

ANNUAL REPORT KAWEMPE HOME CARE April 2017 – March 2018





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Kawempe Home Care

VISION

A world of hope, love and care in which people living with HIV/AIDS, TB and cancer can live life in its fullness.

MISSION

To improve the quality of life for people living with HIV/AIDS, TB and cancer through creation of sustainable community based model of holistic care that comprises of treatment, prevention and support.

OBJECTIVES

- 1. To provide comprehensive holistic care to people living with TB, HIV/AIDS and cancer in the community
- 2. To provide care and support to AIDS orphans and vulnerable children to enable them have better opportunities in life
- 3. To train health professionals and health workers in basic palliative care
- 4. Empower the poor and vulnerable communities through livelihood projects and social enterprises

CORE VALUES

- Compassionate care
- Honesty & integrity
- Accountability & transparency
- Excellence
- Non-discrimination/ respect for each other
- Commitment to empowering and developing people to their optimum potential.

Forward- Board Chairman



Executive Summary



Executive Director's Remarks

Dear friends and partners,

On behalf of the staff, volunteers and clients of Kawempe Home Care (KHC), I welcome you to join us in this review of the work done in the year 2017-18. During this year, we celebrated our 10th anniversary and we greatly appreciate all our friends and partners who participated in these festivities. We appreciate the great work that was done by the founder members and all staff who have participated in the development of KHC over the years.

We have continued to be focused on achieving our mission "to improve the quality of life of people living with HIV/AIDS, Tuberculosis and Cancer through the creation of a sustainable community based model of care that comprises prevention,

treatment and support".

Our community based holistic model of care has enabled us to reach out and provide a service to 2,114 people with HIV/AIDS 105 people with TB and 34 people with cancer during the year. This model of care has enabled KHC to make a significant contribution to the fight against HIV/AIDS using the 90-90-90 UNAIDS strategy. It has also enabled a high quality community based Directly Observed Therapy service for TB patients and a good home based palliative care service for people with cancer.

This has been a very productive year for KHC and we are delighted to have made a positive contribution towards the fight against HIV/AIDS. At the end of the year, we had a total of 2063 clients active in care and of these 2059 (99%) are on ART. During the year, 11979 people were tested for HIV; 472 (3.9%) of these turned HIV positive and 335 (70.9%) were enrolled in care. 3799 (31.7%) of the people who were tested were key populations from the hotspots of Kawempe Division.

With the support of our partners the Infectious Diseases Institute who are funded by CDC and the American Cancer Society's SOURCE program we have strengthened our capacity in financial management, project management, human resource management, quality assurance and resources mobilization. We would like to thank them for this wonderful support.

This year is the final year of our strategic plan and the process is underway to conduct an evaluation of the work done during the last five years and develop a plan for the next period through wide consultations with stakeholders.

The achievements this year have been made possible by our development partners I.e. the Centre for diseases control and prevention (CDC) who find the Kampala region HIV project that is implemented by IDI, Kindern Eine Chance who fund the hostel project for children with cancer, Hope for Children who supported prevention of mother to child transmission services. Sustain health partnerships who supported a community based family planning project, the American Cancer Society who provided support to get the hostel attain the minimum acceptable standards, Horizont3000 who

provide technical assistance in monitoring and evaluation and resources mobilization, Samaritan Health Care and Hospice who support our palliative care program and our private donors in Australia, USA, Norway, the United Kingdom, Denmark and Uganda. We really appreciate all the support provided through the year.

I would also like to thank Team KHC for the wonderful team spirit and excellent work that they have done during the year. All our achievements have been made possible by their hard work.

Finally we greatly appreciate our board of directors for the guidance and mentorship they have provided to the KHC management team.

Yours sincerely,

Dr. Samuel Guma Executive Director

Comprehensive Holistic Care



Picture 1: A nurse dressing a child

1.1 Medical Department

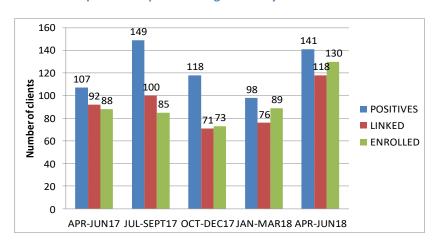
The Medical Department ensures care and treatment of clients with HIV/AIDS, TB and cancer at the KHC health facility, Kasangati outreach reaches the most in need. This is done with the support of the community volunteers who take services like community HIV testing services targeting men, commercial sex workers, and family planning services. To ensure quality services, support supervisions are done by medical team and managers.



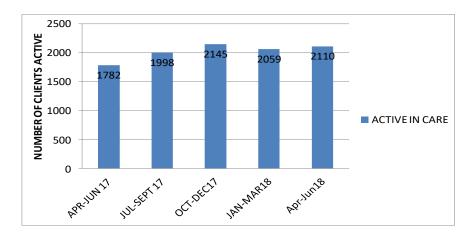
Picture 2: HIV targeted testing service

The following are a representation of the annual performance on key indicators:

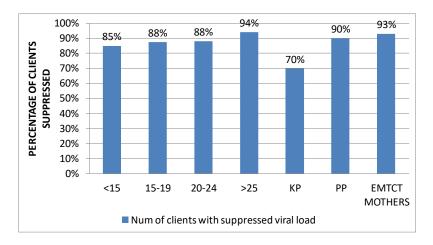
Graph 1: HTS uptake throughout the year



Graph 2: Active clients on ART throughout the year



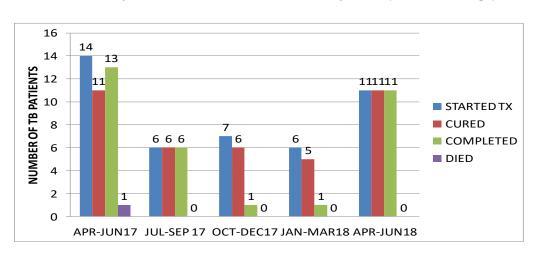
Graph 3: Viral Load suppression rates April-June 2018



1.2 Integrated services

Tuberculosis

All our clients are regularly screened for TB, 277 clients were presumed to have TB and 105 of them were confirmed with active TB by the aid of TB diagnostic algorithm. 34 of these are HIV positive and 17 HIV negative. By the end of the year, 35 clients were active on TB treatment. There are 50 clients that are active on the CB dots program.



Graph 4: TB treatment outcomes for all TB patients (12-15 months ago)

Prevention of Mother to Child Transmission

The 167 active mothers on the EMTCT program for this annual period, 64 were newly enrolled and all the mothers are on ART.

Family Planning



Other activities are community family planning services for women and girls. Community volunteers offered education, referral and simple family planning methods to 2797 women and girls during the reporting period. Sensitization by Community volunteers for men who may refer their spouses takes place in sports bars. As well sensitization for ladies is done by hair dressers in salons, where ladies spend often many hours.

Cervical Cancer Screening

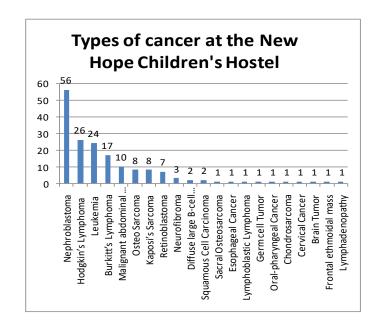
There were 105 women and girls screened for cancer and only 2 cases were identified positive and referred to Mulago Hospital for further management.

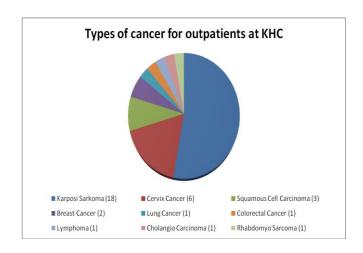
Picture 3: A counselor sensitizing men about family planning

Palliative Care

KHC offers palliative care to clients with cancer at the facility and at the New Hope Children's Hostel. The palliative care services for outpatients at the facility include pain relief, psychosocial, spiritual and social support. This period, KHC had 34 clients in cancer care at 29 (85%) are HIV positive, 10 received oral morphine, 10 were visited at their home and 8 died. The New Hope Children's Hostel accommodated 168 children during the reporting period, who are under investigations or on active cancer treatment at Uganda Cancer Institute /Mulago Hospital. The nurse supervises and follows up on medical appointments.

The types of cancer at the New Hope Children's Hostel are shown in the chart below.





Orphans and Vulnerable Children Care

2.1 New Hope Children's Hostel

Due to the growing epidemic of cancer in Uganda, Kawempe Home Care established the New Hope Children's Hostel in September 2016 with the



aim of increasing access to specialist care for poor and vulnerable children with cancer who are below 18 years through provision of palliative care, psychosocial and legal support.

Specialist care for children with cancer is mainly available at the paediatric oncology ward at the Uganda Cancer Institute in Kampala. This is where all children diagnosed with cancer are referred for treatment all over Uganda. This takes approximately two weeks to prepare a patient for cancer treatment and an average of 3 weeks of treatment cycles. The Hostel provides accommodation, nutritious meals, transport to and from UCI and psychosocial support, legal and palliative care.

Since September 2016, the hostel has cared for 240 children, and April 2017 to March 2018, 168 children have been accommodated.



Picture 5: Lesson time with the social worker

2.2 Home Care Educational Support

The project has provided education support to 25 children most vulnerable children affected or infected by HIV/AIDS. The project aims ensuring children receive standard quality education.



Table 1: Number of beneficiaries on the school fees program

| Education Levels | Number of children | HIV infected | HIV affected |
|------------------|--------------------|--------------|----------------|
| | | | (HIV negative) |
| Primary | 19 | 13 | 6 |
| Secondary | 6 | 3 | 3 |
| Total | 25 | 16 | 9 |

Picture 6: One of KHC supported student

The OVC section organizes quarterly HES parent meetings to strengthen the responsibilities towards their children.

2.3 Teens Club and Adolescent program

Quarterly adolescent meetings and caretaker meetings are carried out to give updated information, support the exchange and address issues like ART adherence of HIV positive children on the program. In twelve school visits, performance of students was checked, individual challenges discussed and the enabled to support of HIV positive students especially in boarding schools.

Picture 7: Adolescent meeting at KHC



school

Sustainability

3.1 Skills Development and Empowerment

KHC runs two income generating projects that contribute to the income for the

organisation and help in the sustainability plan and these includes the Beads for Education and the Tailoring project. The Beads for Education project focuses on the production of paper beads for necklaces, bracelets and rosaries by KHC clients that we empower with such skills. The make them and sell them to the organisation to enhance their incomes too.

Picture 7: Some items in the shop

The tailoring project has its workshop at KHC premises and employs the majority of our youth clients, improving on their wellbeing and boosting their income. KHC has trained over 45 tailors, has 28 sewing machines and currently has employed 12 tailors.

All the beads and tailoring products are sold in the shop at Kawempe Home Care, at local exhibitions and conferences as well as internationally through online marketing by our ambassadors, friends and partners. During the last year, we got the chance to work on two big orders from our partner organizations; Palliative Care Association of Uganda and European African Palliative Care Association and this income has supported in paying fees for the orphan and venerable children on the program

3.2 Resource Mobilization & Networking

The resource mobilization section raises funds to secure and support the holistic care program through proposal development, establishing business contacts for Corporate Social Responsibility, create and maintaining good partnerships with donors, organizing public events, social media campaigns, sharing information with our funders and soliciting for in kind donations. Our main partners are Infectious Diseases Institute (IDI), Kindern eine Chance, Samaritan Health Care and Hospice and American Cancer Society and HORIZONT3000.

Volunteering



KHC has volunteer's policy which helps to manage and support volunteers during their stay at the facility. KHC has developed a wonderful relationship with various volunteers that keep referring other, thus improving on the human resource gaps and sharing various skills and experiences from each other. This year we received 11 volunteer and we would like to appreciate them for all the support rendered to us.

Picture 8: Volunteer at KHC

Partnership

KHC has kept its relationship with its partners like Uganda Cancer Institute, Uganda Cancer Society, Ministry of Health and American Cancer Society who have continuously support our cancer patients, organizational development through Source Program by American Cancer Society

Due to our partnership, KHC was able to participate in the Palliative Cara Association of Uganda conference and African

Palliative Care conference were KHC actively participated by presenting Oral presentations and Poster presentations.



Picture 9: visit from MoH and ACS

the

10th Anniversary Celebrations



To commemorate this milestone, KHC received visitors from the Samaritan Healthcare & Hospice New Jersey, USA. On the 27th, celebrations began with a march-past from KHC premises with 400 participants to Pimbasi Secondary School in Kyebando.

Activities included blood donations conducted by the Uganda blood bank, HIV counseling and testing; HPV vaccination for ten-year-old girls for prevention of cervical cancer and KHC also donated 10 cans of paint to the school.





And on the 28th, the New Hope Children's Hostel was

official open by Dr. Noleb Mugisha from the Uganda Cancer Institute who reported that each year in Uganda 40,000 children undergo cancer treatment, and majority are from extremely poor families who are unable to provide basic needs for themselves thus need such support that KHC offers. On that day KHC was privileged to have the guest of honor as Dr. Umaru

Ssekabira- Head of Training IDI and Dr. Donna Kabatesi Program Manager - Centre for Diseases Control. During the celebrations KHC founder members, partners and friends were awarded with certificates in recognition

and appreciation for their tremendous contribution to the growth and development of KHC over the past 10 years and later a cake was shared.



Kawempe Home Care 10th Anniversary Celebrations' Pictures







Financial & Administration Report

Human Resources and Capacity building

During this period we maintained a very high staff retention rate of 99%. This is attributed to good leadership and good working environment. We held one team building activity, one management training for managers and coordinators. Majority of the staff in administration participated in governance and organizational development and paticipated in organisational development Source program by American Cancer Society. KHC performance award was won by which Ms. Musimenta Ruth

Finance Report

The finance section under Administration department is glad to have successfully completed the financial year 2017-2018. This report will include the income and expenditure breakdown of Kawempe Home care from April 2017 to March 2018.

INCOME

Restricted funding

| IDI | 929,628,005 |
|-------------------------|---------------|
| ACS | 94,642,600 |
| Culture without borders | 8,415,000 |
| Oasis change makers | 437,500 |
| Kindern en chance | 82,522,805 |
| Hope for children | 13,840,000 |
| Horizont3000 | 3,763,584 |
| Sustain UK | 14,146,750 |
| Unrestricted funding | |
| Tailoring | 70,742,960 |
| Beads | 3,529,447 |
| Client contribution | 31,313,600 |
| Bidding | 358,000 |
| Student's contribution | 800,000 |
| Private donors | 38,957,998 |
| GRAND TOTAL | 1,293,098,249 |

EXPENDITURE

| Objective | Expenditure |
|------------------------------------|---------------|
| ADMINISTRATION | |
| | 621,993,884 |
| COMPREHENSIVE HOLISTIC CARE | 220 050 702 |
| PROVIDE INFORMATION, EDUCATION AND | 328,059,782 |
| COMMUNICATION TO FOSTER POSITIVE | 106,469,600 |
| BEHAVIOR CHANGES THAT RESULT IN A | |
| REDUCTION IN THE SPREAD OF HIV | |
| PROVIDE CARE AND SUPPORT TO | |
| CHILDREN SUFFERING FROM CHILDHOOD | 155,474,500 |
| CANCER | |
| PROVIDE CARE AND SUPPORT TO AIDS | 97,090,538 |
| ORPHANS AND VULNERABLE CHILDREN | |
| TRAINING HEALTH PROFESSIONALS AND | |
| HEALTH WORKERS IN PALLIATIVE CARE | 4,488,000 |
| Grand Total | 1,313,576,304 |



Leadership Team



Mr. Byaruhanga Aloysius Board Chairman



Ms. Immaculate Owomugisha Board member- Legal Advisor



Dr. Victor Musime
Board member – Medical Representative



Ms. Komugisha Sarah Board Member Founders representative.



Mr. Bweete Simon Board member- Client

Management Team



Dr. Guma Samuel. Executive/ Medical director



Mr. Gerever Niwagaba Program Manager



Ms. Patricia Nafuna Admin & Finance Manager



Ms. Ruth musimenta
Skills Dev't & Empowerment
Manager



Mrs. Diana Kambere Nkurunziza



Ms. Alicitidia Tusiimemukama Manager Community & Social



Ms. Maureen Buhiire Quality Assurance Manager



Ms. Clair Namulwa Hostel Administrator

