VISION

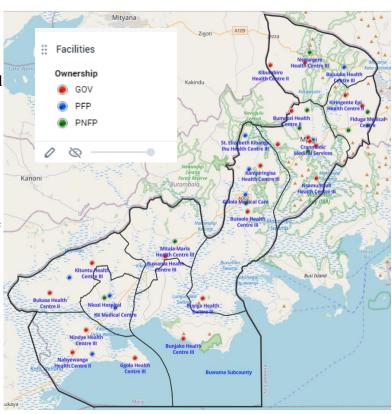
A responsive, resilient and people centered health system that protects and promotes the health and well-being of all the people in Mpigi District.

MISSION

To promote and ensure Universal Health Coverage in Mpigi District through evidence-based and technically sound policies, standards and strategies that are client centered.

CORE VALUES AND PRINCIPLES

The Health department strives to coordinate the provision of user-friendly services by promoting the notion of putting all clients in the sector at the forefront with openness to dialogue and feedback for purposes of progressive improvement.



Our core values include;

Client Focus and Responsiveness

The Health department endeavors to ensure that the district's health services meet the client needs and expectations, and their interests will be the first priority of the health service. The health system shall attend to all its clients' needs, ideas, and feedback in a timely and professional manner.

Equity

Mpigi District's health services ensure equal access to the same health services for individuals with the same or similar health needs.

Respect

The district's health system respects promotive health aspects of cultures and traditions of the people of Uganda. The health system respects individual identity and autonomy of our partners in line with the professional code of conduct and national policies.

Professionalism, integrity and ethics

Work in the district's health system is to be performed with the highest level of professionalism, integrity, honesty, openness and trust as detailed in the ethics guidelines enforced by professional bodies to which the various actors are affiliated.

Professional Development

We value learning, feedback, coaching and mentoring by taking responsibility to gain the required skills development to meet our clients' needs.

Transparency and Accountability

We ensure a high level of efficiency and effectiveness in the development and management of the national health system. We believe in accountability for our performance, not only to the political and administrative system, but, above all, to the community.

Distribution of Health Service Delivery points.

Category	Public PNFP		PFP	Total
	Govt	UCMB/ UPMB/ UMMB,	Private	rotar
Hospital	0	1	2	2
H/C IV	1	0	0	1
H/C III	11	8	13	31
HC II	7	1	10	13
Prison Clinics- HCII	5	0	0	5
Police Clinics - HCII	2	0	0	2
Total	26	10	25	61

Demographic data FY 2022-23

Population group	Projected Population	
Population Estimate	302,106	
Males (48.6%)	146,824	
Females (51.4%)	155,282	
Infants below 1 yr (0.043)	12,991	
(Under 5yrs) 0.205	61,932	
Women in Child Bearing Age (0.23)	69,484	
Pregnant Women (0.05)	15,105	
Expected Deliveries (0.0485)	14,652	
Vitamin A Supplementation (0.192)	58,004	
Deworming (0.484)	146,219	
Nutrition Assessment (0.205)	61,932	
Under 15 Years (0.43)	129,906	
TB Cases (0.00243)	734	
Teenage Girls (0.128)	38,670	
6-11 months (0.0193)	5,831	
12-59 months (0.1728)	52,204	
1-5 Yrs (0.153)	46,222	
6-14 yrs (0.331)	99,997	
Girls 10 Yrs of Age (0.0154)	4,652	
Non Pregnant (0.18)	54,379	
Orphans Children <18 yrs (0.109)	32,930	
Women of Rep Age (15-49 Yrs) (0.23)	69,484	

Disease Burden/Top 10 Causes of Morbidity; FY 2021-2022.

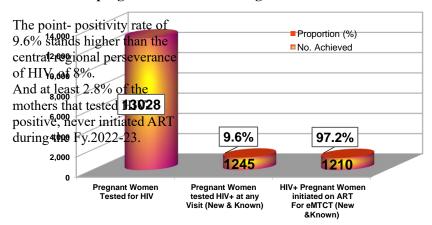
#	Diagnosis	Total	Proportion
1	Malaria Total	49798	19%
2	Cough or cold - No Pneumonia	44162	17%
3	Gastro-Intestinal Disorders (non-Infective)	13243	5%
4	Urinary Tract Infections (UTI)	13082	5%
5	Hypertension	8228 39	
6	Tooth extractions	7497 39	
7	Pneumonia	7286	3%
8	Dental Caries	6345	2%
9	Intestinal Worms	6331	2%
10	Skin Diseases	5790	2%
11	All others	101845	39 %
	Total	263607	

What Has been done

Health service coverage:

Mpigi District Health Achievements (July-2022 – June 2023)				
Indicator	Target	No. Achieved	% Achieved	
OPD New Attendance	302106	248,480	82%	
OPD New Attendance <5yrs	61932	38,863	63%	
ANC 1st Visit for women	15105	14,077	93%	
ANC 4th Visit for women	15105	7,951	53%	
First dose IPT (IPT-1)	15105	11,769	78%	
Second dose IPT (IPT-2)	15105	11,469	76%	
Third dose IPT (IPT-3)	15105	8,522	56%	
Pregnant Women receiving free LLINs	14077	12,031	85%	

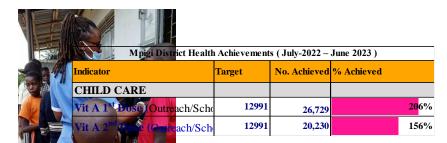
HIV Positive pregnant women initiating ART For eMTCT



Child Immunization

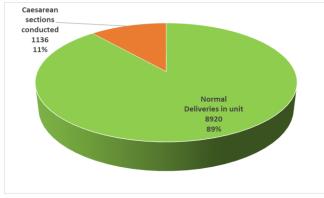
Mpigi District Health Achievements (July-2022 – June 2023)				
Indicator	Target	No. Achieved	% Achieved	
Immunization				
BCG < 1yr	12991	11,004	85%	
Polio 3 < 1yr	12991	10,558	81%	
DPT-HepB+Hib 1 <1yr	12991	11,697	90%	
DPT-HepB+Hib 3 <1yr	12991	10,638	82%	
PCV 1 < 1yr	12991	11,767	91%	
PCV 3 < 1yr	12991	10,732	83%	
Measles < 1yr	12991	10,492	81%	
Children fully immunized <1yr	10492	8,577	82%	





Deliveries in unit



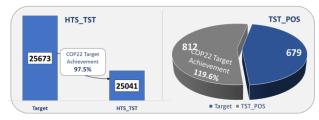


At least 11% of the institutional deliveries, conducted where cesarean section

HIV Testing Services

Mpigi District Health Achievements (July-2022 – June 2023)					
Indicator	Target	No. Achieved	% Achieved		
HTC/CIRCUMCISED					
Individuals Tested	192864	54,634	28%		
Tested HIV positive (positivity)	15429	1,656	11%		
Couples tested	54,634	2,922	5%		
MARPS	54,634	21,807	40%		
HIV+ linked to care	1,656	1,584	96%		
male Circumcised	4000	7,428	186%		

HTS_TST	TST_POS	TX_New	HTS_Yield	Linkage
25041	812	799	3.2%	98.4%



Generally, 28% of the population sought for HIV testing services, of which 5% were couples and 40% were Most AT Risk Persons (MARPs). 1656 (11%) were newly tested HIV positive and 1584 (96%) linked to care.

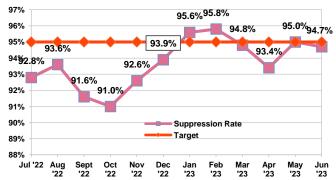
Active clients on ART as of end June 2023

ART services for the public health facilities, as per the COP year 2022, 25041 (97.5%) of the target was active dealer. With a relatively any service of 19.2% and an out standing linkage to HIV care

HIV SERVICES LAST QUARTER?	3.2% and	<mark>l an out st</mark>	<mark>anding linkage t</mark> o
New patients Offron 81 40 core	396	356	89.9%
New clients started on ART	356	312	87.6%
Active on ART-last QTR		14,410	
Newly Enrolled in HIV Care (Screened for TB)	312	312	100.0%
Received CPT/Dapsone -last QTR ART	14,410	2,320	16.1%
Assessed for TB- ART-last QTR	14,410	14,457	100%
Assessed for nutrition - ART-last QTR	14,410	11,530	80.0%

The dynamic, fragile population not only socially stigmatized but also economically impoverished, in the rural and peril-uburn setting of the district, hit by domestic upsurges, that affect their adherance ending up with average supression rate.

HIV Viral Load Suppression



What we hope to do.

- Delivery of Uganda minimum Health care Package with emphasis on Malaria, TB, HIV/AIDS and Reproductive Health.
- Carry out routine and integrated outreaches
- Control/Prevention of epidemics.
- Expanding and promoting VCT
- Strengthening Social Mobilisation for Health.
- Improvement of environmental sanitation in Schools, Trading centres & at House hold level.
- Support supervision, M & E.
- Operational research to ensure evidence based care.
- Strengthen data management reporting and use at all levels.

•