCU and MIHS to establish an Innovation Committee by Yr03.
	Number of Innovation Initiatives Implemented	Records of innovation projects	Availability of resources
STRATEGIC OBJECTIVE 2.3: Building the human resource capacity of MHUG to support experiential learning and research.			
<i>Initiative 2.3.1 Research skills development for hospital staff.</i>	Number of staff trained in research skills	Training records	The staff will actively participate in these training programs.
	Course completion rate	Training records	The courses are well designed and are accessible.
	Number of CMEs conducted	CME timetable	Various CME formats will cater to different learning preferences.
<i>Initiative 2.3.2: Institutionalize framework for supporting experiential learning.</i>	Experiential learning program completion rate	Program completion records	Participants actively engage in and complete the experiential learning.
	Participation in research fora and conferences	Attendance records	Staff are motivated to participate, share knowledge and collaborate.
	Participation in CPD activities	Attendance records.	Healthcare workers are motivated to engage in CPD activities.
Strategic Goal 3: Strengthen the institutional capacity of MHUG to sustainably deliver its mandate.			
STRATEGIC OBJECTIVE 3.1: Build MHUG corporate governance for effective oversight.			
<i>Initiative 3.1.1: Establish the MHUG corporate governance structures.</i>	Appointment and orientation of MHUG Board of Directors.	Governance records.	Competent individuals will be willing to join the MHUG Board.
	MHUG Board Charter developed and implemented.	Meeting minutes	MUG Board will develop a Charter aligned MHUG's incorporation goals.
	Integration of MHUG into HQ governance structures	Meeting minutes	MHUG will actively engage in HQ internal governance structures.

Strategic Initiatives	Objectively Verifiable Indicators (OVIs)	Means of Verification (MOV)	Key Assumptions and Risks
Initiative 3.1.2: Develop the MHUG policy framework aligned with the MUg Group context.	Upholding MUg ethos and values	Review of strategic plans, projects,	MHUG's will align its ethos and values with those of MUg and integrate them in its strategic choices.
	Compliance with Transfer Pricing Policy (TPP)	Intercompany transaction records.	MHUG will adhere TPP guidelines and rules.
	Policy development and alignment with Group context.	Policy development records.	MHUG policy review and policy development will align with Group context.
Initiative 3.1.3: Establish MHUG audit and risk management frameworks.	Establishment and Functioning of Internal Audit Unit	Internal Audit Unit	Commitment to establish an Internal Audit Unit.
	Implementation of Risk Management Framework	Risk Management Framework records	MHUG mainstreams robust risk management approach in its units.
STRATEGIC OBJECTIVE 3.2: Ensure adequate MHUG resourcing through a dual-track mechanism built on 70% patient-care revenue and 30% non-patient-care revenue.			
Initiative 3.2.1: Run the five branches of MHUG business viably to generate 70% of resources required to achieve the Hospital's 2023-2028 goals.	Participation and Engagement in Group Central Business Forum (GCBF)	GCBF minutes and Action Papers.	MHUG commitment to active participation in GCBF throughout 2023-2028.
	Viability of Business Branches	Financial performance records.	GCBF discussions will yield effective strategies for viability and sustainability of MHUG businesses.
	Participation in Management Development Program	Management Development Program records per MHUG unit	Availability of resources for the Management Development Program.
	Brand Awareness and Recognition	Marketing and Business Development records	Business Development Department at MUg HQ gives TA to implement the 7-Prong Marketing Model.
Initiative 3.2.2: Generate 25% of the resourcing required to achieve the Hospital's 2023-2028 goals through running an effective and efficient Programme Acquisition and Management Steering Committee (PAMSCO) mechanism.	Evaluate coordination and collaboration between MHUG PAMSCO and HQ PAMSCO.	PAMSCO records	Diverse cross-section of MHUG staff participating in MHUG PAMSCO.
	Active staff participation	Meeting minutes, attendance lists	Diverse cross-section of MHUG staff participating in MHUG PAMSCO.
	Grant acquisition and utilization	Grant acquisition records	Effective constitution and equipping of MHUG PAMSCO.
	Number of new resource	Records of new resource	Resource mobilization opportunities

Strategic Initiatives	Objectively Verifiable Indicators (OVIs)	Means of Verification (MOV)	Key Assumptions and Risks
<i>Initiative 3.2.3: Develop and grow other forms of resource mobilization generating 5% of the resources required to achieve the MHUG 2023-2028 goals.</i>	mobilization initiatives	mobilization	will emerge.
	Percentage of targeted resources mobilized	Financial reports	Resource mobilization opportunities will emerge.
STRATEGIC OBJECTIVE 3.3: Attract productive inspired human resources with the right skills, attitude and commitment, place them in a progressive MHUG organizational culture and support them excel.			
<i>Initiative 3.3.1: Cultivate a progressive MHUG culture that helps people thrive.</i>	Staff Performance Improvement Rate	Performance review form	Staff have the resources to improve their performance.
	Employee Retention Rate	Employee record	Staff equipped to handle challenges and feel recognized and valued.
<i>Initiative 3.3.2: Attract the right staff to MHUG and place them in the right positions to optimize benefit for the Hospital.</i>	Number of staff newly recruited to fill available vacancies	Human resource records	Availability of resources to recruit competent personnel.
<i>Initiative 3.3.3: Build the leadership spirit in every MHUG employee in line with the MUg Group leadership philosophy.</i>	Leadership Program Participation Rate	Attendance list	Program content is relevant and valuable to the health workers and that participation reflects their interest in leadership development
<i>Initiative 3.3.4: Run a bold and candid performance management system.</i>	Digital Performance Appraisal Adoption	Performance portal	Digital tools are user-friendly
STRATEGIC OBJECTIVE 3.4: Provide effective and efficient finance, administration and support services to MHUG.			
<i>Initiative 3.4.1: Provide financial management mechanism.</i>	Financial Policy and SOP Implementation Rate	Audit reports SOPs	Policies and SOPs will improve financial management practices
<i>Initiative 3.4.2: Run effective and efficient supply chain management.</i>	Develop and implement Supply Chain Policy Manual	Supply Chain Policy Manual	Availability of resources
<i>Initiative 3.4.3: Effective and efficient support services to MHUG.</i>	Improved facility maintenance and upkeep	Maintenance log and user feedback	The expertise and experience of Mug HQ in managing properties
STRATEGIC OBJECTIVE 3.5: Leverage centrally shared services and resources.			
<i>Initiative 3.5.1: Enhance MHUG projects and business operations through ICT optimization.</i>	Number of digital services launched and introduced to stakeholders.	Records of new digital tools and services launched by MHUG	Stakeholders will support MHUG digital operations

Strategic Initiatives	Objectively Verifiable Indicators (OVIs)	Means of Verification (MOV)	Key Assumptions and Risks
Initiative 3.5.2: <i>Impact Monitoring support to MHUG [as a shared service].</i>	Number of impact evaluations conducted for MHUG projects and businesses	Impact evaluation reports	MHUG will actively engage in impact evaluation processes as guided by MUg
Initiative 3.5.3: <i>Communications and branding support to MHUG [as a shared service].</i>	Number of patient educational materials and resources created.	Educational materials	Availability of resources
	Percentage of updates provided by hospital leaders to inform staff about the organization.	Records of regular updates, memos, and announcements.	There are reliable and accessible communication channels.
	Number of engagement and reach on social media platforms.	Social media analytics and website traffic data	People will access MHUG social media platforms and website
STRATEGIC OBJECTIVE 3.6: Undertake joint Group-level strategic investments.			
Initiative 3.6.1: <i>Partnering in building the MUg Estate Maintenance Fund.</i>	Monetary contribution to MUg Estate Maintenance Fund	Financial records	Availability of funds
Initiative 3.6.2: <i>Jointly invest in the solar energy generation project.</i>	Progress of the solar energy project	MHUG work plan and financial statement	Availability of funds
	Reduction in electricity bill after the solar energy system upgrade.	Financial statement.	Solar energy system is completed in time
Initiative 3.6.3: <i>Jointly invest in the water harvesting project.</i>	Percentage of water harvest project completed.	MHUG work plan and financial statement	Availability of funds.
	Reduction in water bill resulting from water harvest project.	Financial statement.	Enough water volume to reduce monthly water expense.
Initiative 3.6.4: <i>Jointly invest in the biogas production project.</i>	Percentage of biogas production projects completed.	MHUG work plan and financial statement	Availability of funds
	Reduction in wood and charcoal cost due to biogas production.	Financial statement.	Enough biogas to reduce monthly expenses on wood and charcoal.
Initiative 3.6.5: <i>Make MHUG programmes and businesses responsive to Climate Change.</i>	Reduction in operational cost due to biogas, solar energy and water harvesting projects.	Financial records.	Environmentally friendly projects will lower both financial and environmental cost of operations.

6.2 Operational Plan

Strategic Initiatives	OVI	Baseline	Target	Annual Targets				
				Yr01	Yr02	Yr03	Yr04	Yr05
Strategic Goal 1: Consolidate and position MHUG as a lead brand in expanding equitable access to quality healthcare.								
STRATEGIC OBJECTIVE 1.1: Standardize the business model underlying the healthcare services and products delivered under the MHUG.								
<i>Initiative 1.1.1: Standardize <u>customer segmentation</u> for MHUG healthcare services.</i>	<ul style="list-style-type: none"> Percentage of Units Aligning Business Models with Priority Patient Segments Patient Satisfaction Scores for Priority Segments 	TBD	TBD	TBD	-	-	-	-
<i>Initiative 1.1.2: Standardize <u>value proposition design</u> for MHUG healthcare services.</i>	<ul style="list-style-type: none"> Percentage of Units with Defined Service Bundles for Each Patient Segment Percentage of Units Introducing New Service Bundle Components Annually 	TBD	TBD	TBD	-	-	-	-
<i>Initiative 1.1.3: Standardize <u>channels design</u> for MHUG healthcare services.</i>	<ul style="list-style-type: none"> Patient Engagement Score Percentage of Repeat Patient Visits 	TBD	TBD	TBD	-	-	-	-
<i>Initiative 1.1.4: Standardize <u>customer relationships framework</u> for MHUG services.</i>	<ul style="list-style-type: none"> Customer Relationship Mix Distribution 	TBD	TBD	TBD	-	-	-	-
<i>Initiative 1.1.5: Standardize <u>revenue streams definition</u> for MHUG healthcare services.</i>	<ul style="list-style-type: none"> Number of Revenue Streams Per Patient Segment Revenue Stream Composition 	TBD	TBD	TBD	-	-	-	-
<i>Initiative 1.1.6: Standardize <u>key resources definition</u> for MHUG healthcare services.</i>	<ul style="list-style-type: none"> Personnel Competency Index Number of patients served. Partner Collaboration Effectiveness 	TBD	TBD	TBD	-	-	-	-
<i>Initiative 1.1.7: Standardize <u>key activities definition</u> for MHUG healthcare services.</i>	<ul style="list-style-type: none"> Key Activity Execution Efficiency Number of trainings conducted. Research Output and Utilization 	TBD	TBD	TBD	-	-	-	-
<i>Initiative 1.1.8: Standardize <u>key partnerships definition</u> for MHUG healthcare services.</i>	<ul style="list-style-type: none"> Number of Strategic Alliances Formed 	TBD	TBD	TBD	-	-	-	-
<i>Initiative 1.1.9: Standardize the <u>cost structure</u> for MHUG healthcare services.</i>	<ul style="list-style-type: none"> Cost Reduction through Automation Price Reduction Impact 	TBD	TBD	TBD	-	-	-	-

Strategic Initiatives	OVI	Baseline	Target	Annual Targets				
				Yr01	Yr02	Yr03	Yr04	Yr05
Initiative 1.1.10: Increase the viability and sustainability of MHUG business and projects.	<ul style="list-style-type: none"> • Early attainment and retention of break-even performance (Year 01) • Progression to generating surplus 	TBD	TBD	TBD	-	-	-	-
STRATEGIC OBJECTIVE 1.2: Develop and run a viable and sustainable General Hospital Service (Quadrant 1 of MHUG Four-Quadrant Organization Design).								
Initiative 1.2.1: Define the level of operation and coverage of MHUG General Hospital Service.	<ul style="list-style-type: none"> • Clientele and Transaction Volume • Patient Adoption Rate within 10-20 Km Radius 	0	2000	-	-	-	-	-
Initiative 1.2.2: Define the service scope for MHUG General Service.	<ul style="list-style-type: none"> • Number of services offered at MHUG 	TBD	TBD	TBD	-	-	-	-
Initiative 1.2.3: Define the flagship products of MHUG General Services.	<ul style="list-style-type: none"> • Maternal and Child Health (MCH), radiology • Bed Occupancy Rate 	TBD	TBD	TBD	-	-	-	-
Initiative 1.2.4: Institutionalize the MHUG philosophy and character.	<ul style="list-style-type: none"> • Philosophy and Character Integration Progress • Brand Legacy Protection 	TBD	TBD	TBD	-	-	-	-
Initiative 1.2.5: Adjust and develop MHUG infrastructure.	<ul style="list-style-type: none"> • Infrastructure development and enhancement completion rate • Service delivery efficiency improvement 	TBD	TBD	TBD	-	-	-	-
Initiative 1.2.6: Equip nursing for effectively play its leadership role in the Hospital.	<ul style="list-style-type: none"> • Training completion rate 	TBD	TBD	TBD	-	-	-	-
Initiative 1.2.7: Implement a robust transition management mechanism.	<ul style="list-style-type: none"> • Communication effectiveness 	TBD	TBD	TBD	-	-	-	-
STRATEGIC OBJECTIVE 1.3: Run Bethany Private Wing as a viable and sustainable enterprise (Quadrant 2 of MHUG Four-Quadrant Organization Design).								
Initiative 1.3.1: Enhance the services of Bethany Private Wing.	<ul style="list-style-type: none"> • Patient Feedback Scores • Patients' Waiting time 	TBD	TBD	TBD	-	-	-	-
Initiative 1.3.2: Enhance patient personal experience.	<ul style="list-style-type: none"> • Patient Satisfaction with Entrance Experience 	TBD	TBD	TBD	-	-	-	-

Strategic Initiatives	OVI	Baseline	Target	Annual Targets				
				Yr01	Yr02	Yr03	Yr04	Yr05
Initiative 1.3.3: Enhance the hospital's reach through novel healthcare delivery models.	<ul style="list-style-type: none"> Number of Referral INs Number of Tele-Health Consultations Number of clients utilizing courier services 	TBD	TBD	TBD	-	-	-	-
Initiative 1.3.4: Establish a Mildmay Hospital Uganda (MHUG) poly clinic.	<ul style="list-style-type: none"> Number of patients visiting a polyclinic 	TBD	TBD	TBD	-	-	-	-
Initiative 1.3.5: Develop a healthcare pre-payment scheme.	<ul style="list-style-type: none"> Enrollment rate Participation Rate 	TBD	TBD	TBD	-	-	-	-
STRATEGIC OBJECTIVE 1.4: Design and operate viable and self-sustaining auxiliary hospital services and patient experience amenities (Quadrant 3 of MHUG Four-Quadrant Organization Design).								
Initiative 1.4.1: Optimize MHUG radiology and medical imaging services.	<ul style="list-style-type: none"> Capacity utilization of radiology unit i.e., X-ray and ultrasound Mobile Imaging Unit Reach and Usage Tele-Radiology usage 	TBD	TBD	TBD	-	-	-	-
Initiative 1.4.2: Optimize MHUG laboratory.	<ul style="list-style-type: none"> Number of tests offered. Research and Public Health Collaboration Disease Surveillance Coverage Accreditation Scope Expansion Continued ISO 15189:2012 Compliance Improved service accessibility Staff Retention Rate Training Completion Rate 	TBD	TBD	TBD	-	-	-	-
Initiative 1.4.3: Enhance external laboratory services and collaborations.	<ul style="list-style-type: none"> Customer Satisfaction Index Service Uptake Turn-Around-Time Improvement New Test Offerings Revenue from Tailored Packages and Subscriptions Research Collaboration and Funding Competitive Pricing Expansion of Role in National Testing Number of private laboratories assisted 	TBD	TBD	TBD	-	-	-	-

Strategic Initiatives	OVI	Baseline	Target	Annual Targets				
				Yr01	Yr02	Yr03	Yr04	Yr05
Initiative 1.4.4: Optimize MHUG pharmacy services.	<ul style="list-style-type: none"> • Lead Time for Procurement • Competency development • Inventory Optimization Efficiency • Compliance with Aligned Policies • Procurement Process Efficiency • Communication channel effectiveness • Percentage of Orders Meeting Delivery Time • Adverse Drug Reaction Monitoring • Regulatory Approval Attainment 	TBD	TBD	TBD	-	-	-	-
Initiative 1.4.5: Design and provide amenities that patients and other people in the Hospital enjoy using.	<ul style="list-style-type: none"> • Customer satisfaction and dining experience 	TBD	TBD	TBD	-	-	-	-
STRATEGIC OBJECTIVE 1.5: Run viable and sustainable grants and community projects (Quadrant 4 of MHUG Four-Quadrant Organization Design).								
Initiative 1.5.1: Attain and sustain HIV epidemic control through evidence-based service delivery by the HIV Prevention and Treatment Centre of Excellence at MHUG.	<ul style="list-style-type: none"> • Reduction in Clinic Visits • Percentage Transitioned to Differentiated ART Refill Model • Percentage of Clinic Attendance Transitioned to Telehealth and Digital Health • Number of education programs conducted 	TBD	TBD	TBD	-	-	-	-
Initiative 1.5.2: Hold community health camps and outreaches.	<ul style="list-style-type: none"> • Outreach Attendance • Services Utilized 	TBD	TBD	TBD	-	-	-	-
Initiative 1.5.3: Engage in corporate social responsibility (CSR) initiatives.	<ul style="list-style-type: none"> • Number of CSR Initiatives Conducted • Number of beneficiaries 	TBD	TBD	TBD	-	-	-	-
Initiative 1.5.4: Collaborate with local and international organizations.	<ul style="list-style-type: none"> • Number of Partnerships Established • Community Engagement and Participation 	TBD	TBD	TBD	-	-	-	-
STRATEGIC OBJECTIVE 1.6: Institutionalize the MHUG comprehensive customer care plan across the Hospital.								
Initiative 1.6.1: Develop a Comprehensive Customer Care Plan.	<ul style="list-style-type: none"> • Average Response Time to Patient Inquiries/Complaints 	TBD	TBD	TBD	-	-	-	-

Strategic Initiatives	OVI	Baseline	Target	Annual Targets					
				Yr01	Yr02	Yr03	Yr04	Yr05	
	<ul style="list-style-type: none"> Employee Training and Adherence to Customer Care Protocols 								
Initiative 1.6.2: Enhance staff training and skills development.	<ul style="list-style-type: none"> Percentage of staff who have completed a customer care training program 	TBD	TBD	TBD	-	-	-	-	
Initiative 1.6.3: Strengthen existing communication modalities for enhanced customer care.	<ul style="list-style-type: none"> Response Time to Patient Inquiries 	TBD	TBD	TBD	-	-	-	-	
Initiative 1.6.4: Institutionalize a culture of patient-centricity.	<ul style="list-style-type: none"> Staff Training and Workshop Participation 	TBD	TBD	TBD	-	-	-	-	
Initiative 1.6.5: Implement a Customer Loyalty Program.	<ul style="list-style-type: none"> Net promoter score 	TBD	TBD	TBD	-	-	-	-	
Initiative 1.6.6: Roll out a Customer Relationship Management (CRM) System.	<ul style="list-style-type: none"> CRM Adoption Rate 	TBD	TBD	TBD	-	-	-	-	
STRATEGIC OBJECTIVE 1.7: Institutionalize the MHUG quality philosophy across the Hospital.									
Initiative 1.7.1: Integrate the MHUG quality philosophy in the Hospital operational framework.	<ul style="list-style-type: none"> Timeliness of Care Continuous Improvement Impact 	TBD	TBD	TBD	-	-	-	-	
Initiative 1.7.2: Conduct regular quality assessment of MHUG operations.	<ul style="list-style-type: none"> Number of QAs conducted. Number of areas identified for improvement based on quality assessment 	TBD	TBD	TBD	-	-	-	-	
Strategic Goal 2: Strengthen the capacity of Mildmay Hospital Uganda (MHUG) to host research and training.									
STRATEGIC OBJECTIVE 2.1: Enhance the capacity of MHUG pharmacy and diagnostic services to support research and training.									
Initiative 2.1.1: Enhance capacity of MHUG radiology and medical imaging unit.	<ul style="list-style-type: none"> Staff Growth and Development Rate Number of research collaborations initiated. Turnaround Time Reduction Tele-Radiology Utilization 	TBD	TBD	TBD	-	-	-	-	
Initiative 2.1.2: Enhance capacity of MHUG laboratory to support research and training.	<ul style="list-style-type: none"> Number of staff trained in operational research skills. Number of research initiatives conducted 	TBD	TBD	TBD	-	-	-	-	

Strategic Initiatives	OVI	Baseline	Target	Annual Targets				
				Yr01	Yr02	Yr03	Yr04	Yr05
Initiative 2.1.3: Enhance capacity of MHUG pharmacy to support research and training.	<ul style="list-style-type: none"> Development of research pharmacy standards Pharmacy Research Site Compliance Regulatory Compliance Staff Training and Skill Building 	TBD	TBD	TBD	-	-	-	-
STRATEGIC OBJECTIVE 2.2: Develop and manage effective training and research partnerships and collaborations.								
Initiative 2.2.1: Optimize MHUG research collaboration with MRCU.	<ul style="list-style-type: none"> Defined Roles and Responsibilities Enhanced Collaboration and Partnership Ethical and Regulatory Adherence 	TBD	TBD	TBD	-	-	-	-
Initiative 2.2.2: Collaboration on resource mobilization and management.	<ul style="list-style-type: none"> Resource Mobilization Collaboration Number of successful grant applications 	TBD	TBD	TBD	-	-	-	-
Initiative 2.2.3: Collaboration on experiential learning and training.	<ul style="list-style-type: none"> Number of Experiential Learning Opportunities Provided 	TBD	TBD	TBD	-	-	-	-
Initiative 2.2.4: Establishing external collaborations on research and training.	<ul style="list-style-type: none"> Number of External Collaborations Established Knowledge exchange and expertise building 	TBD	TBD	TBD	-	-	-	-
Initiative 2.2.5: Establishing an inter-entity Centre for Ideation and Innovation.	<ul style="list-style-type: none"> Formation and Evolution of Innovation Working Group and Committee Number of Innovation Initiatives Implemented 	TBD	TBD	TBD	-	-	-	-
STRATEGIC OBJECTIVE 2.3: Building the human resource capacity of MHUG to support experiential learning and research.								
Initiative 2.3.1 Research skills development for hospital staff.	<ul style="list-style-type: none"> Number of Staff Trained in Research Skills Course completion rate Number of CME conducted 	TBD	TBD	TBD	-	-	-	-
Initiative 2.3.2: Institutionalize framework for supporting experiential learning.	<ul style="list-style-type: none"> Experiential Learning Completion Rate Participation in Research Fora / Conferences Participation in CPD Activities 	TBD	TBD	TBD	-	-	-	-
Strategic Goal 3: Strengthen the institutional capacity of MHUG to sustainably deliver its mandate.								
STRATEGIC OBJECTIVE 3.1: Build MHUG corporate governance for effective oversight.								
Initiative 3.1.1: Establish the MHUG corporate governance structures.	<ul style="list-style-type: none"> Successful Appointment and Orientation of MHUG Board of Directors Establishment and Implementation of MHUG Board Charter 	TBD	TBD	TBD	-	-	-	-

Strategic Initiatives	OVI	Baseline	Target	Annual Targets					
				Yr01	Yr02	Yr03	Yr04	Yr05	
	<ul style="list-style-type: none"> Integration of MHUG into HQ Governance Structures 								
<i>Initiative 3.1.2: Develop the MHUG policy framework aligned with the MUG Group context.</i>	<ul style="list-style-type: none"> Upholding MUG Ethos and Values Compliance with Transfer Pricing Policy (TPP) Policy Alignment and Development 	TBD	TBD	TBD	-	-	-	-	
<i>Initiative 3.1.3: Establish MHUG audit and risk management frameworks.</i>	<ul style="list-style-type: none"> Establish an Internal Audit Unit Implementation of Risk Management Framework 	TBD	TBD	TBD	-	-	-	-	
STRATEGIC OBJECTIVE 3.2: Ensure adequate MHUG resourcing through a dual-track mechanism built on 70% patient-care revenue and 30% non-patient-care revenue.									
<i>Initiative 3.2.1: Run the five branches of MHUG business viably to generate 70% of resources required to achieve the Hospital's 2023-2028 goals.</i>	<ul style="list-style-type: none"> Participation and Engagement in Group Central Business Forum (GCBF) Viability of Business Branches Participation in Management Devt Program Brand Awareness and Recognition 	TBD	TBD	TBD	-	-	-	-	
<i>Initiative 3.2.2: Generate 25% of the resourcing required to achieve the Hospital's 2023-2028 goals through running an effective and efficient Programme Acquisition and Management Steering Committee (PAMSCO) mechanism.</i>	<ul style="list-style-type: none"> Active Staff Participation Effective PAMSCO Coordination Grant Acquisition and Utilization 	TBD	TBD	TBD	-	-	-	-	
<i>Initiative 3.2.3: Develop and grow other forms of resource mobilization generating 5% of the resources required to achieve the MHUG 2023-2028 goals.</i>	<ul style="list-style-type: none"> Number of New Resource Mobilization Initiatives Percentage of Resources Mobilized 	TBD	TBD	TBD	-	-	-	-	
STRATEGIC OBJECTIVE 3.3: Attract productive inspired human resources with the right skills, attitude and commitment, place them in a progressive MHUG organizational culture and support them excel.									

Strategic Initiatives	OVI	Baseline	Target	Annual Targets				
				Yr01	Yr02	Yr03	Yr04	Yr05
Initiative 3.3.1: Cultivate a progressive MHUG culture that helps people thrive.	<ul style="list-style-type: none"> Staff Performance Improvement Rate Employee Retention Rate 	TBD	TBD	TBD	-	-	-	-
Initiative 3.3.2: Attract the right staff to MHUG and place them in the right positions to optimize benefit for the Hospital.	<ul style="list-style-type: none"> Number of staff newly recruited to fill available vacancies 	TBD	TBD	TBD	-	-	-	-
Initiative 3.3.3: Build the leadership spirit in every MHUG employee in line with the MUG Group leadership philosophy.	<ul style="list-style-type: none"> Leadership Program Participation Rate 	TBD	TBD	TBD	-	-	-	-
Initiative 3.3.4: Run a bold and candid performance management system.	<ul style="list-style-type: none"> Digital Performance Appraisal Adoption 	TBD	TBD	TBD	-	-	-	-
STRATEGIC OBJECTIVE 3.4: Provide effective and efficient finance, administration and support services to MHUG.								
Initiative 3.4.1: Provide financial management mechanism.	<ul style="list-style-type: none"> Financial Policy and SOP Implementation Rate 	TBD	TBD	TBD	-	-	-	-
Initiative 3.4.2: Run effective and efficient supply chain management.	<ul style="list-style-type: none"> Development and Implementation of Supply Chain Policy Manual. 	TBD	TBD	TBD	-	-	-	-
Initiative 3.4.3: Effective and efficient support services to MHUG.	<ul style="list-style-type: none"> Improved facility maintenance and upkeep. 	TBD	TBD	TBD	-	-	-	-
STRATEGIC OBJECTIVE 3.5: Leverage centrally shared services and resources.								
Initiative 3.5.1: Enhance MHUG projects and business operations through ICT optimization.	<ul style="list-style-type: none"> Number of digital services launched and introduced to stakeholders 	TBD	TBD	TBD	-	-	-	-
Initiative 3.5.2: Impact Monitoring support to MHUG [as a shared service].	<ul style="list-style-type: none"> Number of impact evaluations conducted for MHUG projects and businesses 	TBD	TBD	TBD	-	-	-	-

Strategic Initiatives	OVI	Baseline	Target	Annual Targets				
				Yr01	Yr02	Yr03	Yr04	Yr05
Initiative 3.5.3: <i>Communications and branding support to MHUG [as a shared service].</i>	<ul style="list-style-type: none"> Number of educational materials and resources created for patient education. Percentage of updates provided by hospital leadership to inform staff about organization. Number of engagement and reach on social media platforms and the hospital's website 	TBD	TBD	TBD	-	-	-	-
STRATEGIC OBJECTIVE 3.6: Undertake joint Group-level strategic investments.								
Initiative 3.6.1: <i>Partnering in building the MUG Estate Maintenance Fund.</i>	<ul style="list-style-type: none"> Amount of monetary fund contributed to the MUG Estate Maintenance Fund 	TBD	TBD	TBD	-	-	-	-
Initiative 3.6.2: <i>Jointly invest in the solar energy generation project.</i>	<ul style="list-style-type: none"> Progress of the solar energy project Percentage reduction in monthly electricity expenses after the solar energy system upgrade 	TBD	TBD	TBD	-	-	-	-
Initiative 3.6.3: <i>Jointly invest in the water harvesting project.</i>	<ul style="list-style-type: none"> Percentage of water harvest project completed. Percentage reduction in monthly water cost after completing water harvest project. 	TBD	TBD	TBD	-	-	-	-
Initiative 3.6.4: <i>Jointly invest in the biogas production project.</i>	<ul style="list-style-type: none"> Percentage of biogas project completed. Percentage reduction in monthly wood and charcoal cost after completing biogas project. 	TBD	TBD	TBD	-	-	-	-
Initiative 3.6.5: <i>Make MHUG programmes and businesses responsive to Climate Change.</i>	<ul style="list-style-type: none"> Percentage of biogas project completed. Percentage reduction in monthly wood and charcoal cost after completing biogas project 	TBD	TBD	TBD	-	-	-	-

7 Appendix

7.1 Appendix 1: Acknowledgements

Mildmay Hospital Uganda appreciates the individuals outlined below for diverse roles they handled in the process of developing this MHUG 2023-2028 Strategic Plan.

Mildmay Uganda Board of Directors	
Dr. Jeff Sebuyira Mukasa, Board Chairperson	Engineer Proscorvia Njuki, Vice Chairperson
Dr. Vincent Okoth Oketcho, Board Member	Dr. Sarah Nakubulwa, Board Member
Mr. Geoffrey Kakira, Board Member	Mrs. Florence Kaddu, Board Member
Ms. Sarah Kyejjusa, Board Member	Mr. Fulukas Enyaga, Board Member
Mr. Patrick Mugenyi, Board Member	

Mildmay Uganda Executive Leadership Team	
Dr. Barbara Mukasa, Executive Director	Mr. George Wamushiya, Deputy Exec. Director
Dr. Yvonne Karamagi, Deputy ED Programmes	Mrs. Edith Akankwasa, Principal MIHS
Mrs. Mary Odiit, Acting Director MRCU	Dr. Catherine Senyimba, Director Programme Mgt
Mr. Daniel Businge, Director F&O	

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Doreen Sekibombo (Dr.)	Hospital Planner / Healthcare Business Expert
Elizabeth Okware	Programming & Funding Planner
Emmanuel Omony	Hospital Planner / Laboratory Expert
John Leonard Kyalimpa	Hospital Planner / Pharmacy Expert
Regina Nanyunja	Research Mainstreaming Planner
Sylvia Nakuya	Research Mainstreaming Planner
Tadeo Atuhura	Communications & Branding Planner
Yvonne Karamagi (Dr.)	Hospital Planning Lead Planner
Richard K. Wanyama	Planning Expert - Facilitator - Process Leader

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7.3 Appendix 3: Document Revision History

Chapter & Page of Proposed Review	Summary of Review Action Taken	Name of Reviewer	Revision Date