



THE REPUBLIC OF UGANDA
MINISTRY OF HEALTH

Guidelines for Designation, Establishment and Upgrading of Health Units

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FOREWORD

Over time, it has been observed that there is continued mismatch between health infrastructure development and other resources such as personnel, equipment, medicines and supplies across the country. This has resulted in inefficiency in investments and service delivery in the sector. On the other hand, there have been several requests by districts and other stakeholders for establishment of new facilities and upgrading of existing ones from one level to another. Whereas the relevant criteria for health facilities development has been stated or implied in the Health Sector Strategic and Investment Plan, the requests indicate that it is not well articulated. It has therefore become necessary to develop more detailed guidelines for establishment of new facilities as well as upgrading existing ones.

These guidelines have been prepared by the Ministry of Health to enhance economy, efficiency and effectiveness in infrastructure development and harmonise it with other inputs to improve service delivery in the health sector. They are specifically aimed at providing criteria and procedures for designating level of service and upgrading of health centres from one level to another as well as establishing new ones. These guidelines and procedures apply to both government and private-not-for-profit facilities.

Another challenge has been the disagreements on the designation of levels of health facilities between the different stakeholders. It is therefore necessary that clear and more detailed guidelines are provided to avoid such contradictions in future.

Districts and other stakeholders intending to establish or upgrade health facilities are urged to strictly adhere to these guidelines. No requests for creation or upgrading of facilities will be considered or approved unless it meets the set criteria and has followed the procedures prescribed in these guidelines.



Dr. Jane Ruth Aceng

DIRECTOR GENERAL HEALTH SERVICES

GUIDELINES FOR DESIGNATION, ESTABLISHMENT AND UPGRADING OF HEALTH FACILITIES

1.0 Background to the Guidelines

The Policy and objective of the Health Sector Strategic and Investment Plan on Health Infrastructure Development is to provide a network of functional, efficient and sustainable Health Infrastructure within 5km walking distance to every homestead. Health Infrastructure is composed of Buildings, Medical and hospital *equipment, Communication systems & equipment and Ambulance and transportation facilities.*

Over the last 10 years of HSSP I & II, many stakeholders including central and local governments, Non-Government Organisation as well as communities have invested in health infrastructure development that has resulted into an increase in the number of health facilities as demonstrated in Table 1. It has however been noted that there has been a mismatch between investments in health Infrastructure and other components of the health services delivery which need to be harmonised.

Table 1: Increment in number of health units between 2004 and 2011

Level of Health Unit	2004			2011		
	GoU	PNFP	Total	GoU	PNFP	Total
Hospital	55	42	97	65	62	127
Health Centre IV	151	12	163	166	14	180
Health Centre III	718	164	882	868	251	1119
Health Centre II	1055	388	1443	1662	496	2158
Totals	1979	606	2585	2761	823	3584

Source: Health facilities Inventories 2004 & 2011

This guideline is intended to provide the criteria for designation, upgrading and establishment of health facilities to enhance efficiency and effectiveness of subsequent infrastructure investments towards improved service delivery. It should be adhered to whenever stakeholders wish to establish, upgrade or assign a level of service delivery to an existing health unit.

2.0 Objective of the Guidelines

The main objective of these guidelines is to enhance economy, efficiency and effectiveness in infrastructure development and harmonising it with other input for improved service delivery in the health sector. The guidelines are specifically aimed at providing criteria for:

- Designating levels of service delivery to health centres
- Upgrading of health centres from one level to another
- Establishment of new health facilities

3.0 Rationale for development of the Guidelines

According to the Health Sector Strategic and Investment Plan (HSSIP), there is a mismatch between health infrastructure and the health workforce across the country which has resulted in the inefficient use of these two critical investments. It has also been observed that accommodation for staff in existing facilities remains a big challenge and is the major reason for low staff numbers. Inadequate or poor medical equipment in existing facilities is also of great concern as many of the existing health facilities lack the necessary equipment while only 40% of the available equipment is in good condition. There is therefore need to rationalise health infrastructure investments to ensure that they effectively and efficiently contribute towards improved health service delivery.

Furthermore, the criteria for designation of level of service delivery to health centres in HSSIP was based on administrative units whereby each parish was expected to have a HC II; a HC III for each sub-county; a health centre IV for a health sub-district or county and hospital for each district. The plan also made reference to population, but this was majorly for identifying administrative units which were densely populated as to deserve more than one health centre of a particular level. The overriding principle for establishment of new health centres was, and still remains, to provide health services to within 5 km distance. The HSSIP I assumed that by providing facilities by administrative units as indicated above, the criteria for 5km walking distance would be achieved. However over the years, many of these administrative units have been subdivided and reduced in size and population; as more and more districts were created. Going by the HSSIP I criteria would therefore result in an over investment.

On the other hand, there have been several requests by districts and other stakeholders for establishment of new facilities and upgrading of existing facilities from one level to another. Whereas the relevant criteria has been stated or implied in the Health Sector Strategic and Investment Plan, some of the requests seem to indicate that it is not well understood and therefore the need for more detailed criteria to guide the processes for establishment of new facilities as well as upgrading existing ones.

Another problem has been the disagreements on the designation of levels of health facilities between the different stakeholders. There have been several incidences of disagreement on the levels assigned to health centres between parties concerned with infrastructure, medicines and supplies as well as staffing;

the communities; the districts authorities and other government departments. It is therefore necessary that clear and more detailed guidelines are provided to avoid such contradictions in future.

4.0 Criteria for designation, establishment and upgrading of health facilities

4.1 General Strategic Positioning

The general strategy of the HSSIP on health infrastructure development is:

- Consolidation of the existing facilities so that they can effectively deliver the services at their designated levels of service
- To ensure that new health units are located in those areas which are **underserved** and thereby enable increased accessibility

4.2 Criteria for Designation of Levels of Services Delivery of Health Units

Seven levels of health care delivery, which determine the level of infrastructure at the respective levels of service, have been identified as indicated in Table 2. The levels assigned to individual health centres in the Ministry of Health Facilities' Inventory of May 2011 shall be maintained. The strategy thereafter should be to consolidate the assigned level of service in accordance with the strategies of the HSSIP by providing missing facilities as necessary. Designation of new levels of service delivery to health facilities, especially to higher levels of services, shall follow the criteria for upgrading of health facilities outlined in these guidelines.

Table 2: Levels of Health Service delivery

Level of Health Unit	Level	Target Population	Services provided
Health Centre I (Village Health Teams)	Village	1,000	Community based preventive and Promotive Health Services. Village Health committee or similar status.
Health Centre II	-	5,000	Preventive, Promotive and Outpatient Curative Health Services, outreach care, and emergency deliveries.
Health Centre III	-	20,000	Preventive, Promotive, Outpatient Curative, Maternity, inpatient Health Services and Laboratory services.
Health Centre IV	Health Sub-District	100,000	Preventive, Promotive Outpatient Curative, Maternity, inpatient Health Services, Emergency surgery and Blood transfusion and Laboratory services.
General Hospital	-	500,000	In addition to services offered at HC IV, other general services will be provided. It will also provide in service training, consultation and research to community based health care programmes.
Regional Referral Hospital	-	2,000,000	In addition to services offered at the general hospital, specialist services will be offered, such as psychiatry, Ear, Nose and Throat (ENT), Ophthalmology, dentistry, intensive care, radiology, pathology, higher level surgical and medical services.
National Referral Hospital	-		These provide comprehensive specialist services. In addition, they are involved in teaching and research.

Source: Health facilities Inventory 2011

4.3 Criteria for Establishment of new Health Units

As earlier stated, most of the existing health facilities are constrained in delivering services designated for their respective level especially due to lack of staff, staff houses and equipment. Consequently, establishment of new facilities should be limited as this would further aggravate the problem of inadequately facilitated health units. Notwithstanding the constraints, new facilities shall be established in either of the following circumstances:

1. Where a community of about 5,000 people is not in reach of a health unit within 5 km walking distance. A Health Centre II would then be established
2. If access to available health units for recognisable community is observed to be constrained by geographical features such as mountains, water, conflict or otherwise. The appropriate level of facility in this case would be determined by survey and assessment on a case by case basis. Factors to consider would include but not be limited to population of the community, distance to health facilities of different levels and ease of attracting staff to work in the area.

4.4 Criteria for Upgrading of Health facilities

It has been observed that most of the existing health facilities are constrained in delivering services designated for their respective level especially due to lack of staff, staff houses and equipment. Higher levels of services require more of these inputs to function effectively. Any proposals to upgrade (infrastructural or otherwise) of health facilities should therefore be properly planned with evidence of resources to ensure that all the necessary inputs shall be available to avoid wasteful investments. In this regard, upgrading of health facilities shall only be recommended if the following criteria with regards to Infrastructure and staffing are met:

4.4.1 Infrastructure requirements

1. The health centre should have all the medical buildings and equipment for the current level of service.
2. There should be at least 50% of staff houses' requirements of the current level of service.
3. There should be a clear plan for providing the additional infrastructure for the higher level anticipated

Table 3 shows the basic requirements for medical buildings and the 50% staff houses for Health Centre II to General Hospital. The Medical Equipment standard lists and standard building plans, by level, can be obtained on request from the Health Infrastructure Division, Ministry of Health.

Table 3: Standard building infrastructure requirements by level of health unit

Level of Health Unit	Basic Buildings' Requirements	
Hospital	<u>Medical Buildings</u> <ul style="list-style-type: none"> - Out Patient Department - Administration Offices - Operation Theatre [2 rooms] - Female Ward [at least 15 beds] - Paediatric Ward [at least 15 beds] - Maternity Ward [at least 15 beds] 	<ul style="list-style-type: none"> - Male Ward [at least 15 beds] - Mortuary - Placenta Pit and Medical Waste Pit <u>Staff houses</u> <ul style="list-style-type: none"> - 80No. Housing Units+ Ancillary structures
Health Centre IV	<u>Medical Buildings</u> <ul style="list-style-type: none"> - Out Patient Department - Drug Store with HSD Office - Operation Theatre - General Ward - Maternity Ward 	<ul style="list-style-type: none"> - Mortuary - Placenta Pit and Medical Waste Pit <u>Staff houses</u> <ul style="list-style-type: none"> - 18No. Housing Units + Ancillary structures
Health Centre III	<u>Medical Buildings</u> <ul style="list-style-type: none"> - Out Patient Department - Maternity / General Ward - Placenta Pit & Medical Waste Pit 	<u>Staff houses</u> <ul style="list-style-type: none"> - 10No. Housing Units + Ancillary structures
Health Centre II	<u>Medical Buildings</u> <ul style="list-style-type: none"> - Outpatient Department - Emergency Delivery - Placenta Pit - Medical Waste Pit 	<u>Staff houses</u> <ul style="list-style-type: none"> - 4No. Housing Units + Ancillary structures

4.4.2 Staffing requirements

To qualify for upgrading, the following criteria should be met:

1. The staffing at the health centre should be at least 65% of the core technical staff of the current level of service
2. There should be a clear plan of how the additional staff for the upgraded level of services is scheduled to be realised.

The staffing norms for HC II to General Hospital are annexed to these guidelines

5.0 Procedure for designation, establishment and upgrading of health facilities

The Constitution of Uganda (1995) and the Local Government Act (1997) mandate the Local governments to plan, budget and implement health policies and health sector plans. Accordingly, provision of health services in Uganda has been decentralised to districts and health sub-districts which play a key role in the delivery and management of health services. These local governments manage public general hospitals and health centres as well as supervising and monitoring all health activities including those in the private sector. Local Governments therefore are well placed to determine the health facilities requirements in their areas and identifying the needs for establishment of new health units and those that require upgrading.

However, the Ministry of Health Headquarters like all other national level institutions / departments has retained, among others, the functions of resource mobilisation, policy formulation, setting standards and quality assurance. In light of this framework, the Ministry of Health has set out the following procedures in Table 4 for authorisation of establishment of new and upgrading of existing health units intended to ensure that the criteria outlined in these guidelines are adhered to.

6.0 Application of the Guidelines

These Guidelines and procedures apply to both government and private-not-for-profit facilities. They shall also be part of the requirements for issuance of licences.

Table 4: Procedure for authorisation of establishment of new and upgrading of health facilities

Activity	By Whom	Responsible Person	Review Period
1 Identification of need and initiation of the process for establishment of a new facility or upgrading of existing.	Community, District Health Team, Lower Level Local Governments, NGOs or other Development Partner	None	None
2 Document the justification for the need with necessary statistics and data and submit proposal to District Health Officer	Community, District Health Team, Lower Level Local Governments, NGOs or other Development Partner	None	None
3 Technical review of the proposal; needs assessment and verification of statistical data as well as checking for compliance with policy and these guidelines. If satisfactory, submit the proposal to the district social services sub-committee for further review	District Health Team	District Health Officer	60 days
4 Evaluation of the proposal on the social and economic benefits over other proposed social projects with due consideration of equity in distribution of resources in the district including cost benefit analysis. If approved submit to the District Council	District Standing Committee on Health	Secretary for Health	30 days
5 Review of the proposal on feasibility & viability of the proposals in view of the availability and effective utilisation of resources in the district. If approved by the District Council, submit request for approval by the Director General of Health Services, Ministry of Health. <i>[The requests should be accompanied with copies of both the District Council resolution and the minutes of the District Health Team meeting supporting the development].</i>	District Council	District Chairman	30 days
6 Review of the proposal by Ministry of Health.			30 days
6.1 Review by relevant working groups at Ministry of Health Headquarters. If approved submit to Senior Management Committee (SMC)	- Health Infrastructure Working Group - Human Resources for Health Working Group	Secretaries of Working Groups	30 days
6.2 Ratification by the Senior Management Committee and if approved submit to the Director General of Health Services	Senior Management Committee	Secretariat to SMC	30 days
7.0 Final approval and response to the Chief Administrative Officer	Director General of Health Services	DGHS	None

Annexes

Annex 1: Application Form for Upgrading / Establishment of health facilities

Annex 2: Staffing Norms for HC II to General Hospital

Annex 1: Application for establishment and upgrading of Health Facilities



APPLICATION FOR ESTABLISHMENT AND UPGRADING OF HEALTH FACILITIES

SECTION I: TO BE FILLED BY APPLICANT

1. Applicant:

Category	Local Government	Private Not for Profit	Private
Name

2. Request for:

a. *Upgrading:* From: To:

b. *Establishment of New:* Level of Health Facility:

3. Details on the Location of Health Centre proposed for Upgraded / Establishment

(i) District:

(ii) Health Sub-district:

(iii) Sub-county:

(iv) Parish:

(v) Distance to the nearest Health Facility

Direction	Distance	Level of Facility
Eastkm
Westkm
Southkm

Northkm
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(vi) Special geographical features:

.....
.....
.....

(vii) Population information

Geographical Area	Population
Parish	
Sub-County	
Health Sub-District	

4. Plan for development and operational resources for the requested facility

a. Planned source of funds for development:

b. Currents staffing levels: Attach detailed list

.....
.....
.....

c. Plan for acquiring staff (additional in case of upgrading):

.....
.....
.....

d. What will be the source of funds for operational expenses?

.....
.....
.....

Signature by authorised person:

Name:

Date:

SECTION II: EVALUATION BY THE DISTRICT HEALTH TEAM *(To be completed by District Health Officer)*

5. Information submitted is accurate: Yes ☐ No ☐
6. Request justifiable and feasible: Yes ☐ No ☐
7. Approval: Request Approved ☐ Request not approved: ☐

If not approved, state reason for disapproval:.....

Sign & Stamp:..... Date:

District Health Officer

N.B: If approved, the request should be submitted to the District Council through the standing committee on Health for ratification

SECTION III: APPROVAL BY THE DISTRICT COUNCIL *(To be completed by the Chief Administrative Officer)*

8. Request approved by District Council: Yes ☐ No ☐

If approved, attach District Council Resolution / Minute

Sign & Stamp:..... Date:

Chief Administrative Officer

Annex 2: Staffing Norms for Health Centre II to General Hospital