

Third Quarter 2021 Report

BulamuHealthcare.org

50,087

Clinical Support Team
Patients Treated

2,822

Total Surgery
Patients

138

HCE Program Partner
Health Centers

An Operating Room Back in Use After 11 Years

In September, Bulamu's Clinical Support Teams (CSTs) of **20** licensed Ugandan doctors, nurses, and midwives began treating patients at **4** health centers in Isingiro District, located on the Tanzanian border in southwest Uganda. When the teams arrived, along with our partners from the Rotary Club of Kampala-Naguru, we found that one of the two operating rooms in this district of 420,000 people had not functioned for **11** years, lacking basic equipment including a sterilizer, patient stretcher, surgical instruments, and a generator to cover frequent power outages.

Thanks to a generous \$5,000 gift from an individual Rotary Club member, we purchased the necessary equipment and returned the operating room to working condition one week later. In the following 2 weeks, **13** patients received C-sections in the operating room. Previously, pregnant women with obstructed labor had to drive over an hour to the nearest government hospital, where they faced greater costs and delays. One town council member told us, "I have had three women deliver babies in my car on the way to Mbarara hospital because they could not afford the ambulance fee."

Hospital equipment is readily available in Uganda, but government budgets are often inadequate to pay for it. Because Bulamu is a direct provider of medical services in Uganda and we see needs on the ground that larger international organizations miss, our programs improve patient care using cost-effective, common-sense solutions.



Bulamu's team during a surgery at the newly reopened operating room in Isingiro District.



Pictured with her healthy baby girl, Grace was the first maternity patient treated in the Rugaga Health Center IV's newly rehabilitated operating room. Years before, she had been told she would never have a child and that if she did, it would be a complicated delivery. Though Grace did need a C-section, now that her local Health Center IV is functioning for surgeries, her care was a routine procedure once again.

YTD Highlights: Surgery Programs

While Uganda's public hospitals and clinics generally provide free primary care, fees are charged for most surgeries that the rural poor simply cannot afford. To address this backlog of untreated patients, Bulamu holds a Surgery Intensive (SI) shortly after the conclusion of each Clinical Support Team's 8-week placement. We bring in a 50-person surgery team to one of the district's community hospitals, set up multiple operating rooms, and conduct about 250 surgeries over a 5-day period. Many of these patients with chronic conditions such as hernias and fibroids have gone untreated for years.

**Bulamu Surgery Intensive Program
Namutumba District, Sept 6-10, 2021**

	Procedure	Cases	%
1	Hernia repairs	97	39
2	Excisions	74	30
3	Umbilical hernia repairs	13	5
4	Orchidopexies	13	5
5	Thyroidectomies	12	5
6	Hydrocelectomies	10	4
7	Hysterectomies	6	2
8	Hemorrhoidectomies	3	1
9	C-sections	2	1
10	All other procedures	19	8
	Total	249	100

In June, we signed a formal partnership agreement with the Association of Surgeons of Uganda (ASOU), whose members include the country's top academic surgeons, and their members are now regularly operating at these events and contributing to the continuous improvement of our work that is central to Bulamu's operations.

So far in 2021, we have performed or supported a total of **2,822** surgeries at no charge to patients, improving their lives immeasurably. Through 3 quarters, we held **5** surgery intensives at an average cost of **\$28,000**, treating a total of **1,191** patients for **\$120** per case. Three more SIs are planned in Q4. In addition, our CSTs have performed **438** more routine surgeries during their 8-week placements, including **390** C-sections. Previously, our partner districts ran out of supplies and shut down their operating rooms about 50% of the time. With the start of our Essential Surgical Supplies program, **1,177** patients have received surgeries this year, many of whom would otherwise have been turned away. Finally, we have sponsored **16** Angel Patients who were referred to higher level acute care hospitals for more specialized surgeries.

HCE Program Update - Bulamu's Scale Up Continues

With the Memorandum of Understanding (MOU) signed with Isingiro District in September, we now have MOUs and partnerships with **9** local government districts that operate a total of **274** public hospitals and clinics. At the end of **Q3**, our health systems strengthening programs were installed in **138** of those facilities, including all the larger ones, with the rollout to the remaining **136** health units coming in the next four months. The HCE hospital/clinic management system utilizes weekly and monthly graphic reports to give health unit in-charges and district officials data they have not had before, allowing them to provide stronger management oversight and drive continuous improvement in patient care metrics.

Productivity and performance improve because we are now monitoring absenteeism by measuring "payroll yield," which is how many days each week a clinician is on site treating patients, and we are tracking how many "patients equivalents" each clinician treats, adjusting for average time of each interaction. With reports like these never available in Uganda's public health system before, and perhaps in any African country, we are confident the health system's performance will improve over time. One year from now, the HCE program will be in place in 10% of the 3200 public health facilities in Uganda, demonstrating the benefits of applying standard business management techniques in a sub-Saharan African public health setting. Our partner districts have become the strongest advocates for recognizing the positive impact of our programs.